For	"9	90	Return of Organization Exempt Fro Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Co			OMB No. 1545-0047
			Do not enter social security numbers on this form as	-		Open to Public
Depa Interr	rtment nal Reve	of the Treasury enue Service	► Go to www.irs.gov/Form990 for instructions and th	-	-	Inspection
A For the 2020 calendar year, or tax year beginning $JUL 1$, 2020 and ending $JUN 30$, 2021						
Β	Check if	C Name o	forganization		D Employer identifie	cation number
	applicable: FOUNDATION FOR IMPACT ON LITERACY AND					
X	X Change LEARNING, INC.					
	Name Chang		usiness as		16-16501	30
	Initial	Number		om/suite	E Telephone number	
	Final	14 C	RESKILL PLACE		631-424-	
_	termii ated	City or t	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,789,567.
	Amer		INGTON, NY 11743		H(a) Is this a group re	
	Appli tion pend	ing F Name a	nd address of principal officer: DIANE BARRETT		for subordinates	
	-	SAME	AS C ABOVE		H(b) Are all subordinates in	
	I Tax-exempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527				list. See instructions	
			FOUNDATIONFORIMPACTLITERACYANDLEARN		H(c) Group exemption	
	orm o		X Corporation Trust Association Other ►	L Year c	of formation: 2002	State of legal domicile: VA
Г	—	Summary	be the organization's mission or most significant activities: ${\begin{subarray}{c} {{\tt SUPPOR}} \label{eq:subarray}}$	<u>א פרי</u>		
Se	1	Briefly describ	S WHILE PROMOTING LITERACY AND LEAR	NTNC	BV COLLABO	RATING ON
nan			$x \triangleright$ if the organization discontinued its operations or disposed			
ver	2		· · · · · · · · · · · · · · · · · · ·			4 sets.
ဗီ	4		lependent voting members of the governing body (Part VI, line Ta)			2
s S	5		of individuals employed in calendar year 2020 (Part V, line 2a)			0
itie	6		of volunteers (estimate if necessary)			0
Activities & Governance			d business revenue from Part VIII, column (C), line 12			0.
◄			business taxable income from Form 990-T, Part I, line 11			0.
			· · ·		Prior Year	Current Year
e	8	Contributions	and grants (Part VIII, line 1h)		1,323,610.	1,788,591.
Revenue	9	Program servi	ce revenue (Part VIII, line 2g)		0.	0.
Sev.	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)		2,557.	976.
ш	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,326,167.	1,789,567.
	13	Grants and si	milar amounts paid (Part IX, column (A), lines 1-3)		162,000.	163,000.
			to or for members (Part IX, column (A), line 4)		0.	0.
es			r compensation, employee benefits (Part IX, column (A), lines 5-10) $_{\dots\dots}$		0.	0.
ens			undraising fees (Part IX, column (A), line 11e)	🖵	0.	0.
Expense			ing expenses (Part IX, column (D), line 25)		1 0 6 6 2 0 0	1 205 668
			es (Part IX, column (A), lines 11a-11d, 11f-24e)		1,066,302.	1,205,667.
		-	es. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,228,302.	1,368,667.
<u> </u>	19	Revenue less	expenses. Subtract line 18 from line 12		97,865.	420,900.
Net Assets or Fund Balances		-			ginning of Current Year 1,003,546.	End of Year 1,417,153.
Asse Bala	20	Total assets (I			123,613.	116,320.
Vet /	21		: (Part X, line 26) fund balances. Subtract line 21 from line 20		879,933.	1,300,833.
	22 art II				• د د د ٫ ۲ ۰	-,JUU,UJJ.
		-	I declare that I have examined this return, including accompanying schedules an	nd stateme	ents, and to the best of m	/ knowledge and helief it is
			. Declaration of preparer (other than officer) is based on all information of which			, and wrong o and bollon, it is
	,					

Sign	Signature of officer		Date						
Here	DIANE BARRETT, EXECUTI	VE DIRECTOR							
	Type or print name and title								
	Print/Type preparer's name	Preparer's signature Date	Check PTIN						
Paid	JONATHAN D. MOLL, CPA	10/27	/21 ^{if} p01053700						
Preparer	Firm's name ▶ BELFINT, LYONS &		Firm's EIN ▶ 51-0232399						
Use Only	Firm's address 1011 CENTRE RD,	STE 310							
WILMINGTON, DE 19805 Phone no. 302-225-0600									
May the IF	RS discuss this return with the preparer shown abo	ove? See instructions	X Yes No						
032001 12-2	J32001 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2020)								

12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2020) SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	FOUNDATION FOR IMPACT ON LITERACY AND
	990 (2020) LEARNING, INC. 16-1650130 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: SUPPORT SCHOOLS AND EDUCATIONAL PROGRAMS WHILE PROMOTING LITERACY AND
	LEARNING BY COLLABORATING ON EFFORTS TO PROVIDE EDUCATORS AND STUDENTS
	WITH RESOURCES, CURRICULA, PROJECT BASED LEARNING, AND COMMUNITY
	SERVICE PROJECTS.
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 largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 1,056,672. including grants of \$ 152,000.) (Revenue \$)
	LEAD4CHANGE AND FOUNDATION FOR IMPACT ON LITERACY AND LEARNING CREATED A PROGRAM INVOLVING LEADERSHIP LESSONS AND SERVICE LEARNING FOR LOCAL
	COMMUNITY PHILANTHROPIC EFFORTS. THE LEAD4CHANGE STUDENT LEADERSHIP
	PROGRAM IS A TEACHER-LED EDUCATIONAL PROGRAM COMBINING STANDARDS-BASED
	CURRICULUM ABOUT LEADERSHIP AND PROJECT BASED LEARNING THROUGH A
	CHALLENGE OF SOLVING NEEDS IN OUR COMMUNITIES. THE LESSONS AND PROJECT
	BASED LEARNING CURRICULUM ADVANCES STUDENT'S SKILLS IN COMMUNICATION,
	LITERACY, RESEARCH AND WRITING.
4b	(Code:) (Expenses \$ 83,608. including grants of \$) (Revenue \$)
	PANASONIC NORTH AMERICA STUDENT ECO CITIZENSHIP PROJECT IS A COLLABORATION BETWEEN THE FOUNDATION FOR IMPACT ON LITERACY AND
	LEARNING AND PANASONIC NORTH AMERICA CORPORATION. THE PROJECT GUIDES
	STUDENTS THROUGH LESSONS ON ENVIRONMENTAL ISSUES AND ENGAGES STUDENTS
	TO STUDY ENVIRONMENTAL ISSUES IN THEIR COMMUNITY. TEACHERS GUIDE
	STUDENTS THROUGH THE LESSONS AND HELP THEM TO DEVELOP SOLUTIONS THAT
	ARE RECORDED IN A STUDENT TEAM ECO PICTURE DIARY. THREE WINNING TEAMS
	ARE CHOSEN AND ARE REWARDED WITH PRIZES FROM PANASONIC. THE LESSONS AND
	PROJECT-BASED LEARNING CURRICULUM ADVANCE STUDENT'S SKILLS IN
	COMMUNICATION, LITERACY, RESEARCH, AND WRITING.
4c	
	ALBERTSONS COMPANIES FOUNDATION HAS AGREED TO SUPPORT A NEW PROGRAM AVAILABLE FOR GRADES 6-9 IN STATES WITH ALBERTSONS RETAIL LOCATIONS.
	EXPLORE.ACT.TELL TEACHES YOUUNG PEOPLE TO BECOME AWARE OF FOOD
	INSECURITY ISSUES IN THEIR NEIGHBORHOODS. LESSONS HELP STUDENTS LEARN
	SKILLS NEEDED TO UNDERSTAND THE PROBLEM AND CREATE AND IMPLEMENT A
	HUNGER SOLUTION PROJECT.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 11,000 · including grants of \$ 11,000 ·) (Revenue \$)
4e	Total program service expenses ► 1,204,852.
00000	Form 990 (2020)

