Form **990-EZ** 

Department of the Treasury Internal Revenue Service

# Short Form Return of Organization Exempt From Income Tax

2012

OMB No. 1545-1150

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

**Open to Public** Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. A For the 2012 calendar year, or tax year beginning March 9 , 2012, and ending

Ā	For the	2012 calendar year, or tax year beginning March 9	March 9 , 2012, and ending			une 3	0 , 20 12		
В	Check if ap	applicable C Name of organization D E				D Employer identification numbe			
	Address c	hange Foundation for Letters, Inc.				4	5-4779338		
	Name cha	Number and street (or P O. box, if mail is not delivered to street address)	E Telep	hone n	umber				
뇓	Initial retur	1373 Broadway,		Floor 3		64	6-737-3146		
H	Terminate Amended	■ City or town, state or country, and ZIP + 4		•	F Group Exemption				
Ħ	Application	IN Vale NV 40040			Nun	ber I	•		
G		ing Method ☐ Cash ☑ Accrual Other (specify) ▶			H Check	<b>▶</b> □	f the organization is not		
	Websit						ach Schedule B		
J.	Tax-exen	npt status (check only one) — ✓ 501(c)(3)	7(a)(1) or	527	(Form 9	90, 99	0-EZ, or 990-PF)		
	Check ▶			527 organiz	ation and it	s gros	s receipts are normally		
		e than \$50,000. A Form 990-EZ or Form 990 return is not required though Form							
		nization chooses to file a return, be sure to file a complete return.		<u> </u>	-				
L.	Add lines	5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000	or more,	or if total as:	sets (Part II,				
	ine 25, c	olumn (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ 🔍 🚣		1 1		► s	83,160.20		
	Part I	Revenue, Expenses, and Changes in Net Assets or Fund	Balanc	es (see t	ne instruc	ctions	for Part I)		
		Check if the organization used Schedule O to respond to any qu	éstibh	in this Par	tl				
_	1	Contributions, gifts, grants, and similar amounts received				1	83,160.20		
	2	Program service revenue including government fees and contracts	a, U.	·) .		2	0		
	3	Membership dues and assessments	· · · ·	<del></del> '.		3	0		
	4	Investment income				4	0		
	5a	Gross amount from sale of assets other than inventory	5a		0		<u>.                                      </u>		
	Ь	Less: cost or other basis and sales expenses	5b		0				
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5	o from I	line 5a) .		5c	0		
	6	Gaming and fundraising events		•					
	a	Gross income from gaming (attach Schedule G if greater than	1						
ne		\$15,000)	6a		0				
Revenue	ь	Gross income from fundraising events (not including \$		f contribut	ions				
è		from fundraising events reported on line 1) (attach Schedule G if the	<del>-</del>						
	` <b> </b>	sum of such gross income and contributions exceeds \$15,000)	6b	1	0				
	C	Less: direct expenses from gaming and fundraising events	6c		0				
	d	Net income or (loss) from gaming and fundraising events (add lines	6a an	d 6b and	subtract				
		line 6c)				6d	0		
	7a	Gross sales of inventory, less returns and allowances	7a		0				
	ь	Less: cost of goods sold	7b		0	羅羅			
	C	Gross profit or (loss) from sales of inventory (Subtract line 7b from line	e 7a) .			7c	0		
	8	Other revenue (describe in Schedule O)				8	0		
	9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	<u></u>		▶	9	83,160.20		
_	10	Grants and similar amounts paid (list in Schedule O)				10	0		
	11	Benefits paid to or for members				11	0		
V.	12	Salaries, other compensation, and employee benefits				12	27,439.72		
Expenses	13	Professional fees and other payments to independent contractors .				13	0		
9	14	Occupancy, rent, utilities, and maintenance				14	1,525.00		
ű	15	Printing, publications, postage, and shipping				15	0		
	16	Other expenses (describe in Schedule O)				16	6,319.55		
_	17	Total expenses. Add lines 10 through 16	<u></u>	<u>.</u>	▶	17	35,284.27		
y.	18	Excess or (deficit) for the year (Subtract line 17 from line 9)				18	47,875.93		
e de	19	Net assets or fund balances at beginning of year (from line 27, colo							
AS	! <b> </b>	end-of-year figure reported on prior year's return)				19	0		
Net Assets	20	Other changes in net assets or fund balances (explain in Schedule O)				20	0		
2	21	Net assets or fund balances at end of year. Combine lines 18 through	20 .		<u>.</u> . ▶	21	47,875.93		

