2949332807922 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Department of the Treasury) Do not enter social security numbers on this form as it may be made public! Open to Public ► Go to www.irs.gov/Form990 for instructions and the latest information. and ending JUN 30; For the 2017 calendar year, or tax year beginning JUL 1, 2017 Check if applicable C Name of organization D Employer identification number Address DURHAM LITERACY CENTER, INC. Name change 56-1479534 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final PO BOX 52209 102 (919)489-8383 termin-ated 893,413. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return 27717 DURHAM, NC. H(a) Is this a group return Applica-F Name and address of principal officer ELIZABETH ELLIS Yes X No for subordinates? pending 1905 CHAPEL HILL ROAD, DURHAM, H(b) Are all subordinates included? ີ]Yes ໄ | Tax-exempt status: | X | 501(c)(3) | 501(c) () (insert no.) 4947(a)(1) or l If "No," attach a list (see instructions) J Website: ► WWW.DURHAMLITERACY.ORG 서(c) Group exemption number 🕨 Other > Trust Association L Year of formation: 1985 M State of legal domicile: NC K Form of organization: X | Corporation Part I | Summarv Briefly describe the organization's mission or most significant activities TO EMPOWER DURHAM COUNTY Governance RESIDENTS WHO WANT TO IMPROVE THEIR LIVES AND THE LIVES OF THEIR if the organization discontinued its operations or disposed of more than 25% of its net assets Check this box ▶ ↓ 24 Number of voting members of the governing body (Part VI, line 1a) 23 Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & 11 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 1718 6 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 3 0. **Prior Year Current Year** 495,648 796,940. Contributions and grants (Part VIII, line 1h) NOV 1 9 2018 Revenue 74,436. 80,394 9 Program service revenue (Part VIII, line 2g) 258 22,037. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1@GDEN 0 0. 576,300 893,413. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 0. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 329,108 367,319. Expenses 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 38,754. **b** Total fundraising expenses (Part IX, column (D), line 25) 174,739 170,163. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 503,847 537,482. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 72,453. 355,931. o S **Beginning of Current Year End of Year** Assets (Balanc 1,125,951 1,480,011. 20 Total assets (Part X, line 16) 23,873 22,002. Total liabilities (Part X, line 26) Net 02.078 458,009. Net assets or fund balances Subtract line 21 from line 20 Part II | Signature Block 🗝 nder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is True, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer ري Sign ELIZABETH ELLIS, EXECUTIVE DIRECTOR Chere Type or print name and title 面 Date Print/Type preparer's name Prepager's signature Z ZPaid **₽01536972** BARRY S. BEASLEY

May the IRS discuss this return with the preparer shown above? (see instructions) LHA For Paperwork Reduction Act Notice, see the separate instructions.

Firm's name NEAL, BRADSHER & TAYLOR,

Firm's address 3721-D UNIVERSITY DRIVE

DURHAM, NC 27707

⊄Preparer

JUse Only

Form 990 (2017)

No

489-3369

56-1445619

X Yes

Firm's EIN

Phone no. (919)

Form **990** (2017)

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Porm 990 (2017) DURHAM LITERACY CENTER,
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	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_		<u>X</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_5_		_X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_		3,
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		37
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		_X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		_X_
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
l2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	40.		v
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
Ø	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	14h		Х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		<u> </u>
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	45		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	_15_		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
•	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
_	complete Schedule G, Part III	19		X

Form **990** (2017)

Form 990 (2017) DURHAM LITERACY CENTER, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21		_X_
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		_X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		_X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form	990	(2017)

Form 990 (2017) DURHAM LITERACY CENTER, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V									
			Yes	No						
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 4									
	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	Х							
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 2a 11									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X							
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)									
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X						
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b								
4a	4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	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)									
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X						
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х						
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			v						
	any contributions that were not tax deductible as charitable contributions?	_6a_		X						
D	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).	-05								
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х						
b	16 Me - M. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.									
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b								
_	to file Form 8282?	7c		X						
d	If "Yes," indicate the number of Forms 8282 filed during the year									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e								
f										
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								
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter									
	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b									
11		i l								
	Section 501(c)(12) organizations. Enter Gross income from members or shareholders									
	Gross income from other sources (Do not net amounts due or paid to other sources against									
-	amounts due or received from them)									
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year									
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	1								
b	Enter the amount of reserves the organization is required to maintain by the states in which the	į l								
	organization is licensed to issue qualified health plans	i								
C	Enter the amount of reserves on hand	igwdow		L						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000	(0017)						