FOUNDATION FOR IMPACT ON LITERACY AND LEARNING, INC.

Form 990 (2020) LEARNING, IN
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	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			37
	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		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
-	similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		Х
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? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		х
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		Х
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, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	115		
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			37
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40		х
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
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? <i>If</i> " <i>Yes</i> ," <i>complete Schedule G, Part I</i>	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		
.0	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		х	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Δ	

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	990 (2020) LEARNING, INC. 16-165	0130	Р	age 4
Pa	T 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		x	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23	x	
24a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
214	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			v
	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? <i>If</i> "Yes," <i>complete Schedule L, Part II</i>	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		
21	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? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	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?/f			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		x
31	contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i>			X
32	Did the organization requidate, terminate, or dissolve and cease operations in res, complete schedule N, Part	31		
52	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
~-	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	07		x
38	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		- 23
30	- · · · · · · · · · · · · · · · · · · ·	38	x	
Pa	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	1	

16-1650130	Page 5
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Form	1990 (2020) LEARNING, INC. 16-165	0130	P	age 5
Pa	Tt V 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,			
	filed for the calendar year ending with or within the year covered by this return	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	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)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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		Х
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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		
9	Sponsoring organizations maintaining donor advised funds.			
а	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		
10	Section 501(c)(7) organizations. Enter:			
а	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:			
а	Gross income from members or shareholders	_		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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	_		
	Enter the amount of reserves on hand	44-		X
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		x
	excess parachute payment(s) during the year?	15		
16	If "Yes," see instructions and file Form 4720, Schedule N.	16		x
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		

Form **990** (2020)

FOUNDATION FOR IMPACT ON LITERACY AND LEARNING, INC.

Form 990 (2020)

rt VI	Governance,	Management	, and Dise	closure For each	"Yes" response	e to lines 2 througl	1 7b below,	and for a "No	" response
	to line 8a, 8b, or	10b below, describ	e the circun	nstances, processes	s, or changes o	n Schedule O. See	e instruction	IS.	

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			37
_	officer, director, trustee, or key employee?	2		<u>x</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			v
	of officers, directors, trustees, or key employees to a management company or other person?	3	X	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	~	x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			x
	more members of the governing body?	7a		
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	76		x
•	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		
8		0.0	х	
	The governing body?	8a 8b	- 23	x
ь 9	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	uo		
9	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	9		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	100	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		Х
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		х
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright VA , NY , NJ , KY			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only	/) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	nd fina	ncial	
•	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ►			

14 CRESKILL PLACE, HUNTINGTON, NY 11743

FOUNDATION FOR IMPACT ON LITERACY AND

Form 990	(2020)	LEARNING,	INC.				16-1
Part VII	Compensation	of Officers, D	irectors,	Trustees,	Key Employees,	Highest	Compensated
	Employees, an	d Independen	t Contrac	ctors			

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 nor any related organization compensated any current officer, director, or trustee.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos	ition	than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	than is bot r/trus	h an	compensation	compensation	amount of
	week		er an	laad	recio	n/trus	lee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	rustee	l trus		ee	npen		(00-2/1099-00130)		and related
	below	d ual t	itiona	_	nploy	st co i vyee	5			organizations
	line)	ndivi	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			5
(1) MARCIE CRAIG POST	0.50			_			_			
BOARD CHAIRMAN	35.00	x		x				0.	215,173.	15,623.
(2) DIANE BARRETT	30.00									
EXECUTIVE DIRECTOR		X		Х				0.	102,000.	0.
(3) ROSS SCHAUFELBERGER	0.50									
TREASURER		X		Х				0.	0.	0.
(4) AKIN HARRISON	0.50									
SECRETARY		X		Х				0.	0.	0.
		1								
		1								

			IMI	PAG	СТ	01	N I	'I'	TERACY AND		6 6 0 0			•
Form 990 (2020)	LEARNING									16-1	650	L30	Pa	age 8
•••••••	rs, Directors, Tru		nploy	/ees			ghes	st C	Compensated Employe		i		(5)	
(A) Name and tit	le	(B) Average hours per week	box	not c , unle	Pos heck	more rson	than o is both pr/trust	n an	(D) Reportable compensation from	(E) Reportable compensatic from related	on	am	(F) timate iount other	
		(list any hours for related organization below line)	S Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS		fro orga and	pensa om the anizati I relate nizatie	e ion ed
			_											
			_											
											_			
1b Subtotal c Total from continuation	sheets to Part V							>	0.	317,1	0.			23.
 d Total (add lines 1b and 2 Total number of individu compensation from the 	als (including but							lo r	0 • received more than \$100	317 , 1 0,000 of reportab		1	5,6	23. 0
											г		Yes	No
3 Did the organization list line 1a? If "Yes," comple	•			-	-	-		-		•		3		х
 For any individual listed and related organization 	on line 1a, is the s	sum of reporta	ble c	omp	ensa	atior	n and	l ot	her compensation from	the organization		4	x	
5 Did any person listed on rendered to the organiza	line 1a receive or	accrue compe	ensat	ion f	from	any	unre	elat	ted organization or indiv	idual for services	;	5		x
Section B. Independent Cor	ntractors													
1 Complete this table for y the organization. Report	-	-	-								npensa	ation fr	rom	
LINDA SPAHR	(A) ame and busines	s address							(B) Description of s PROJECT DIRE		C	(C omper		n
11029 WEBSTER D	RIVE, LUS	BY, MD	20	65	7				LEAD4CHANGE			11	5,7	40.
2 Total number of indeper \$100,000 of compensat			not li	mite	d to		se lis 1	stec	d above) who received n	nore than				

FOUNDATION FOR IMPACT ON LITERACY AND LEARNING, INC.