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 10642I

Form 990-EZ (2012)



Par	Balance Sheets (see the instructions f					_
	Check if the organization used Schedule	O to respond to a	ny question in this		<u> </u>	<u> </u>
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments				22	28,791.51
23	Land and buildings				23	
24	Other assets (describe in Schedule O)				24	27,556.66
25	Total assets				25	56,348.17
26		(0)			26	8,472.24
27	Net assets or fund balances (line 27 of column		·	D + 100	27	47,875.93
Par	<del></del>	- '		•		Expenses
140	Check if the organization used Schedule					uired for section
wna	is the organization's primary exempt purpose?	Support for improve	ed literacy & writing	in urban schools		c)(3) and 501(c)(4) nizations and section
as m	ribe the organization's program service accomplis easured by expenses. In a clear and concise mons benefited, and other relevant information for ea	anner, describe the	f its three largest e services provide	orogram services, d, the number of	4947	(a)(1) trusts, optional thers)
28	Provided Bronx Academy of Letters students with w The program provided the school with writers in resi The writers in residence also managed student-run s (Grants \$ ) If this amount	idence through fundi	aising managed by literary magazine, a	the Foundation. nd writers forums	28a	5,830.94
29	Provided Bronx Academy of Letters students with fu					
	300 students. The trips are overnight and day trips w					
	improve the college readiness of students.					
		includes foreign gra	ants, check here .	• 🗖	29a	10,495.69
30	Facilitated and funded a 3 day writing conference ca					73,1
	outside of the Urban Assembly network of 22 school				1	
	professional writers, a forum in which to present the				l	
	^	includes foreign gra		*********	30a	4,664.75
31	Other program services (describe in Schedule O)					1
		includes foreign gra	ants, check here .	▶ □	31a	2,332.38
32	Total program service expenses (add lines 28a t				32	23,323.76
	List of Officers, Directors, Trustees, and Key				struct	
	Check if the organization used Schedule					<u>`—</u>
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISI (if not paid, enter -0-		o	Estimated amount of their compensation
Mike	Jackson, Chief Executive Officer	25			1	·
				0		
Toni	Bernstein, Chief Development Officer	10		0		
Jillia	n Dunham, Chief Operating Officer	5				
			,-	0		
Debo	orah Murnin, Chief Financial Officer	5				
				0		
Carr	e Angoff, Executive Director	55				
			27,439.7	2 635.4	2	
Matt	new Hicks, Director	5				
				0		
Eliza	beth Hellman, Director	2				
				0		
Joan	Sullivan, Director	2				-
				0		
Kim	Witherspoon, Director	<b> </b> 2			I	
	·			0	$\perp$	
Reac	an Arthur, Director	2			T	
				0		
Step	hen Gandel, Director	2			T	
				0	$\perp$	
Jodi	Freeman, Director					
				^ i		

Part				
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	rant \	v Yes	No.
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	163	<b>N</b> U
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		~
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		~
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		~
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		~
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b 38a	Did the organization file <b>Form 1120-POL</b> for this year?	37b		~
30a	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		~
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9			
Ь	Gross receipts, included on line 9, for public use of club facilities	<b>∤</b> ∣		İ
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:  section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶;			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		>
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			-
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		~
41	List the states with which a copy of this return is filed ► New York			
42a	THE OF GATHER OF PROPERTY OF THE PROPERTY OF T	646-73		5
h	Located at ► 1375 Broadway, Floor 3, New York, NY  At any time during the calendar year, did the organization have an interest in or a signature or other authority over	100	Yes	No
Б		42b		7
	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		<u> </u>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		.	<b>-</b> [
	Bulling and the state of the st		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		~
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		V
C	Did the organization receive any payments for indoor tanning services during the year?	44c		~
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44=1	ļ	
45-	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	44d 45a	_	-
45a 45b	Did the organization have a controlled entity within the meaning of section 512(b)(13)	738		<b>├</b>
.52	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		V

	Z (2012)

