Form **990**

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

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2003

Open to Public Inspection

Depa	artment o	of the Treasur nue Service	у)	► The organization may ha	enefit trust or private foun ve to use a copy of this return to	dation) satisfy st	ate reporting requirements			Open to P Inspect	
A	For the	2003 caler	ndar yea	ar, or tax yea	ar beginning 9/01	1/03 , and ending	3/31	/04				
В	Check if	applicable	Please	U Maille	of organization				D	Employ	er ID numb	er
Г	Addres	ss change	use IRS label or		-				ļ	35-1	710780)
X	1	change	print or	I mba	Literacy A	lliance, Inc			Ε	Telepho	ne number	
	Initial r	-	type.			nail is not delivered to street add	ress)	Room/suite	1	260-	426-73	323
	Final re		See	709	Clay Street	t					ing method:	
	1	ded return	Specific	City or	town, state or country, and		•	<u> </u>	1 55	Accrual	\Box	(specify)
┢	1	ation pending	Instruc-	-1	rt Wayne	IN 4680	2					
_]	p 0				(a)(1) nonexempt charitable	1	nd I are not applicable to se	ection 52	27 organiz	zations	
					ach a completed Schedule	. , . ,	- 1) Is this a group return for		-	Yes	X No
G	Websit	e: N /				, , , , , , , , , , , , , , , , , , ,) If "Yes," enter number of				
_		zation type					_) Are all affiliates included			Yes	∏ No
•	-	• • •	. \square	501(c) (3) ≤ (insert no)	4947(a)(1) or 527	1 '	(If "No," att a list See i			٠ ك	
<u>к</u>		here				mally not more than \$25,000	_) Is this a separate return	-	/ an		
	-	organization need not file a return with the IRS; but if the organization received a organization covered by a grid									Yes	∏ No
	_					ncial data. Some states		Group Exemption No				
		a complet					M	. 🗂			is not requir	ed
					nd 10b to line 12	726,01	_	to attach Sch B (For	_		•	
	art I					Net Assets or Fund E						
	1			•	similar amounts receive			(
	a	Direct pub	-	_		•	1a	557,86	9	ŀ		
	ь		• •				1b	70,65				
	c	97.636										
	d					716,164 noncash \$		1	Ť 10	.	716	,164
	2											<u> </u>
No.	3	Membership dues and assessments									•	
ථා	4	Interest on savings and temporary cash investments										
N	5		_	erest from se	-				5			
ب	6a	Gross rent		51631 110111 361	Curiucs		6a		<u> </u>	1		
	ь		Less: rental expenses 6b					7				
`	c		rental income or (loss) (subtract line 6b from line 6a)						T 60	اء		
Q Q R S	7	Other investment income (describe						7				
_ e	8a			m sales of as		(A) Securities	\cdots	(B) Other				
V P e		than inven				, , , , , , , , , , , , , , , , , , ,	8a		\neg			
u)	Ь		•	r basis and s	ales expenses		8b	1,19	1	1		
5 e	C	_		ach schedule	•		8c	-1,19	1			
	d	•			, e 8c, columns (A) and (B))		See Stmt 1	8	a l	-1	,191
	9	•		•		 mount is from gaming, chec	k here	▶ □				
	a	-		ot including S		of		_	1			
			•	rted on line 1			9a	9,85	2			
	ь	Less: direc	ct expens	ses bihardha	an fundraising expenses		9b					
	c	Net-incom	e or Clas	s) from spec	cial Pents (subtract line	9b from line 9a)			96	c		852
	10a				returns and allowances	•	10a					
	ь			ts sold $\hat{\mathcal{W}}^{\hat{\mathcal{G}}}$			10b			1		
	С					nedule) (subtract line 10b fro	m line 1	0a)	10	c		
	11	4.4-0	100	om Rentylu, I	# W W	, (,	1			
	12				, 3, 4, 5, 6c, 7, 8d, 9c, 10	Oc. and 11)			1:		724	,825
E	13				, column (B))				1:			, 362
E x p e	14		-		n line 44, column (C))				10			,285
6	15								1:			084
n s	16									6		<u> </u>
5 e S	17									7	648	731
A	18	Excess or (deficit) for the year (subtract line 17 from line 12)							18			,094
NS	19	Net assets or fund balances at beginning of year (from line 73, column (A))							19			,269
e e t t	20								2		202	
ι t s	21	· · · · ·								1	257	,363