					ING, I	INC	•			16-1650	130 Page 9
Pa	rt V	/	Statement of Re	ven	ue						
			Check if Schedule O	conta	ains a resp	onse	or note to any li				
								(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts t	1	а	Federated campaigns		1a						
nan			Membership dues								
₹ Pmc			Fundraising events								
àifts ar /			Related organizations					1			
s, C			Government grants (contr								
tion r Si			All other contributions, gifts,								
ibut			similar amounts not included	abov	e 1f	1,	788,591.				
Contributions, Gifts, Grants and Other Similar Amounts		g	Noncash contributions included in	lines	1a-1f 1g	\$					
arc		h	Total. Add lines 1a-1f				►	1,788,591.			
							Business Code				
ice	2	а									
erv ue		b									
m S ven		c									
gra		d									
Program Service Revenue		e 4	All other program convice								
_			All other program service Total. Add lines 2a-2f								
	3		Investment income (includ								
	Ŭ		other similar amounts)					976.			976.
	4		Income from investment of								
	5		Royalties		-	-					
			,		(i) Rea	l	(ii) Personal				
	6	а	Gross rents	6a]			
		b	Less: rental expenses	6b							
		с	Rental income or (loss)	6c							
		d	Net rental income or (loss)			►				
	7	а	Gross amount from sales of		(i) Securi	ties	(ii) Other	-			
			assets other than inventory	7a				4			
ø		b	Less: cost or other basis								
evenue			and sales expenses	7b				4			
leve			Gain or (loss)	7c			L				
er R	0		Net gain or (loss) Gross income from fundraisin			·····					
Other	0	a	including \$		-						
•			contributions reported on								
			Part IV, line 18			8a					
		b	Less: direct expenses								
			Net income or (loss) from				►				
	9	а	Gross income from gamin	g act	tivities. See	•					
			Part IV, line 19								
			Less: direct expenses								
			Net income or (loss) from			es	<u></u>				
	10	а	Gross sales of inventory, I								
			and allowances					-			
			Less: cost of goods sold								
		C	Net income or (loss) from	Sales		лу	Business Code				
Miscellaneous Revenue	11	а									
ane	••	b									
sells		c									[
Alisc B			All other revenue								
~			Total. Add lines 11a-11d				►				
	12		Total revenue. See instruction	ons				1,789,567.	0.	0.	976.

FOUNDATION FOR IMPACT ON LITERACY AND LEARNING, INC.

16-1650130 Page 10

Form 990 (2020) LEARNING, INC.
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 respon			(0)	
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
	rants and other assistance to domestic organizations nd domestic governments. See Part IV, line 21	152,000.	152,000.		
	arants and other assistance to domestic				
in	ndividuals. See Part IV, line 22	11,000.	11,000.		
	arants and other assistance to foreign				
о	rganizations, foreign governments, and foreign				
	ndividuals. See Part IV, lines 15 and 16				
	enefits paid to or for members				
	compensation of current officers, directors,				
	ustees, and key employees				
	ompensation not included above to disqualified				
p	ersons (as defined under section 4958(f)(1)) and				
p	ersons described in section 4958(c)(3)(B)				
	other salaries and wages				
	ension plan accruals and contributions (include				
	ection 401(k) and 403(b) employer contributions)				
	Other employee benefits				
	ayroll taxes				
	ees for services (nonemployees):				
a M	lanagement	124,650.		124,650.	
	egal				
	ccounting				
	obbying				
	rofessional fundraising services. See Part IV, line 17				
f Ir	nvestment management fees				
g C	Other. (If line 11g amount exceeds 10% of line 25,				
C	olumn (A) amount, list line 11g expenses on Sch 0.)	615,858.	590,777.	19,320.	5,761. 3,123.
12 A	dvertising and promotion	321,654.	318,531.		3,123.
13 O	Office expenses	15,205.	4,294.	10,911.	
14 Ir	nformation technology				
15 R	loyalties				
16 O	Occupancy				
17 T	ravel	2,709.	2,709.		
18 P	ayments of travel or entertainment expenses				
fc	or any federal, state, or local public officials				
19 C	conferences, conventions, and meetings				
20 Ir	nterest				
21 P	ayments to affiliates				
22 D	epreciation, depletion, and amortization				
23 Ir	nsurance				
al lir	ther expenses. Itemize expenses not covered bove (List miscellaneous expenses on line 24e. If ne 24e amount exceeds 10% of line 25, column (A) mount, list line 24e expenses on Schedule 0.)				
	PRINTING, SHIPPING & SU	125,541.	125,541.		
ьĒ	BANK CHARGES	50.		50.	
c _					
d					
e A	Il other expenses				
25 T	otal functional expenses. Add lines 1 through 24e	1,368,667.	1,204,852.	154,931.	8,884.
26 J	oint costs. Complete this line only if the organization				
re	eported in column (B) joint costs from a combined				
e	ducational campaign and fundraising solicitation.				
C	heck here b if following SOP 98-2 (ASC 958-720)				

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10c

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33

1,003,546.

123,613.

123,613.

564,704.

315,229.

879,933.

1,003,546.

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	320,597.	1	361,255.
	2	Savings and temporary cash investments	475,949.	2	787,148.
	3	Pledges and grants receivable, net	207,000.	3	268,750.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from 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		5	
	6	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	
ţs	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
<	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			

10a

1,417,153. Form **990** (2020)

1,300,833.

1,417,153.

116,320.

116,320.

596,389.

704,444.

LEARNING, INC.

basis. Complete Part VI of Schedule D

b Less: accumulated depreciation 10b

11 Investments - publicly traded securities

Total assets. Add lines 1 through 15 (must equal line 33)

Loans and other payables to any current or former officer, director,

Other liabilities (including federal income tax, pavables to related third parties, and other liabilities not included on lines 17-24). Complete Part X

Organizations that follow FASB ASC 958, check here 🕨

Net assets with donor restrictions

Organizations that do not follow FASB ASC 958, check here 🕨 🗋

Total liabilities. Add lines 17 through 25

and complete lines 27, 28, 32, and 33.

and complete lines 29 through 33.

Total liabilities and net assets/fund balances ...