46	Did th	e organization engage, directly or indidates for public office? If "Yes," o	ndirectly, in political c	ampaign activities o	n behalf of o	or in opposit	tion 46	Yes	No
Part V	/I :	Section 501(c)(3) organizations All section 501(c)(3) organization 50 and 51 Check if the organization used Sci	s <b>only</b> s must answer que	stions 47–49b and	l 52, and co	omplete th		or line	es $\Box$
<ul> <li>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</li> <li>Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E</li> <li>Did the organization make any transfers to an exempt non-charitable related organization?</li> <li>If "Yes," was the related organization a section 527 organization?</li> <li>Complete this table for the organization's five highest compensated employees (other than officers, directors, tremployees) who each received more than \$100,000 of compensation from the organization. If there is none, entertails a section 501(h) election in effect during the tax year?</li> </ul>								Yes es an lone."	✓ ✓ ✓
	(a) l	Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC	contributions benefit plans	h benefits, s to employee s, and deferred ensation	(e) Estimate other con		
None									
<b>51</b>	Comp \$100,	number of other employees paid ovolete this table for the organization 000 of compensation from the organid address of each independent contractor pa	s five highest componization. If there is no	ensated independen			received		than
None				(4,7,7,2333		(4)			
									<u>-</u>
								•	
52	Did th	number of other independent contra e organization complete Schedule A empt charitable trusts must attach	A? <b>Note</b> : All section 5 a completed Schedul	01(c)(3) organization e A	<u></u> .	· · · .	▶ ☑ Yes		No_
Under pe true, corre	enalties rect, and	of perjury, I declare that I have examined this is complete. Declaration of preparer (other than	return, including accompan n officer) is based on all info	ying schedules and statem rmation of which preparer	nents, and to the has any knowle	e best of my kr edge.	nowledge and	belief,	it is
Sign Here		Signature of officer  Michael D. Jackson, Director & Ch Type or print name and title	nief Executive Officer		Da //	te//Z/	14		
Paid Prepa Use C		Print/Type preparer's name  Firm's name  Firm's address ▶	Preparer's signature	D		Check ☐ self-emplo	rf PTIN		
May the	ا IRS ه	discuss this return with the prepare	shown above? See i	nstructions	<u>j Pn</u>	one no	N		

### **SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury

**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. ▶ See separate instructions.

OMB No 1545-0047

Open to Public

Inspection Internal Revenue Service **Employer identification number** Name of the organization 45-4779338 Foundation for Letters, Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated d ☐ Type III–Non-functionally integrated **b** Type II e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting f Since August 17, 2006, has the organization accepted any gift or contribution from any of the q following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes Nο (iii) below, the governing body of the supported organization? . . . . . . . . . 11g(i) (ii) A family member of a person described in (i) above? . . . . . 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . . . . . . 11g(iii) Provide the following information about the supported organization(s). h (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vii) Amount of monetary (vi) Is the (described on lines 1-9 in col (i) listed in your the organization in organization in col organization support col (i) of your above or IRC section governing document? (i) organized in the support? US? (see instructions)) Yes No Yes Nο No Yes (A) (B) (C) (D) (E)

**Total** 

Schedule A (Form 990 or 990-EZ) 2012 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Gifts, grants, contributions, and membership fees received. (Do not

	include any "unusual grants.")		L			83,160.20	83,160.20
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities		<del> </del>	<del></del>		0	
3	furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3			<u> </u>		83,160.20	83,160.20
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)						0
6	Public support. Subtract line 5 from line 4.						83,160.20
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4					<b></b>	83,160.20
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)			_			0
11	Total support. Add lines 7 through 10						83,160.20
12	Gross receipts from related activities, etc					12	0
13	First five years. If the Form 990 is for the						
<u> </u>	organization, check this box and stop he			· · · · ·	<u> </u>	<u> </u>	· · • M
<u>5ecu</u>	on C. Computation of Public Support Public Support percentage for 2012 (line			1 001/200 (6)		14	%
15	Public support percentage for 2012 (infe-					15	<del>%</del>
16a							
	box and stop here. The organization qua						
b	331/3% support test-2011. If the organ	nization did ne	ot check a box	c on line 13 or	16a, and line	15 is 331/3% o	
	check this box and stop here. The organ	ization qualifie	es as a publicly	supported org	janization .		. ▶ □
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part IV how the organization meets the "torganization	ets the "facts- facts-and-circ	-and-circumsta umstances" tes	inces" test, che st. The organiz	eck this box ar ation qualifies	nd <b>stop here.</b> E as a publicly su	xplain in pported
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiza Explain in Part IV how the organization in supported organization	tion meets the neets the "fact	e "facts-and-ci s-and-circums	rcumstances" tances" test. T	test, check the The organization	nis box and <b>sto</b> on qualifies as a	and line  p here.  publicly
18	Private foundation. If the organization d						
	instructions						
						nedule A (Form 990	