rai	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule C			IVO F	espon	se
	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	24			
	If there are material differences in voting rights among members of the governing body, or if the governing				<u> </u>	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				1	
b	Enter the number of voting members included in line 1a, above, who are independent	1b	23			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other		}	
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			3		_X_
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	as filed?	4		_X_
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		_X_
6	Did the organization have members or stockholders?			6		_X_
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or			
	more members of the governing body?			7a		_X_
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockh	olders, or	1		
	persons other than the governing body?			7b		_X_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	ne following:			,
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached	at the	i		
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapter	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	Х	
	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?					
	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	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give risk			12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es, a	escribe			
40	In Schedule O how this was done			12c	X	<u> </u>
13	Did the organization have a written whistleblower policy?			13 14	X	
14	Did the organization have a written document retention and destruction policy?	ol by u	adanandant	14		 ,
15	Did the process for determining compensation of the following persons include a review and approve persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-	idependent	-		
_	The organization's CEO, Executive Director, or top management official			450	X	
a				15a	A	v
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			15b		X
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	mont .	with a			
IOa	taxable entity during the year?	ineni v	with a	16a		X
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	to ite i	narticination	iua ,		
U	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of evaluation of the organization of the organization of evaluation of the organization of the organizati		· ·	ļ		
	exempt status with respect to such arrangements?	nzano		16b		
Sec	tion C. Disclosure			100		
17	List the states with which a copy of this Form 990 is required to be filed NONE					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	Γ (Sect	tion 501(c)(3)s only) a	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply	•	,			
	Own website X Another's website X Upon request Other (explain	ın Sc	hedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co			i fınan	cıal	
-	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 bo	oks ar	nd records.			
-	KAREN MILLER - (919)643-4038				-	
	1905 CHAPEL HILL ROAD, DURHAM, NC 27707					

Form 990 (2017)	DURHAM	LITERACY	CENTER,	INC.	 56-1479534	Page 7

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

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

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

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

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

(A) Name and Title	(B) Average		not c	Pos heck	more	than		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	offic				s bot r/trus		compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) ANTHONY HUTCHINSON	2.00									
VICE-PRESIDENT		X		X				0.	0.	0.
(2) ISAAC THOMAS, JR.	2.00									
PRESIDENT		X		X				0.	0.	0.
(3) VINCENT CAVALLARI	2.00									
DIRECTOR		X			<u> </u>			0.	0.	0.
(4) GAIL FAULKNER-HUDSON	2.00								_	_
EX-OFFICIO		X						0.	0.	0.
(5) SCOTT FLANAGAN	2.00									
DIRECTOR		X		_				0.	0.	0.
(6) RICHARD CHILAUSKY	2.00									•
DIRECTOR	2.00	X		_				0.	0.	0.
(7) MARY CAY CORR	2.00	٠,		ŀ					_	_
DIRECTOR	2.00	X	-		-	ļ		0.	0.	0 .
(8) RANDY GARCIA	2.00	x						0.	0.	0
DIRECTOR	2.00	^	-	-	-					0
(9) TRILAINE MASSEY	2.00	x		x				0.	0.	0
TREASURER	2.00	^		_				0.		<u> </u>
(10) ILASAH SHABAZZ DIRECTOR	2.00	X						0.	0.	0
(11) BOB BREITWEISER	2.00					1				
DIRECTOR	2.00	x						0.	0.	0.
(12) MYRTLE DARDEN	2.00									
DIRECTOR		x						0.	0.	0
(13) MICHEL THARP	2.00									
DIRECTOR		x						0.	0.	0
(14) SANDI FRIEDMAN	2.00								• • • • • • • • • • • • • • • • • • • •	
SECRETARY		X		X				0.	0.	0.
(15) ELIZABETH ELLIS	40.00									
EXECUTIVE DIRECTOR		X		X				54,250.	0.	0.
(16) ALEX GRAY	2.00	ļ								
DIRECTOR		X						0.	0.	0 .
(17) REGINALD HODGES	2.00	ļ								
EX-OFFICIO		X					<u></u> .	0.	0.	0 . Form 990 (2017

Part VII Section A. Officers, Directors, Tru	stees, Key Em	ploy	ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
(A)	(B)			(6	C)			(D)	(E)			(F)	
Name and title	Average	(do			nore	n e than	one	Reportable	Reportable		Es	stimate	∍d
	hours per	box	, unle	ss pe	erson	is bot	h an	compensation	compensation			nount	of
	week	H.	Ceran	o a c	Trecto	or/trus	iee)	from	from related			other	
	(list any hours for	recto						the	organizations (W-2/1099-MIS			pensa	
	related	o o	<u>a</u>			sated		organization (W-2/1099-MISC)	(44-2/1099-14119	,0,		om th	
	organizations	ruste	institutional trustee		g	m pea		(***2/1033-141130)			_	d relat	
	below	dualit	E	_	g	stco	<u> </u>					anızatı	
	line)	Individual trustee or director	Instit	Officer	Key employee	Highest compensated employee	Former						
(18) SUSAN SPRINGER	2.00				Ì						I		
EX-OFFICIO_		X		L				0.		0.			0.
(19) MATT TOMLINSON	2.00												
DIRECTOR		X					<u> </u>	0.		0.			0.
(20) MICHAEL FRIEDMAN	2.00												
DIRECTOR		X					İ	0.		0.			0.
(21) JEANETTE MILLER	2.00												_
DIRECTOR		X						0.		0.			0.
(22) MICHAEL TAECKENS	2.00								. =				
DIRECTOR		X						0.		0.			0.
(23) DR. SY MAUSKOPF	2.00												
EX-OFFICIO		X						0.		0.			0.
(24) JASON DEBRUYN	2.00]											
DIRECTOR		X		_	-			0.		0.			0.
		┨											
		-	-		+	+	<u> </u>						
	,	1											
1b Sub-total	•				•		▶	54,250.		0.			0.
c Total from continuation sheets to Part \	/II. Section A						•	0.		0.			0.
d Total (add lines 1b and 1c)	·						•	54,250.	,	0.			0.
2 Total number of individuals (including but	not limited to th	nose	liste	ed a	bov	e) w	ho r		,000 of reportabl	 e	·		
compensation from the organization													0
												Yes	No
3 Did the organization list any former office	r, director, or tr	uste	e, ke	y eı	mplo	oyee	, or	highest compensated e	mployee on		_		1
line 1a? If "Yes," complete Schedule J for	such individual										3_		X
4 For any individual listed on line 1a, is the s	-							•	the organization				
and related organizations greater than \$15											4		X
5 Did any person listed on line 1a receive or							relat	ted organization or indiv	dual for services		-	_	
rendered to the organization? If "Yes," cor	mplete Schedui	e J	for s	uch	per	son					5		X
Section B. Independent Contractors									*				
 Complete this table for your five highest c the organization. Report compensation fo 										pens	ation	rom	
(A)	i trie caleridar y	eai	enui	ng v	WILLI	Or W	/1	(B)	yeai			 C)	
Name and busines	s address	N	ONI	₹.				Description of s	ervices	С	ompe		n
							-						
						-							
		_						<u> </u>					
							ᆜ						
2 Total number of independent contractors \$100,000 of compensation from the organ		ot li	mıte	d to		ose li O	stec	above) who received m	ore than				
T. T								· · · · · · · · · · · · · · · · · · ·					

