

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0687

For calendar year 2018 or other tax year beginning JUL 1, 2018 and ending JUN 30, 2019

2018

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

A Check box if address changed
B Exempt under section
[X] 501(c)(3)
[] 408(e) [] 220(e)
[] 408A [] 530(a)
[] 529(a)

Name of organization () Check box if name changed and see instructions.)
SUMMIT COUNTY ADULT LITERACY COUNCIL
Number, street, and room or suite no. If a P.O. box, see instructions.
60 S. HIGH STREET
City or town, state or province, country, and ZIP or foreign postal code
AKRON, OH 44326 812930

D Employer identification number (Employees' trust, see instructions)
34-1491695
E Unrelated business activity code (See instructions)

C Book value of all assets at end of year
F Group exemption number (See instructions.)
G Check organization type [X] 501(c) corporation [] 501(c) trust [] 401(a) trust [] Other trust

H Enter the number of the organization's unrelated trades or businesses. Describe the only (or first) unrelated trade or business here N/A. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? [] Yes [] No

J The books are in care of MARQUITA MITCHELL Telephone number 330-434-9461

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows 1a-13. Total income 0.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income)

Table with 2 columns: Deduction description, Amount. Rows 14-32. Total deductions 0.

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Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, Amount. Includes lines 33-38. Line 37 has handwritten '39' and '1,000'.

Part IV Tax Computation

Table with 3 columns: Line number, Description, Amount. Includes lines 39-44. Line 39 has handwritten '0'.

Part V Tax and Payments

Table with 3 columns: Line number, Description, Amount. Includes lines 45a-45e, 46-49, 50a-50g, 51-55. Line 50b has handwritten '51b' and '1,000'. Line 54 has handwritten '55' and '1,000'. Line 55 has handwritten '76' and '1,000'.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Question number, Question text, Yes/No. Includes questions 56, 57, and 58.

Sign Here: Declaration of preparer. Signature: Jill M. Boyle. Date: 06-22-20. Title: EXECUTIVE DIRECTOR.

Paid Preparer Use Only: Print/Type preparer's name: JILL M. BOYLE, CPA. Preparer's signature: JILL M. BOYLE, CPA. Date: 06/22/20. Check self-employed: []. PTIN: P01246734. Firm's name: SIKICH LLP. Firm's EIN: 36-3168081. Firm's address: 274 WHITE POND DRIVE, AKRON, OH 44320-1118. Phone no.: (330) 864-6661.