Investments - other securities. See Part IV, line 11

Investments - program-related. See Part IV, line 11

Intangible assets

Other assets. See Part IV, line 11

Accounts payable and accrued expenses

Grants payable

Deferred revenue Tax-exempt bond liabilities

Escrow or custodial account liability. Complete Part IV of Schedule D

controlled entity or family member of any of these persons

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

of Schedule D

Net assets without donor restrictions

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

trustee, key employee, creator or founder, substantial contributor, or 35%

Form 990 (2020)

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24 25

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Liabilities

Net Assets or Fund Balances

FOUNDATION	FOR	IMPACT	\mathbf{ON}	LITERACY	AND
LEARNING	INC.				

Form	1990 (2020) LEARNING, INC.	16-	-16501	L30	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,789		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,	,368		
3	Revenue less expenses. Subtract line 2 from line 1	3				00.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		879	9,9	33.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	1,	,300),8	33.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis				37	
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	з,			
	consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				37	
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	Idit			v
	Act and OMB Circular A-133?		·	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ					1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2020)

SCHEDULE A	Dublic Cha	vity Status an			un in a st		OMB No. 1545-0047
(FOULD 330 OF 330-EZ D		rity Status an					2020
Ca		nization is a section 50 ⁻ 47(a)(1) nonexempt cha			or a section		ζυζυ
Department of the Treasury		Attach to Form 990 or F					Open to Public
Internal Revenue Service	Go to www.irs.gov	/Form990 for instruction	ons and th	ne latest i	nformation.		Inspection
Name of the organization FOUN	DATION FOR	IMPACT ON L	ITERA	CY AN	D		identification number
	NING, INC.						6-1650130
Part I Reason for Public	Charity Status.	(All organizations must c	omplete tł	nis part.) S	See instruction	าร.	
The organization is not a private found	lation because it is: (For lines 1 through 12, c	heck only	one box.)			
1 A church, convention of ch	urches, or associatio	on of churches described	d in sectio	n 170(b)([.]	1)(A)(i).		
2 A school described in sect	ion 170(b)(1)(A)(ii).	Attach Schedule E (Forn	n 990 or 99	90-EZ).)			
3 A hospital or a cooperative	hospital service orga	anization described in se	ection 170)(b)(1)(A)(i	ii).		
4 A medical research organiz	ation operated in co	njunction with a hospital	described	d in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,
city, and state:							
5 An organization operated for	or the benefit of a co	llege or university owned	d or opera	ted by a g	overnmental	unit descrik	ed in
section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6 A federal, state, or local go	vernment or governn	nental unit described in s	section 17	70(b)(1)(A)	(v).		
7 X An organization that norma	Illy receives a substa	intial part of its support f	rom a gov	ernmental	unit or from t	he general	public described in
section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8 A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9 An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college
or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state o	f the colleg	e or
university:							
10 An organization that norma							
activities related to its exen							
income and unrelated busi		(less section 511 tax) fro	om busine	sses acqu	ired by the o	rganization	after June 30, 1975.
See section 509(a)(2). (Co							
11 An organization organized	-	•	•				_
12 An organization organized	-	•	-			•	
more publicly supported or	-						neck the box in
lines 12a through 12d that	• •			-		-	
a Type I. A supporting orga	-	-	•	-			
the supported organization organization. You must o			a majority (upporting
b Type II. A supporting org	-		tion with it	e sunnort	od organizativ	on(e) by ba	vina
control or management of	•			• •	•		•
organization(s). You mus						igo ino oup	portod
c Type III functionally inte			in connec	tion with	and functiona	llv integrate	ed with
its supported organizatio						ing integration	
d Type III non-functionally	. , .					rted organi	zation(s)
that is not functionally inf						•	.,
requirement (see instruct							
e Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	а Туре I, Туре	II, Type III	
functionally integrated, o							
f Enter the number of supported of	organizations						
g Provide the following information							
(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	nization listed ng document?	(v) Amount o	,	(vi) Amount of other
organization		above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)
Total							

Schedule A (Form 990 or 990 EZ) 2020 LEARNING, INC.

Part II

16-1650130 Page 2

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,558,100.	1,414,008.	1,195,000.	1,323,610.	1,788,591.	7,279,309.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1,558,100.	1,414,008.	1,195,000.	1,323,610.	1,788,591.	7,279,309.
5							
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						6,295,860.
6	Public support. Subtract line 5 from line 4.						983,449.
	ction B. Total Support						•
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 4	1,558,100.	1,414,008.	1,195,000.	1,323,610.	1,788,591.	7,279,309.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	213.	1,262.	4,686.	2,557.	976.	9,694.
9			,				•
-	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						7,289,003.
	Gross receipts from related activities,	etc. (see instructio	(ne)			12	.,200,000
	First 5 years. If the Form 990 is for th			ourth or fifth tax w	vear as a section F		
10	organization, check this box and stop	-	st, second, tilla, t			01(0)(0)	
Sec	ction C. Computation of Publ		centage		<u></u>		
	Public support percentage for 2020 (I			olumn (f))		14	13.49 %
	Public support percentage from 2019					15	8.20 %
	33 1/3% support test - 2020. If the c						
	stop here. The organization qualifies	-					
h	33 1/3% support test - 2019. If the c						
~	and stop here. The organization qual	•					
17a	10% -facts-and-circumstances tes						
.,,	and if the organization meets the fact						
	meets the facts-and-circumstances te			-		Ū.	N V
Ь	10% -facts-and-circumstances tes	-				17a and line 15 is	
N.	more, and if the organization meets the	-					
	· •						
10	organization meets the facts-and-circle						
ıö	Private foundation. If the organization	п ий пот спеск а с	JUX UN IINE 13, 16a	, 100, 178, 0F 17D	, check this box a	ind see instruction	s 🕨 📖

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990 EZ) 2020 LEARNING, INC.

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

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(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.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
·	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	A Amounts included on lines 1, 2, and						
1 0							
ł	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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	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 6	(,	(0) = 0	(0, 2010	(0) = 0 + 0		(1) 1 0 101
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
Ċ	Add lines 10a and 10b						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	e organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) orga	nization,
	check this box and stop here						▶□
Se	ction C. Computation of Publi	c Support Pe	ercentage				
15	Public support percentage for 2020 (lin	ne 8, column (f), d	divided by line 13,	column (f))		15	%
16	Public support percentage from 2019	Schedule A, Parl	t III, line 15			16	%
Se	ction D. Computation of Inves	tment Incom	ne Percentage				
17	Investment income percentage for 202	20 (line 10c, colu	mn (f), divided by I	ine 13, column (f))		17	%
	Investment income percentage from 2					18	%
	a 33 1/3% support tests - 2020. If the o					33 1/3%, and	line 17 is not
	more than 33 1/3%, check this box an						
k	33 1/3% support tests - 2019. If the						3%, and
	line 18 is not more than 33 1/3%, chec						
20	Private foundation. If the organization						
	V						

Schedule A (Form 990 or 990 EZ) 2020 LEARNING, INC. 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? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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 1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Schedule A (Form 990 or 990 FZ) 2020 LEARNING, INC.