DURHAM LITERACY CENTER, INC. 56-1479534 Page 9 Form 990 (2017) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D)
Revenue excluded from tax under sections
512 - 514 Total revenue Related or exempt function business revenue revenue Gifts, Grants illar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 10 d Related organizations 1d <u>136,596.</u> Contributions, and Other Simi e Government grants (contributions) 1e f All other contributions, gifts, grants, and 660,344 similar amounts not included above 1f Q Noncash contributions included in lines 1a-1f \$ 796,940. h Total. Add lines 1a-1f Business Code 74,436. 2 a LITERACY PROGRAMS 611710 74,436. Program Service Revenue f All other program service revenue 74,436. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 3,366. 3,366. other similar amounts) 4 Income from investment of tax-exempt bond proceeds Royalties 5 (ı) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of 18,671. assets other than inventory b Less cost or other basis 0 . and sales expenses 18,671. c Gain or (loss) 18,671. 18,671. d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue contributions reported on line 1c) See Part IV, line 18 а Other **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 а b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a b

74,436.

893,413.

d All other revenue e Total. Add lines 11a-11d

Total revenue See instructions.

Form 990 (2017) DURHAM LITERACY CENTER, INC.

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com			omplete column (A)	
	Check if Schedule O contains a respon	se or note to any line in (A)	this Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
_	Grants and other assistance to domestic				· · · · · · · · · · · · · · · · · · ·
2	individuals See Part IV, line 22				
3	Grants and other assistance to foreign		-		
3	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				-
5	Compensation of current officers, directors,				
Ū	trustees, and key employees	56,572.	47,991.	7,653.	928.
6	Compensation not included above, to disqualified	00/0.00		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	236,451.	200,886.	31,518.	4,047.
8	Pension plan accruals and contributions (include				
,	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	51,530.	42,164.	9,366.	
10	Payroll taxes	22,766.	19,187.	3,197.	382.
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	22,409.		21,609.	800.
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	•				
	column (A) amount, list line 11g expenses on Sch O.)	21,800.	21,204.	298.	298.
12	Advertising and promotion	22,958.	24 2		22,958.
13	Office expenses	25,690.	21,520.	1,701.	2,469.
14	Information technology	945.	743.	101.	101.
15	Royalties	20 040	21 070	2 004	2 004
16	Occupancy	39,840.	31,872.	3,984.	3,984.
17	Travel	545.	499.	23.	23.
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	285.	157.	108.	20.
19 20	Conferences, conventions, and meetings Interest	405.	157.	100.	40.
20	Payments to affiliates				
21	Depreciation, depletion, and amortization	15,567.	13,077.	1,245.	1,245.
23	Insurance	8,788.	7,030.	879.	879.
24	Other expenses. Itemize expenses not covered	:	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u> </u>
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	MISCELLANEOUS	11,336.	10,209.	507.	620.
b		,,	,		
c					
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	537,482.	416,539.	82,189.	38,754.
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2017)
Part X | Balance Sheet