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

	If the organization falls to qualify	unaer the te	ests listed bel	ow, piease co	omplete Part	II.)	
	on A. Public Support		T	<del></del>		Т	
	dar year (or fiscal year beginning in) ▶	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees		]	1		ļ	
_	received. (Do not include any "unusual grants.")			ļ			
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the			Ì			
	organization's tax-exempt purpose			<u> </u>			
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	_		<u> </u>			
4	Tax revenues levied for the			]			
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities			1			}
	furnished by a governmental unit to the						
	organization without charge					ļ	<u> </u>
6	Total. Add lines 1 through 5		-	ļ	ļ		ļ. —
7a	Amounts included on lines 1, 2, and 3					1	
	received from disqualified persons .		1		ļ <u></u>	<del> </del>	ļ
b	Amounts included on lines 2 and 3						
	received from other than disqualified			1		1	
	persons that exceed the greater of \$5,000						1
_	or 1% of the amount on line 13 for the year		-	<b>!</b>	<del> </del>	-	
	Add lines 7a and 7b						
8	line 6.)						
Sooti	on B. Total Support		l .	<u> </u>	<del></del>	<u> </u>	<u>.                                    </u>
	dar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	(a) 2006	(6) 2009	(6) 2010	(u) 2011	(e) 2012	(I) Total
-	Gross income from interest, dividends,		<del> </del>				
IVa	payments received on securities loans, rents,						
	royalties and income from similar sources .		:				
b	Unrelated business taxable income (less				<u> </u>	<del></del>	
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
••	activities not included in line 10b, whether						
	or not the business is regularly carried on				i		
12	Other income. Do not include gain or						1
	loss from the sale of capital assets	1					l
	(Explain in Part IV.)		1				1
13	Total support. (Add lines 9, 10c, 11,						1
	and 12.)		1	1		1.	1
14	First five years. If the Form 990 is for the	ne organizatio	n's first, secor	nd, third, fourtl	n, or fifth tax y	ear as a section	on 501(c)(3)
	organization, check this box and stop he	re					🕨 🗀
Secti	on C. Computation of Public Suppor	t Percentag	je				
15	Public support percentage for 2012 (line	B, column (f) d	ivided by line	13, column (f))		15	%
16	Public support percentage from 2011 Sch	nedule A, Part	III, line 15 .		<u></u>	16	. %
Sect	ion D. Computation of Investment In						
17	Investment income percentage for 2012 (			-			%
18	Investment income percentage from 2011						%
19a	331/3% support tests—2012. If the organ						
	17 is not more than 331/3%, check this box					=	_
b	331/3% support tests—2011. If the organiz						
	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di	d not check a	box on line 14	l, 19a, or 19b,	check this box	and see instru	ictions 🕨 🗀

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	Page 4
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		•
•••••		
••••••		
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#### SCHEDULE O (Form 990 og 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Foundation for Letters, Inc.

## 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.

OMB No 1545-0047

2012

Open to Public Inspection

Employer identification number

45-4779338

Form 990-EZ, Part I, 16 - Other Expenses (\$6,319.55): Website/Branding/Logo: \$1,000; Insurance & Bonding (D&O Insurance, Workers
Comp) \$1,564; Taxes/Internal Revenue Service: \$712.09; Misc Operating Expenses (Office Supplies, Telephone, Hardware,
Software): \$3,043.46
Form 990-EZ, Part III, 31 - Other program services (describe in Schedule O):
Organize Writers Forums - bringing professional writers to Bronx Academy of Letters to read from their work and hear student work
Produce and Organize college workshops: College Essay Writing, Financial Aid Workshop, and College Fair
Summer Travel, Junior Statesmen of America, Cafe Raven, Raised \$212,505 for the Urban Assembly Bronx Academy of Letters by running
an Annual Benefit.
Form 990-EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees (continued):
Susan Kahn, Director, 2 hrs per week, \$0 compensation; Josh Kruter, Director, 2 hrs per week, \$0 compensation;
Samantha Skey, Director, 1 hr per week, \$0 compensation;

Schedule O (Form 990 or 990-EZ) (2012)	Page	2
Name of the organization	Employer identification number	_
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