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Ра	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
с	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		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			

c L The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- 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.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a

2b

3a

3b

Yes No

Schedule A (Form 990 or 990-EZ) 2020 LEARNING, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

1 2 3 4 5 6 7 8		
3 4 5 6 7		
4 5 6 7		
5 6 7		
6 7		
7		
7		
7		
8		
	(A) Prior Year	(B) Current Year (optional)
a		
b		
lc		
d		
2		
3		
4		
5		
6		
7		
8		
		Current Year
1		
2		
3		
4		
5		
6		
	a b c d 2 3 4 5 6 7 8 4 5 6 7 8 1 2 3 4 5 5 5 6 6	(A) Prior Year (A) Prior Year

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

Schedule A (Form 990 or 990-EZ) 2020

Sche	dule A (Form 990 or 990-EZ) 2020 LEARNING, INC	•		1	6-1650130 Page 7
Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _{(continu}	ied)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	IS	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (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	he organization is responsive	9		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2020	าร	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
b	From 2016				
c	From 2017				
d	From 2018				
e	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
c	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				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
e	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 LEARNING , 16-1650130 Page 8 INC. Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) PART II, SECTION C, LINE 17A, FACTS AND CIRCUMSTANCES TEST: THE ORGANIZATION HAS A GOVERNING BODY WHICH REPRESENTS THE BROAD INTERESTS THE PUBLIC. THE ORGANIZATION PROVIDES SERVICES DIRECTLY FOR THE BENEFIT OF THE GENERAL PUBLIC ON A CONTINUING BASIS THROUGH THE PROGRAMS LISTED IN \mathbf{OF} PART III OF THE FORM 990.

FOUNDATION FOR IMPACT ON LITERACY AND

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

Employer identification number

16-1650130

Name	of	the	organ	nizatior
Name	UI.	LI IC	orgai	nzatior

FOUNDATION FOR IMPACT ON LITERACY AND LEARNING, INC. 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

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any 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.

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 for an *exclusively* religious.

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 line 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

FOUNDATION FOR IMPACT ON LITERACY AND LEARNING, INC.

Page **2**

16-1650130

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LIFT A LIFE FOUNDATION, INC. 6000 BROWNSBORO PARK BLVD LOUISVILLE, KY 40207-1681	\$ <u>1,175,000.</u>	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	PANASONIC CORPORATION OF NORTH AMERICA TWO RIVERFRONT PLAZA NEWARK, NJ 07102-5490	\$ <u>103,600.</u>	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	THE ALBERTSONS COMPANIES FOUNDATION 20427 27TH AVENUE PHOENIX, AZ 85027-3241	\$ <u>500,000.</u>	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	ADP FOUNDATION <u>1 ADP BLVD</u> ROSELAND, NJ 07068	\$5,000.	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
		\$	Person Payroll On Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

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			
		(_				

Name of organization

LEARNING, INC.

FOUNDATION FOR IMPACT ON LITERACY AND

Employer identification number

16-1650130

	rganization			Employer identification number				
	ATION FOR IMPACT ON LIT ING, INC.	ERACY AND		16-1650130				
Part III) through (e) and the following line en charitable, etc., contributions of \$1,000 or	try For organizations) that total more than \$1,000 for the year				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
		(e) Transfer of gif	ť					
	Transferee's name, address, and ZIP + 4		Relationship of tra	ansferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
Part I								
		(e) Transfer of gif						
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee				
(a) No.								
`from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
		(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee				
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
		(e) Transfer of gif						
	Transferee's name, address, a		Relationship of transferor to transferee					

SCHEDULE D		Supplementa	al Financial Statements			OMB No. 15	45-0047
(Forr	n 990)	Complete if the ora	anization answered "Yes" on Form 990.			202	<u>′U</u>
Depart	ment of the Treasury		, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.			Open to	
-	I Revenue Service		90 for instructions and the latest informatio ACT ON LITERACY AND			Inspecti	
Nam	e of the organizati	LEARNING, INC.	ACT ON LITERACY AND	Emp		ntification	
Pa	rt I Organiza		ed Funds or Other Similar Funds or	Accou			
		n answered "Yes" on Form 990, Part IV, lin		,			0
	3	, , ,	(a) Donor advised funds	(b) Fund	ds and ot	her accou	nts
1	Total number at er	nd of year					
2		f contributions to (during year)					
3		f grants from (during year)					
4		t end of year					
5	-		writing that the assets held in donor advised for		_	٦	
			exclusive legal control?		L	Yes	└── No
6	•	c	advisors in writing that grant funds can be use	•			
			or donor advisor, or for any other purpose cont	-		Yes	
Pa	impermissible priv		ganization answered "Yes" on Form 990, Part			_ res	NoNo
1		servation easements held by the organizat		i v , in ic <i>i</i> .			
•		of land for public use (for example, recrea	· · · · · · · · · · · · · · · · · · ·	storically	important	t land area	L
		f natural habitat	Preservation of a ce		•		
	Preservation	n of open space					
2	Complete lines 2a	through 2d if the organization held a quali	fied conservation contribution in the form of a	conserva	tion ease	ment on t	he last
	day of the tax yea					e End of th	
а	Total number of co	onservation easements		2 a			
b	Total acreage rest	ricted by conservation easements		2b			
С			ructure included in (a)	. 2c			
d			after 7/25/06, and not on a historic structure				
_							
3		vation easements modified, transferred, re	leased, extinguished, or terminated by the org	anization	during th	ne tax	
4	year	where preparty subject to concernation of	acment is leasted				
4 5		where property subject to conservation ea tion have a written policy regarding the pe					
5		orcement of the conservation easements i				Yes	No
6	,		handling of violations, and enforcing conserva				
•							
7	Amount of expense	 es incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	easemen	its during	the year	
	▶\$				Ū	2	
8	Does each conser	vation easement reported on line 2(d) abov	ve satisfy the requirements of section 170(h)(4)(B)(i)		_	
	and section 170(h)(4)(B)(ii)?			L	Yes	No No
9	In Part XIII, descril	be how the organization reports conservation	ion easements in its revenue and expense stat	tement ar	nd		
			note to the organization's financial statements	that des	cribes the	9	
Da		ounting for conservation easements.	f Art, Historical Treasures, or Othe	r Simil	ar Acco	to	
Fa		f the organization answered "Yes" on Form		1 311111	ar Asse	15.	
10	-	-	58, not to report in its revenue statement and t		hoot worl	<i>(</i> 0	
Ia	•	· •	blic exhibition, education, or research in furthe			15	
		•	ncial statements that describes these items.		public		
b			58, to report in its revenue statement and bala	nce shee	t works o	f	
			exhibition, education, or research in furthera				
	-	ing amounts relating to these items:	•				
	(i) Revenue inclu	ded on Form 990, Part VIII, line 1		🕨 🤋	6		
					6		
2			asures, or other similar assets for financial gai		e		
		unts required to be reported under FASB A					
а							
LHA	For Paperwork R	eduction Act Notice, see the Instruction	s for Form 990.	:	Schedule	D (Form	990) 2020