Part	X	Balance Sheet					
		Check if Schedule O contains a response or no	te to ar	ny line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments		<u> </u>	423,604.	2	783,055
	3	Pledges and grants receivable, net			63,352.	3	73,559
	4	Accounts receivable, net			1,826.	4	1,700
-	5	Loans and other receivables from current and for	ormer o	officers, directors,			·
		trustees, key employees, and highest compens	ated er	nployees Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqual	ified pe	rsons (as defined under			
1		section 4958(f)(1)), persons described in section	c)(3)(B), and contributing				
		employers and sponsoring organizations of sec					
S.		employees' beneficiary organizations (see instr)				6	
Assets	7	Notes and loans receivable, net			-	7	
ğ	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			3,280.	9	3,375
	10a	Land, buildings, and equipment cost or other	1	Ι	•		
		basis Complete Part VI of Schedule D	10a	709,132.			
	b	Less accumulated depreciation	10b	90,810.	633,889.	10c	618,322
	11	Investments - publicly traded securities	-	11			
1	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related See Part IV, line		13			
	14	Intangible assets	0.	14	0		
	15	Other assets See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equ	1,125,951.	16	1,480,011		
	17	Accounts payable and accrued expenses			23,873.	17	22,002
İ	18	Grants payable		18			
	19	Deferred revenue		<u> </u>		19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete	Part IV	of Schedule D		21	
န္မ	22	Loans and other payables to current and forme	r office	rs, directors, trustees,			
		key employees, highest compensated employe	es, and	l disqualified persons.			
Liabilities		Complete Part II of Schedule L		_		22	
-	23	Secured mortgages and notes payable to unrel	ated th	ird parties		23	
	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities (including federal income tax, pa		1		İ	
		parties, and other liabilities not included on line	s 17-24) Complete Part X of		1	
		Schedule D		-		25	
	26	Total liabilities. Add lines 17 through 25			23,873.	26	22,002
		Organizations that follow SFAS 117 (ASC 95)		ck here ▶ X and			
Se		complete lines 27 through 29, and lines 33 at	nd 34.		1 100 000		1 450 000
ä	27	Unrestricted net assets		-	1,102,078.		1,458,009
Bal	28	Temporarily restricted net assets		-	·	28	· · · · · · · · · · · · · · · · · · ·
2	29	Permanently restricted net assets			·	29	
2		Organizations that do not follow SFAS 117 (A	ASC 95	8), check here 🕨 📖			
ō	_	and complete lines 30 through 34.					
Set	30	Capital stock or trust principal, or current funds		· }		30	
¥8	31	Paid-in or capital surplus, or land, building, or e				31	
y ∣	32	Retained earnings, endowment, accumulated in	ncome,	or other funds	1 100 050	32	1 450 000
_	33	Total net assets or fund balances		-	1,102,078.	33	1,458,009
	34	Total liabilities and net assets/fund balances			1,125,951.	34	1,480,011

Form	990 (2017) DURHAM LITERACY CENTER, INC. 56-3	1479534	Pag	ge 12
Par	t 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)	893	3,4	<u> 13.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	<u>537</u>	7,4	<u>82.</u>
3	Revenue less expenses Subtract line 2 from line 1	355	<u>5,9</u>	<u>31.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	1,102	2,0	<u>78.</u>
5	Net unrealized gains (losses) on investments 5			
6	Donated services and use of facilities 6			
7	Investment expenses 7			
8	Prior period adjustments 8			
9	Other changes in net assets or fund balances (explain in Schedule O)		_	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B)) 10	1,458	3,0	<u>09.</u>
Par	t XIII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			<u>Ш</u>
			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 O.	-		1
2a		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a			
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis	1 1		
b	Were the organization's financial statements audited by an independent accountant?	2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,			
	consolidated basis, or both	1 1		1
	X Separate basis 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 audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit	t		1
	Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	t		ĺ
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	35		i

Form **990** (2017)

SCHEDULE A

Internal Revenue Service

Total

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

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

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Inspection

Employer identification number

			<u>AM LITERAC</u>				5	6-14/9534					
Pa	rt I	Reason for Public (Charity Status (All organizations must co	mplete th	us part.) Se	ee instructions						
he (organi	zation is not a private found					-						
1		A church, convention of ch	•	_	•	•							
2	Ħ	A school described in secti					·// \	\					
	Ħ						::\ \ .	/ /					
3	H	A hospital or a cooperative					•	dha baandalla aassa					
4	ш	A medical research organiz	ation operated in col	njunction with a nospital	describe	u in sectio	n 170(b)(1)(A)(III). Enter	the nospital's name,					
	_	city, and state		<u></u>	 								
5	ш	An organization operated for		llege or university owner	d or opera	ted by a g	overnmental unit describ	ped in					
		section 170(b)(1)(A)(ıv). (C	Complete Part II)										
6	\sqsubseteq	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7	\mathbf{x}	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in											
		section 170(b)(1)(A)(vi). (C	omplete Part II)										
8		A community trust describe		(1)(A)(vi). (Complete Par	t II.)								
9	一	An agricultural research org				ed in conii	inction with a land-grant	college					
Ŭ		or university or a non-land-g											
		· · · · · · · · · · · · · · · · · · ·	grant college or agric	diture (see instructions)	Linter tile	maine, city	y, and state of the colleg	le ui					
		university	# (#\	Ab 00 4 (00) - 5 d									
10	ш	An organization that norma	• • • •	•				•					
		activities related to its exen	•	•			, ,	•					
		income and unrelated busing	ness taxable income	(less section 511 tax) from	om busine	esses acqu	iired by the organization	after June 30, 1975					
		See section 509(a)(2). (Coi	mplete Part III)										
11	Ш	An organization organized a	and operated exclus	ively to test for public sa	ıfety See	section 50	09(a)(4).						
12		An organization organized a	and operated exclus	ively for the benefit of, to	perform	the functio	ons of, or to carry out the	purposes of one or					
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2)	See section 509(a)(3) . (Check the box in					
		lines 12a through 12d that	describes the type o	of supporting organization	n and con	nplete lines	s 12e, 12f, and 12g						
а		Type I. A supporting orga	• •			•		, aivina					
_		the supported organization	•	•	•			•					
		organization You must o			z majomy	01 110 0110		apporting					
L		٦ -	•				ad araansatiaa(a) bii ba						
D		J Type II. A supporting org	•					•					
		control or management o			ame perso	ons that co	ontrol or manage the sup	ported					
	_	organization(s) You mus	t complete Part IV,	Sections A and C.									
C	L_		grated. A supporting	g organization operated	ın connec	tion with,	and functionally integrate	ed with,					
		_ its supported organizatio	n(s) (see instructions	You must complete f	Part IV, Se	ections A,	D, and E.						
d	L	Type III non-functionally	y integrated. A supp	orting organization oper	ated in co	nnection v	vith its supported organi	zation(s)					
		that is not functionally int	egrated The organiz	zation generally must sat	tisfy a dist	ribution re	quirement and an attent	iveness					
		requirement (see instruct	ions) You must con	nplete Part IV. Sections	A and D	. and Part	V.						
е		Check this box if the orga	•	-									
_		functionally integrated, or											
	Ento	er the number of supported of		many integrated support	ing organi	Lation							
٠		• •	-	od organization(s)				<u></u>					
	Prov	ride the following information Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount of monetary	(vi) Amount of other					
	,,	organization	(11)	(described on lines 1-10			support (see instructions)	support (see instructions)					
				above (see instructions))	Yes	No		copport (coo intercenterio)					
						 	<u> </u>						