Part II Statement of All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations Functional Expenses and section 4947(a)(1) nonexempt chantable trusts but optional for others. (See page 22 of the instructions.) Do not include amounts reported on line (B) Program (C) Management (A) Total (D) Fundraising 6b, 8b, 9b, 10b, or 16 of Part I. services and general 22 Grants and allocations (attach schedule) cash \$ (cash \$ 22 23 Specific assistance to individuals 23 24 Benefits paid to or for members 24 25 Compensation of officers, directors, etc. 25 22,676 308,227 263,275 22.276 26 26 Other salaries and wages 27 Pension plan contributions 27 $17,43\overline{6}$ 9,892 767 28 28 Other employee benefits 22,375 825 26.057 Payroll taxes 29 29 Professional fundraising fees 30 31 Accounting fees 31 32 Legal fees 32 8,683 6,114 405 1.164 33 Supplies 33 5,255 4,461 384 410 Telephone 34 34 1,278 $2,8\overline{31}$ 362 4,471 35 Postage and shipping 35 $32,2\overline{60}$ 41,458 5,130 4,068 Occupancy 36 37 Equipment rental and maintenance 3,638 896 1,585 1,157 Printing and publications 38 38 834 834 39 39 Travel Conferences, conventions, and meetings 40 41 41 Interest 22,629 15,611 5,945 1,073 Depreciation, depletion, etc. (attach schedule) 42 Other expenses not covered above (itemize): a 43a See Statement 2 210,043 179,366 26,478 4.199 b 43b 43c C d 43d 43e 44 Total functional expenses (add lines 22 - 43) Organizations 648,731 536,362 64,285 48,084 completing columns (B)-(D), carry these totals to lines 13-15 Joint Costs. Check ▶ I If you are following SOP 98-2. ▶ Yes |X| No Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? If "Yes," enter (i) the aggregate amount of these joint costs \$, (II) the amount allocated to Program services \$ and (iv) the amount allocated to Fundraising \$ (iii) the amount allocated to Management and general \$ Statement of Program Service Accomplishments (See page 25 of the instructions.) **Program Service** What is the organization's primary exempt purpose? Expenses See Statement (Required for 501(c)(3) & All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number (4) orgs, & 4947(a)(1) of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others) trusts, but optional for others.) See Statement 4 37,204 (Grants and allocations See Statement 5 160,143 (Grants and allocations See Statement 6 183,202 (Grants and allocations FAMILY LITERACY - INTERVENES IN THE INTERGENERATIONAL CYCLE OF ILLITERACY BY SUPPORTING PARENTS IN THEIR ROLE AS THEIR CHILD'S FIRST TEACHER (9/03-8/04, 62 FAMILIES) (Grants and allocations 155,813 e Other program services (attach schedule) See Stmt (Grants and allocations f Total of Program Service Expenses (should equal line 44, column (B), Program services) 536,362 DAA Form 990 (2003)