032051 12-01-20

		ION FOR IM	PACT ON L	ITERACY	AND				
-	dule D (Form 990) 2020 LEARNIN			_			165013		
Par	t III Organizations Maintaining (-	-				nued)	
3	Using the organization's acquisition, access	ion, and other record	ls, check any of th	ne following that	make sigr	nificant use o	f its		
	collection items (check all that apply):								
а	Public exhibition	c		kchange progran					
b	Scholarly research	e	e L Other						
С	Preservation for future generations								
4	Provide a description of the organization's c						Part XIII.		
5	During the year, did the organization solicit o		,	,					٦.,
Da	to be sold to raise funds rather than to be m t IV Escrow and Custodial Arran								_ No
Fai	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete ir the organizat	lion answered "Y	res" on Fo	orm 990, Part	IV, IINE 9, 0	r	
10	Is the organization an agent, trustee, custoo		diany for contributi	one or other acc	ots not inc	sludod			
Ia	on Form 990, Part X?		•				Yes		No
h	If "Yes," explain the arrangement in Part XIII								
			nowing table.				Amour	t	
c	Beginning balance					1c	7 inour		
	Additions during the year					1d			
	Distributions during the year					10 1e			
f	Ending balance					1c 1f			
	Did the organization include an amount on F						Yes		No
	If "Yes," explain the arrangement in Part XIII				•	• • • • • • • • • • • • • • • • • • • •			
Par									
		(a) Current year	(b) Prior year	(c) Two years			ack (e) Fou	r years	back
1a	Beginning of year balance								
	Contributions								
с	Net investment earnings, gains, and losses								
	Grants or scholarships								
	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cur		ce (line 1a. column	(a)) held as:					
а	Board designated or quasi-endowment	,	%						
b	Permanent endowment	%							
с	· ·	%							
	The percentages on lines 2a, 2b, and 2c sho	- ould equal 100%.							
3a	Are there endowment funds not in the posse		ation that are held	and administere	ed for the	organization			
	by:	5				5		Yes	No
	(i) Unrelated organizations						3a(i)		
	(ii) Related organizations								
b	If "Yes" on line 3a(ii), are the related organization								
4	Describe in Part XIII the intended uses of the						·····		
Par	't VI Land, Buildings, and Equipn								
	Complete if the organization answere	ed "Yes" on Form 99	0, Part IV, line 11a	. See Form 990,	Part X, lin	e 10.			
	Description of property	(a) Cost or c	ther (b) Co	st or other	(c) Accu	umulated	(d) Boo	k valu	ie
	· · ·	basis (investr	nent) basi	is (other)	depre	ciation			
1 a	Land								
	Buildings								
	Leasehold improvements								
d	Equipment								
е	Other								
-	Add lines 1a through 1e. (Column (d) must e		X, column (B), line	e 10c.)					0.
						Scheo	dule D (Fori	n 990) 2020

032052 12-01-20

FOUNDATION	I FOR	IMPACT	ON	LITERACY	AND
LEARNING	TNC.				

Schedule D (Form 990) 2020 LEARNING, I	NC.	1	6-1650130 _{Page} 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on 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 er	nd-of-year market value
(1)			-
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15.)		•
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	25.
1. (a) Description of liability	, <u>, , , , , , , , , , , , , , , , </u>		(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 25.)		•
	,	·····	

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... 🚺

FOUNDATION F	FOR IMPAC	T ON LIT	ERACY AND
--------------	-----------	----------	-----------

	dule D (Form 990) 2020 LEARNING, INC.			20120	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per F	Return.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b		4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5		
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem		r Return.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b		4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5		
Pa	rt XIII Supplemental Information.				

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

PART X, LINE 2:

THE FOUNDATION IS A NONPROFIT ORGANIZATION THAT IS EXEMPT FROM INCOME
TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) AND
THEREFORE HAS MADE NO PROVISION FOR FEDERAL INCOME TAXES IN THE
ACCOMPANYING FINANCIAL STATEMENTS. IN ADDITION, THE ORGANIZATION QUALIFIES
FOR THE CHARITABLE CONTRIBUTION DEDUCTION UNDER SECTION 170(B)(1)(A) AND
HAS BEEN DETERMINED BY THE INTERNAL REVENUE SERVICE (IRS) NOT TO BE A
"PRIVATE FOUNDATION" WITHIN THE MEANING OF SECTION 509(A)(2) OF THE IRC.

INCOME NOT RELATED TO THE FOUNDATION'S TAX-EXEMPT PURPOSE MAY BE SUBJECT

TO TAXATION AS UNRELATED BUSINESS INCOME. ACCOUNTING PRINCIPLES GENERALLY

ACCEPTED IN THE UNITED STATES OF AMERICA IMPOSE A THRESHOLD FOR

FOUNDATION FOR IMPACT ON LITERACY AND Schedule D (Form 990) 2020 LEARNING, INC. 16-1650130 Page 5 Part XIII Supplemental Information (continued) DETERMINING WHEN AN INCOME TAX BENEFIT CAN BE RECOGNIZED IN REGARD TO UNCERTAIN TAX POSITIONS. THE FOUNDATION HAS DETERMINED THAT NO LIABILITY FOR UNCERTAIN TAX POSITIONS IS REQUIRED TO BE ACCRUED AND INCLUDED IN THE STATEMENTS OF FINANCIAL POSITION AS OF JUNE 30, 2021.

THE FEDERAL INFORMATIONAL RETURNS OF THE FOUNDATION ARE SUBJECT TO

EXAMINATION BY THE IRS, GENERALLY FOR THREE YEARS AFTER THEY WERE FILED.