Schedule A (Form 990 or 990-EZ) 2017 DURHAM LITERACY CENTER, INC.

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

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

Section A. Public Support										
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received (Do not									
	include any "unusual grants ")	449,391.	521,430.	455,704.	495,648.	796,940.	2,719,113.			
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	449,391.	521,430.	455,704.	495,648.	796,940.	2,719,113.			
5	The portion of total contributions									
	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)						584,850.			
	Public support. Subtract line 5 from line 4				l		2,134,263,			
	ction B. Total Support									
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total			
-	Amounts from line 4	449,391.	521,430.	455,704.	495,648.	796,940.	2,719,113.			
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties,	220	106	202	250	2 266	4 222			
_	and income from similar sources	230.	196.	282.	258.	3,366.	4,332.			
9	Net income from unrelated business									
	activities, whether or not the									
	business is regularly carried on									
10	Other income Do not include gain	i								
	or loss from the sale of capital	2,607.	2 010				E 417			
	assets (Explain in Part VI)	4,007.	2,810.				5,417.			
	Total support. Add lines 7 through 10	ata /aaa mata ata	200		<u> </u>	12	2,728,862. 322,497.			
	Gross receipts from related activities, First five years. If the Form 990 is for	•	•	ما الأمريطام معالجات الم			344,431.			
13	organization, check this box and stop	=	mst, second, tim	u, iourtri, or illtir ta	ax year as a section	1 50 1 (0)(3)	ightharpoonup			
Sec	ction C. Computation of Publ	ic Support Pe	rcentage							
	Public support percentage for 2017 (i			column (f))		14	78.21 %			
	Public support percentage from 2016	• • • • • • • • • • • • • • • • • • • •	•	.0.0 (1))		15	84.18 %			
	33 1/3% support test - 2017. If the o			n line 13, and line	ا 14 ıs 33 1/3% or m	<u> </u>				
	stop here. The organization qualifies					,	▶ X			
b	33 1/3% support test - 2016. If the o	- · · · · · · · · · · · · · · · · · · ·			l line 15 is 33 1/3%	or more, check th				
	and stop here. The organization qual						▶□			
17a	10% -facts-and-circumstances tes		• •		e 13, 16a, or 16b, a	and line 14 is 10%	or more,			
	and if the organization meets the "fac									
	meets the "facts-and-circumstances"					J	ightharpoons			
b	10% -facts-and-circumstances tes	=		· · · · · · · · · · · · · · · · · · ·	-	7a, and line 15 is	10% or			
	more, and if the organization meets the	-								
	organization meets the "facts-and-circ				•		ightharpoons			
18	Private foundation. If the organization						s >			
	-	<u></u>			Sche	dule A (Form 990	or 990-EZ) 2017			

Schedule A (Form 990 or 990-EZ) 2017 DURHAM LITERACY CENTER, INC.

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you chacked the box on line 10 of Part I or if the organization failed to gualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016(e) 2017 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total, Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support. (Subtract line 7c from line 6) Section B. Total Support (c) 2015 **6**) 2014 Calendar year (or fiscal year beginning in) (a) 2013 (d) 2016 (e) 2017 (f) Total 9 Amounts from line 6 10a Gross income from interest. dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage % 15 Public support percentage for 2017 (line §, column (f) divided by line 13, column (f)) 15 16 Public support percentage from 2016 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage % 17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) 17 18 Investment income percentage from 2016 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and

line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations								
	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V)							
	and B. If you checked 125 of 1 art i, complete occitions 7 and 6 if you oncoked 125 of 1 art i, complete							

eci	tion A. Ali Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status		j	
	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)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3b		
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.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	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.	4b		ļ
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used]
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(III) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document)	5a		<u> </u>
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b -		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (III) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	_		
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
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)	8		
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	0-		
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	ΛL		
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b_		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	0-		
_	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c_		
υa	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	40-		
	supporting organizations)? If "Yes," answer 10b below	10a		
D	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to		1	1

determine whether the organization had excess business holdings)

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Par	t IV Supporting Organizations (continued)		, , , , , , , , , , , , , , , , , , ,	
)		Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	44-		
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
sec	tion B. Type I Supporting Organizations		Vac	No
	D. I. I I I		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit camed out the purposes of the supported organization(s) that operated,	•	•	
<u> </u>	supervised, or controlled the supporting organization	2		
sec	tion C. Type II Supporting Organizations		V	N.
	184		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			N-
			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 (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	_	-	
800	supported organizations played in this regard tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)	•		
a	The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below.			
b	The organization is the parent of each or its supported organizations. The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instance).	truction	-1	
C		iraciion.	Yes	No
2	Activities Test Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	140
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		-
		20		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	٥L		
_	activities but for the organization's involvement	2b		-
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	2-		
	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
Ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	O.L		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

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Par				
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust o	n Nov. 20, 1970 (explain in f	Part VI) See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E.	
Sect	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6	_	
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	h,**	the grant and says that	-5.38-5.21 - 3.5 - 3. 1 (19)
	instructions for short tax year or assets held for part of year).	Ι΄ ΄		
a	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
*******	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other	7.5.	a print print in page 1, more print as a print of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the seco	And the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of t
•	factore (explain in detail in Part VI)	1	and the property of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of the second department of t	at a fingura, manuformal affirmation our manuformation outsident and the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of the first state of t
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,	+ -		
•	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8	***************************************	
	ion C - Distributable Amount	, ,	·公司,他看到200	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	and the state of the	
2	Enter 85% of line 1	2	20 M C C C 19 W. 7	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4	18. 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to		· 3 - 1 - 1 - 1	
-	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional		ated Type III supporting orga	anization (see
•	instructions)	,) i = = = = = = = = = = = = = = = = = =	

Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017

a Excess from 2013
 b Excess from 2014
 c Excess from 2015
 d Excess from 2016
 e Excess from 2017

Schedule A	(Form 990 or 990-E	Z) 2017 DURHA	M LITERACY	CENTER,	INC.	56-1479534 Page 8
Part VI	Supplemental Part IV, Section A, line 1, Part IV, Sec	Information. Innes 1, 2, 3b, 3c, tion D. lines 2 and	Provide the explanate 4b, 4c, 5a, 6, 9a, 9b 3. Part IV. Section E	tions required by , 9c, 11a, 11b, a E. lines 1c. 2a, 2b	Part II, line 10, Part II, nd 11c; Part IV, Section o, 3a, and 3b, Part V, lir	line 17a or 17b, Part III, line 12, n B, lines 1 and 2; Part IV, Section C, ne 1, Part V, Section B, line 1e, Part V, any additional information.
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number 56-1479534

	DURHAM LITERACY CE	INTER, INC.	56-1479534
Par		ed Funds or Other Similar Fund	s or Accounts. Complete if the
-	organization answered "Yes" on Form 990, Part IV, Iir	ne 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	s exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	e conferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	tion (check all that apply)	
	Preservation of land for public use (e.g., recreation or	education) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cel	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form	n of a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic st	• •	2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic struc	1 1
	listed in the National Register		_2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	ne organization during the tax
_	year >		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		
_	violations, and enforcement of the conservation easements		
6	Staff and volunteer hours devoted to monitoring, inspecting	, nandling of violations, and emorcing col	iservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, han-	dling of violations, and enforcing consen	eation easements during the year
′	\$\\$\$ \$\$ \$\$	ding of violations, and emorcing conserv	ation easements during the year
8	Does each conservation easement reported on line 2(d) abo	ove satisfy the requirements of section 17	O(b)(4)(B)(i)
Ŭ	and section 170(h)(4)(B)(u)?	re salisty the requirements of section 17	Yes No
9	In Part XIII, describe how the organization reports conservation	tion easements in its revenue and expens	
•	include, if applicable, the text of the footnote to the organiza		
	conservation easements		,
Pai	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or (Other Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue state	ement and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	chibition, education, or research in further	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ribes these items	
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statemei	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of p	ublic service, provide the following amounts
	relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art, historical tre	•	al gain, provide
	the following amounts required to be reported under SFAS 1	116 (ASC 958) relating to these items	
а	Revenue included on Form 990, Part VIII, line 1		▶ \$
h	Assets included in Form 990, Part X		▶ \$