SCHEDULE I (Form 990)	0	OMB No. 1545-0047					
(Form 990)		overnments, ar					2020
Department of the Treasury Internal Revenue Service		► Go to www.ir	Attach to For rs.gov/Form990 fo		nation.		Open to Public Inspection
Name of the organization FOUNDATIC LEARNING,		PACT ON LITE	ERACY AND				Employer identification number 16-1650130
Part I General Information on Grants a	nd Assistance						
 Does the organization maintain records criteria used to award the grants or assi Describe in Part IV the organization's pro- 	stance?		· · · · · · · · · · · · · · · · · · ·				
Part II Grants and Other Assistance to					anization answered "\	/es" on Form 990, Par	t IV, line 21, for any
recipient that received more than	\$5,000. Part II ca	n be duplicated if addit	tional space is need	ded.		. <u></u>	-
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
TINY T-BIRDS EARLY CHILDHOOD CENTER/MOHAVE HIGH SCHOOL - 2251 HWY 95 (BUILDING H 107) - BULLHEAD CITY, AZ 86442	86-1027632		15,000.	0.	FMV		GENERAL PURPOSE
COMMUNITY NAVIGATORS 121 ELK STONE TRAIL							
GARNER, NC 27529	82-4863385	501(C)(3)	20,000.	0.	FMV		GENERAL PURPOSE
POWER PACKS PROJECT 2219 DUTCH GOLD DRIVE LANCASTER, PA 17601	26-3009024	501(C)(3)	15,000.	0	FMV		GENERAL PURPOSE
H20 FOR LIFE 1310 HIGHWAY 96 EAST #235							
WHITE BEAR LAKE, MN 55110	26-0338552	501(C)(3)	10,000.	0.	FMV		GENERAL PURPOSE
SCHOOL BOARD OF BROWARD COUNTY, FL/PLANTATION MIDDLE SCHOOL - 600 SE 3RD AVENUE - FORT LAUDERDALE,	05 0012140		10.000		nu		
FL 33301	85-8013140		10,000.	0.	FMV		GENERAL PURPOSE
CASA YOUTH SHELTER 10911 REAGAN ST							
LOS ALAMITOS, CA 90720	95-3218061		10,000.	0.	FMV		GENERAL PURPOSE
 2 Enter total number of section 501(c)(3) a 3 Enter total number of other organization 	•	•	ne line 1 table				<u> 4.</u> 3.

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

FOUNDATION FOR IMPACT ON LITERACY AND

LEARNING, INC. Schedule I (Form 990)

16-1650130 Page 1

art II Continuation of Grants and Othe		incollo organization					
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FE SCHOOL DISTRICT							
02 20TH STREET EAST							
COMA, WA 98424	91-0894349		10,000.	٥.	FMV		GENERAL PURPOSE

Schedule I (Form 990)

Schedule I (Form 990) 2020

LEARNING, INC.

16-1650130

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
ELP OUR TEACHERS FUND GRANT	22	11,000.	0.	FMV	

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE ORGANIZATION'S MANAGEMENT MONITORS USE OF GRANT FUNDS TO ASSURE

COMPLIANCE WITH PROGRAM OBJECTIVES AND DONOR DIRECTIVES.

sc	HEDULE J Compensation Information	OMB No. 1	OMB No. 1545-0047					
	For certain Officers, Directors, Trustees, Key Employees, and Highest	20	20					
•	Compensated Employees		20					
Dena	Artment of the Treasury Complete if the organization answered "Yes" on Form 990, Part IV, line 23.	Open to	Public					
	nal Revenue Service • • • • • • • • • •	-	Inspection					
Nan	ne of the organization FOUNDATION FOR IMPACT ON LITERACY AND		identification number					
	LEARNING, INC.	16-165013	0					
Pa	art I Questions Regarding Compensation							
			Yes No	0				
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 9	990,						
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.							
	First-class or charter travel	al use						
	Travel for companions	dence						
	Tax indemnification and gross-up payments							
	Discretionary spending account	, chef)						
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or							
~	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	_	_				
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,							
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2						
2								
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's							
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization	1110						
	establish compensation of the CEO/Executive Director, but explain in Part III.							
	Compensation committee							
	Independent compensation consultant	mmittaa						
	Form 990 of other organizations	mmillee						
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing							
-	organization or a related organization:							
а		4a	X	2				
b	Participate in or receive payment from a supplemental nonqualified retirement plan?		X					
c			X					
Ū	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.							
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1 I						
	contingent on the revenues of:							
а	The organization?	5a	X	2				
b	Any related organization?	5b	X	2				
	If "Yes" on line 5a or 5b, describe in Part III.							
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1						
	contingent on the net earnings of:							
а	The organization?	6a	X					
b	Any related organization?	6b	Х	:				
	If "Yes" on line 6a or 6b, describe in Part III.							
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments							
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	<u> </u>				
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the							
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		X	<u> </u>				
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in							
	Regulations section 53.4958-6(c)?							
LHA	A For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule J (Form	n 990) 20	20				

Schedule J (Form 990) 2020

LEARNING, INC.

16-1650130

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) MARCIE CRAIG POST	(i)	0.	0.	0.	0.	0.	0.	0.
BOARD CHAIRMAN	(ii)	215,173.	0.	0.	5,964.	9,659.	230,796.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

FOUNDATION	FOR	IMPACT	ON	LITERACY	AND
LEARNING,	INC.				

Schedule J (Form 990) 2020

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2020

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization 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.



16-1650130

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

EFFORTS TO PROVIDE EDUCATORS AND STUDENTS WITH RESOURCES, CURRICULA,

FOUNDATION FOR IMPACT ON LITERACY AND

PROJECT BASED LEARNING, AND COMMUNITY SERVICE PROJECTS.

INC.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

LEARNING,

REFER TO DETAILED DESCRIPTION ON FORM 990, PART III, LINE 4C.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAM SERVICES CONSISTS OF THE FOUNDATION'S HELP OUR TEACHERS

FUND WHICH PROVIDES TEACHERS WITH FUNDS TO PURCHASE THINGS THEY NEED TO

TEACH. THEY WOULD OTHERWISE HAVE TO PURCHASE THESE ITEMS OUT OF THEIR

OWN POCKET. TEACHERS ACROSS THE U.S. CAN APPLY FOR A GRANT TO HELP THEM

WITH EXPENSES RELATED TO A SPECIAL PROJECT OR CLASSROOM SUPPLIES THEY

MAY NEED. THE NUMBER OF GRANTS AVAILABLE WILL DEPEND ON THE AMOUNTS OF

FUNDS RAISED EACH YEAR.

EXPENSES \$ 11,000. INCLUDING GRANTS OF \$ 11,000. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 4: EFFECTIVE JUNE 30, 2021, THE FOUNDATION FOR IMPACT ON LITERACY AND LEARNING (FOUNDATION) AMENDED THEIR ARTICLES OF INCORPORATION AND REMOVED INTERNATIONAL LITERACY ASSOCIATION AS THE SOLE CORPORATE MEMBER. THE FOUNDATION NOW OPERATES AS A PUBLIC CHARITY INDEPENDENT OF THE INTERNATIONAL LITERACY ASSOCIATION.

FORM 990, PART VI, SECTION A, LINE 8B:

THERE ARE NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING

Schedule O (Form 990 or 9						Page 2
Name of the organization	FOR NC.	IMPACT	ON	LITERACY	AND	Employer identification number 16-1650130

BODY.

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

THE FORM 990 IS REVIEWED BY THE GOVERNING BOARD BEFORE SUBMISSION TO THE

IRS.

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

THE ORGANIZATION COMPLIES WITH ALL PUBLIC DISCLOSURES REQUIREMENTS UNDER

THE INTERNAL REVENUE CODE AND APPLICABLE STATE LAWS, AND MAINTAINS ALL

REQUIRED DOCUMENTS AT ITS PRIMARY BUSINESS LOCATION. INFORMATION IS

AVAILABLE UPON REQUEST.

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

WEBSITE SUPPORT:

PROGRAM SERVICE EXPENSES

MANAGEMENT AND GENERAL EXPENSES

FUNDRAISING EXPENSES

TOTAL EXPENSES

MARKETING & COMMUNICATIONS:PROGRAM SERVICE EXPENSES315,166.MANAGEMENT AND GENERAL EXPENSES0.FUNDRAISING EXPENSES5,761.TOTAL EXPENSES320,927.

89,462.

89,462.

Ο.

0.

ADMINISTRATION AND LEGAL:	
PROGRAM SERVICE EXPENSES	186,149.
MANAGEMENT AND GENERAL EXPENSES	19,320.
032212 11-20-20	Schedule O (Form 990 or 990-EZ) 2020

) (Form 990 ne organizati) 2020 UNDA	TION	FOR	IMPAC	T ON	LITE	RACY	AND		Employer iden	Page 2 tification number
	-	LE	ARNI	NG,	INC.							16-165	50130
FUNDR	AISING	EXPE	NSES	3									0.
TOTAL	EXPEN	SES											205,469.
TOTAL	OTHER	FEES	ON	FORM	990,	PART	IX,	LINE	11G,	COL	A		615,858.

SCHEDULE R Related Organizations and Unrelated Partnerships									0047
(Form 990)	► Comp	lete if the organization answered ► Atta	"Yes" on Form 990, Part IV, ach to Form 990.	line 33, 34, 35b, 3	6, or 37.		Open)2(olic
Internal Revenue Service Name of the organizat	Lion FOUNDATION FOF LEARNING, INC.	► Go to www.irs.gov/Form990 f R IMPACT ON LITERAC	for instructions and the late	est information.			Insp eridentificatio 1650130		
Part I Identificat	ion of Disregarded Entities. Complet	te if the organization answered "Yes	" on Form 990, Part IV, line 3	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activity	(c) Legal domicile (state o foreign country)	(d) Dr Total incor	(e) me End-of-year	assets	(f) Direct contro entity	controlling	
		-							
Part II Identificat organizatio	ion of Related Tax-Exempt Organiza	ations. Complete if the organization	answered "Yes" on Form 990	0, Part IV, line 34, t	because it had one	or more relat	ed tax-exempt		
	(a) ne, address, and EIN related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct con entit	itrolling	(g) Section 512(b)(controlled entity? Yes N	
	TERACY ASSOCIATION THROUGH 994293, PO BOX 8139, NEWARK,	PROMOTE READING BY CONTINUOUSLY ADVANCING LITERACY INSTRUCTION AND	DELAWARE	501(C)(3)	LINE 10	N/A			No X
For Paperwork Redu	ction Act Notice, see the Instruction	l s for Form 990.				Scl	hedule R (Fori	m 990) 2020

For Paperwork Reduction Act Notice, see the Instructions for Form 990. SEE PART VII FOR CONTINUATIONS

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Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

(a)	(b)	(c)	(d)	(e)	(f)	(g)	()	ר)	(i))	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	Disproportionate allocations? Code V-UBI amount in box 20 of Schedule		Gene mana parti	iging (Percentag ownership	
		country)		sections 512-514)			Yes	No		Yes	No	
	_											
	_											
	_											
	_											
	_											
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	_											
	_											
	4											
	4											
	4											

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i Sec 512(t contr ent	i) tion b)(13) rolled ity?
		country)				accord		Yes	No

FOUNDATION FOR IMPACT ON LITERACY AND LEARNING, INC.

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.						
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		Yes			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X		
	Gift, grant, or capital contribution to related organization(s)	1b		X		
	Gift, grant, or capital contribution from related organization(s)	1c		Х		
	Loans or loan guarantees to or for related organization(s)	1d		Х		
	Loans or loan guarantees by related organization(s)	1e		Х		
f	Dividends from related organization(s)	1f		X		
g	Sale of assets to related organization(s)	1g		X		
	Purchase of assets from related organization(s)	1h		X		
i	Exchange of assets with related organization(s)	1i		Х		
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х		
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X		
	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х		
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х		
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		Х		
	Sharing of paid employees with related organization(s)	10		Х		
р	Reimbursement paid to related organization(s) for expenses	1p	Х			
	Reimbursement paid by related organization(s) for expenses	1q		Х		
r	Other transfer of cash or property to related organization(s)	1r		X		
s	Other transfer of cash or property from related organization(s)	1s		Х		
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.					

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2020 LEARNING, INC.

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	n)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile		Are partner 501 (c orgs	all rs sec.	Share of	Share of		ropor- nate tions?		General managir	or Percentage
of entity		(state or foreign country)	excluded from tax under sections 512-514)	orgs Yes		total income	end-of-year assets	alloca Yes	tions?	of Schedule K-1 (Form 1065)	partner	
				res	NO			res	NO	(<u> </u>
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Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME OF RELATED ORGANIZATION:

INTERNATIONAL LITERACY ASSOCIATION THROUGH 6/30/2021

PRIMARY ACTIVITY: PROMOTE READING BY CONTINUOUSLY ADVANCING LITERACY

INSTRUCTION AND RESEARCH.

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS, COLUMN (A):

EFFECTIVE JUNE 30, 2021, THE FOUNDATION FOR IMPACT ON LITERACY AND

LEARNING (FOUNDATION) AMENDED THEIR ARTICLES OF INCORPORATION AND

REMOVED INTERNATIONAL LITERACY ASSOCIATION AS THE SOLE CORPORATE

MEMBER. THE FOUNDATION NOW OPERATES AS A PUBLIC CHARITY INDEPENDENT OF

THE INTERNATIONAL LITERACY ASSOCIATION.