		LITERACY C							<u>79534</u>		<u>2</u>
Par	t III ` Organizations Maintaining C										_
3	Using the organization's acquisition, accessi	on, and other record	is, check	any of the	following tha	it are a si	gnificant	use of its	collection it	ems	
	(check all that apply).							•			
а	Public exhibition	d	ı 🔲 L	oan or excl	hange progra	ams					
b	Scholarly research	е	. 🗆	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	ey further th	ne organizati	on's exei	mpt purpo	ose in Part	: XIII		
5	During the year, did the organization solicit of										
	to be sold to raise funds rather than to be ma	aintained as part of	the organ	nization's co	llection?				Yes	No)
Par	t IV Escrow and Custodial Arran					"Yes" on	Form 990), Part IV,		_	_
	reported an amount on Form 990, Pa	rt X, line 21									
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for d	contribution	s or other as	sets not	ıncluded			· ·	_
	on Form 990, Part X?] Yes	No)
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing to	able							
	, ,	•	•		•				Amount		_
С	Beginning balance						1c				_
	Additions during the year						1d				_
	Distributions during the year						1e				_
f	Ending balance						1f				_
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for e	scrow or cu	ustodial acco	ount liabil			Yes	☐ No	_
	If "Yes," explain the arrangement in Part XIII.						-				
Pai											_
		(a) Current year	(b) P	rior year	(c) Two yea	rs back	(d) Three y	ears back	(e) Four ye	ars back	
1a	Beginning of year balance										_
b	Contributions					·					_
c	Net investment earnings, gains, and losses										_
d	Grants or scholarships										_
	Other expenditures for facilities								-		_
Ŭ	and programs										
f	Administrative expenses						-				_
g g	End of year balance										_
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1d	n column (a)) held as						_
	Board designated or quasi-endowment	Tone your one balance	%	g, 00.0 (c	.,,						
	Permanent endowment										
	Temporarily restricted endowment	^ %									
·	The percentages on lines 2a, 2b, and 2c sho										
20	Are there endowment funds not in the posse		ation tha	t are held a	nd administr	ared for t	he orașni	zation			
Ja		5331011 Of the organiz	anon ma	a are ricia a	ila aariiinst	, GG 101 ti	ne organi	Lation	▼ .	es No	_
	(i) unrelated organizations								3a(i)	55 140	_
	•								1	_	_
	(ii) related organizations	ntiona listed on resul	rad on C	obodulo D2					3a(ii) 3b		_
4	If "Yes" on line 3a(ii), are the related organization. Describe in Part XIII the intended uses of the								SD	!	-
-	t VI Land, Buildings, and Equipn		OWITHETIC	unus							_
	Complete if the organization answere		0 Part IV	/ line 11a S	See Form 990). Part X.	line 10				
	Description of property	(a) Cost or o			or other		ccumulate	ed	(d) Book v	alue	-
	Description of property	basis (investi			(other)	٠,,	preciation		(a) Dook v	aluc	
	Land	2200 (2,000.				102	,000	_
					$\frac{2,000.}{7,132.}$		90,8	10		,322	
	Buildings		+		,,1,4		20,0			, , 44	•
	Leasehold improvements										_
	Equipment Other		+								_
	. Add lines 1a through 1e (Column (d) must e	equal Form 990 Part	X colum	n (R) line 1	10c)		·		618	,322	_
<u>ı Uld</u>	. Add intes ta uniough te (Column (d) must e	Jack Fall	, n, colull	ו שוווו קשוייי	~~/				<u> </u>	<u> </u>	÷

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 FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII X

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

Schedule D (Form 990) 2017 DURHAM LITERACY CENTER, IN	1C.		79534 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statem	ents With Revenue pe	r Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	<u></u>		
1 Total revenue, gains, and other support per audited financial statements		1	<u>893,413.</u>
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
a Net unrealized gains (losses) on investments	2a		
b Donated services and use of facilities	2b		
c Recovenes of prior year grants	2c		
d Other (Describe in Part XIII)	2d		
e Add lines 2a through 2d		2e	0.
3 Subtract line 2e from line 1		3	<u>893,413.</u>
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII)	4b	.	0
c Add lines 4a and 4b		4c	893,413.
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statem	nonte Mith Evnonces r	or Poturn	
		ei netuiii.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12:	a		537,482.
1 Total expenses and losses per audited financial statements		1	337,402.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	ا م ا		
a Donated services and use of facilities	2a	\dashv	
b Prior year adjustments	2b		•
c Other losses	2c 2d	\dashv \mid	
d Other (Describe in Part XIII)	20		0
e Add lines 2a through 2d 3 Subtract line 2e from line 1		3	537,482.
and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s			337, 402.
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII)	4b	\neg	
c Add lines 4a and 4b		4c	0.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	•	5	537,482.
Part XIII Supplemental Information.		<u> </u>	
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa	rt IV, lines 1b and 2b, Part V, I	ine 4; Part X, I	ine 2, Part XI,
lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any ad			
PART X, LINE 2:			
INCOME TAX STATUS			
	 		
THE ORGANIZATION IS EXEMPT FROM FEDERAL INCO	OME TAX UNDER S	ECTION	501(C)(3)
,			
OF THE INTERNAL REVENUE CODE. HOWEVER, INCOM	ME FROM CERTAIN	ACTIVI	TIES NOT
DIRECTLY RELATED TO THE ORGANIZATION'S TAX-	EXEMPT PURPOSE	<u>IS SUBJ</u>	ECT TO
TAXATION AS UNRELATED BUSINESS INCOME.			
			<u>.</u>
WANT CHANGE HAS CONGIDENED MILE MAY DOCUMENTONG	MAKENT THE THE M	יותם ע גו	IDATO AATO
MANAGEMENT HAS CONSIDERED THE TAX POSITIONS	TAKEN IN ITS T	AX RETU	RINS AIND
DELIBERG MINE ALL OF MUE DOCUMENTONS MAKEN DV	MUD ODCANT ZAMT	ON THE T	m.c
BELIEVES THAT ALL OF THE POSITIONS TAKEN BY	THE OKGANIZATI	ON TW T	15
PEDDDAI BUBNDM ODGANITGAMION MAY DEMINAG ADD	MODE ודעפוע Mir	'A NT _ NT∩M	TO PF
FEDERAL EXEMPT ORGANIZATION TAX RETURNS ARE	MOKE DIVEDI-LH	·ΣΤΛ – ΙΛΟ.Τ.	TO DE
CHEMATNED HOOM EVANTNAMTON			
SUSTAINED UPON EXAMINATION.		Cabadula	D (Form 990) 2017
732054 10-09-17		ocneaule	, P (COLIII 990) 20 1/

732054 10-09-17

Part XIII Supplemental Information (continued)	56-1479534 Page 5
Tare XIII Supplemental information (continued)	. <u>. </u>
GENERALLY, THE ORGANIZATION'S TAX RETURNS REMAIN OPEN FOR	THREE YEARS FOR
EXAMINATION BY TAXING AUTHORITIES. THE ORGANIZATION DOES N	OT BELIEVE THERE
ARE ANY MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY,	IT DID NOT
RECOGNIZE ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS.	
	<u> </u>
· · · · · · · · · · · · · · · · · · ·	_
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SCHEDULE M (Form 990)

Noncash Contributions

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Open To Public Inspection

<u> </u>	DURHAM LITER	RACY CE	NTER, INC	•	56-1	479	<u> 534</u>	
Par	t I Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of d noncash contrib	etermını	•	:s
1	Art - Works of art			>				
2	Art - Historical treasures		· ·					
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods				-	-		
6	Cars and other vehicles							
7	Boats and planes							-
8	Intellectual property							-
9	Securities - Publicly traded	Х	1	204,142.	NYSE STOCK	EXC	HAN	GE
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures	1						
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other • ()							
26	Other							
27	Other							
28	Other ()							
29	Number of Forms 8283 received by the organ	ızatıon durın	g the tax year for c	contributions				
	for which the organization completed Form 82							
	·						Yes	No
30a	During the year, did the organization receive to	y contribution	on any property rej	ported in Part I, lines 1 throu	gh 28, that it			
	must hold for at least three years from the dat	te of the initia	al contribution, and	d which isn't required to be u	sed for			
	exempt purposes for the entire holding period					30a		X
ь	If "Yes," describe the arrangement in Part II						_	
31	Does the organization have a gift acceptance	policy that r	equires the review	of any nonstandard contribu	itions?	31		X
	Does the organization hire or use third parties	-		•				
	contributions?		-			32a		X
b	If "Yes," describe in Part II							
33	If the organization didn't report an amount in	column (c) fo	r a type of propert	y for which column (a) is che	cked,	1		
	describe in Part II							

Schedule M	(Form 990) 2017	DURHAM	LITERACY	CENTER,	INC.		56-1479534	Page 2
Part II	Supplemental	Informatio	n. Provide the int	formation require	ed by Part I. lines	s 30b, 32b, and 33, received, or a comb	and whether the organizonation of both. Also con	ation
	-							
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		_			. <u>.</u>			

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

DURHAM LITERACY CENTER, INC. Employer identification number 56-1479534

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:		
FAMILIES BY IMPROVING THEIR LITERACY SKILLS.		
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:		
ALL OTHER LITERACY-RELATED ACTIVITIES INCLUDING AN ADULT GED PROGRAM		
AND TUTOR TRAINING.		
EXPENSES \$ 88,225. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.		
FORM 990, PART VI, SECTION B, LINE 11B:		
FORM 990 WAS PROVIDED TO THE FINANCE COMMITTEE PRIOR TO FILING WITH THE		
IRS. FORM 990 IS AVAILABLE TO THE REMAINING BOARD MEMBERS UPON REQUEST.		
THE FINANCE COMMITTEE REVIEWS THE 990 BEFORE FILING WITH THE IRS.		
FORM 990, PART VI, SECTION B, LINE 12C:		
THE STAFF AND BOARD ARE REQUIRED TO REPORT ANY CONFLICT OF INTEREST,		
POTENTIAL CONFLICT OF INTEREST OR THE APPEARANCE OF CONFLICT OF INTEREST		
IMMEDIATELY TO THEIR SUPERVISOR. THE STAFF REPORTS TO THE EXECUTIVE		
DIRECTOR AND ANY BOARD MEMBER REPORTS TO THE BOARD. IF A BOARD MEMBER HAS		
A CONFLICT OR POTENTIAL CONFLICT, THEY ABSTAIN FROM VOTING ON THAT ISSUE.		
FORM 990, PART VI, SECTION B, LINE 15A:		
THE INDEPENDENT BOARD REVIEWS AND APPROVES THE COMPENSATION OF THE		
EXECUTIVE DIRECTOR. COMPARABLE DATA IS USED FROM OTHER LITERACY CENTERS IN		
WAKE AND ORANGE COUNTIES AS WELL AS THE PUBLIC CENTER FOR NON-PROFITS TO		
DETERMINE THE COMPENSATION. DOCUMENTATION OF DELIBERATIONS AND DECISIONS		
PECADDING THE COMPENSATION ARE KERT		

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization DURHAM LITERACY CENTER, INC.	Employer identification number 56-1479534
FORM 990, PART VI, SECTION C, LINE 18:	
FORM 990 IS AVAILABLE ON GUIDESTAR AND UPON REQUEST.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INT	
•	