Balance Sheets (See page 25 of the instructions.) Part IV

	Note:	Where required, attached schedules and amounts with	nin the description	(A)		(B)
	1 .	column should be for end-of-year amounts only	Beginning of year	$\vdash \vdash$	End of year	
	45	Cash-non-interest-bearing	-	50		50
	46	Savings and temporary cash investments	-	75,361	46	187,876
	_ ا		1 1		1 }	
	47a	Accounts receivable	47a		1 1	
	Ь	Less: allowance for doubtful accounts	47b		47c	
	48a	Diadraa rassiushia	48a			
	40a	Pledges receivable Less: allowance for doubtful accounts	48b		48c	
	49	Grants receivable	400	39,391	49	22,232
	50	Receivables from officers, directors, trustees, and key	employees	33/331	13	22/232
Α	**	(attach schedule)	Cimployees		50	
s	51a		T	···-·		· · · · · · · · · · · · · · · · · · ·
S		schedule)	51a			
е	Ь	Less: allowance for doubtful accounts	51b		51c	
t	52	Inventories for sale or use			52	- · · · · · · · · · · · · · · · · · · ·
s	53	Prepaid expenses and deferred charges	. [53	
	54	Investments-securities	► Cost FMV		54	
	55a	Investments-land, buildings, and				
	i	equipment: basis	55a		ļ l	
	b	Less: accumulated depreciation (attach				
	ł	schedule)	55b		55c	
	56	Investments-other (attach schedule)	See Stmt 8	2,000	56	2,000
	57a	Land, buildings, and equipment: basis	57a 136,869		1	
	b	Less: accumulated depreciation (attach				
	1	schedule) See Stmt 9	57b 79,217	72,473	57c	<u>57,652</u>
	58	Other assets (describe	.)		58	
	{		100 075		0.60 010	
	59	Total assets (add lines 45 through 58) (must equal lin	<u> 189,275</u>		<u>269,810</u>	
L	60	Accounts payable and accrued expenses	-	8,006		12,447
i	61	Grants payable	<u> </u>		61	
a b	62	Deferred revenue			62	· · · · · · · · · · · · · · · · · · ·
ĩ	63	Loans from officers, directors, trustees, and key emplo	byees (attach			
ļ	640	schedule)	-		63 64a	
ť	64a	Tax-exempt bond liabilities (attach schedule) Mortgages and other notes payable (attach schedule)	<u>†</u>		64b	·
L	65	Other liabilities (describe	,		65	
e S	03	Other habilities (describe	- '		03	
_	66	Total liabilities (add lines 60 through 65)		8,006	66	12,447
_			and complete lines			
		67 through 69 and lines 73 and 74.	·			
ΝF	67	Unrestricted		53,524	67	54,620
e u	68	Temporarily restricted		127,745		202,743
t n d	69	Permanently restricted			69	
ΑŪ	Orga	inizations that do not follow SFAS 117, check here	▶ ☐ and			
s B		complete lines 70 through 74.				
s a	70	Capital stock, trust principal, or current funds	<u> </u>		70	·
e I ta	71	Paid-in or capital surplus, or land, building, and equipn		71		
s n	72	Retained earnings, endowment, accumulated income,	or other funds		72	
C	73	Total net assets or fund balances (add lines 67 thro	ugh 69 or lines		T	
о _е r _s		70 through 72;				_
3		column (A) must equal line 19; column (B) must equa	· · · · · · · · · · · · · · · · · · ·	181,269		257,363
	74	Total liabilities and net assets / fund balances (add	189 , 275	74	<u>269,810</u>	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Form	<u>990(2003) The Literacy A</u>	<u> 11</u>	<u>iance, Inc</u>				<u>.710780</u>			Page 4
Pa	rt IV-A Reconciliation of Reve	enu	e per Audited		Pa	rt IV-B R	econciliation of	Exp	enses pe	r Audited
	Financial Statements	wit	h Revenue per			F	inancial Statem	ents	with Exp	enses per
	Return (See page 27 o	of ti	ne instructions.)	- [R	leturn		•	•
<u></u>	Total revenue, gains, and other support			T	а	Total expenses a	and losses per			
	per audited financial statements	а	665,67			audited financial	•		a	664,581
	Amounts included on line a but not on			_	b		ed on line a but not			
					U					
	line 12, Form 990:				(4)	on line 17, Form				
	Net unrealized gains on		ı	- 1	(1)	Donated service		0 5 0	i i	
	investments \$					of facilities \$		830		
(2)	Donated services and use				(2)	Prior year adjust	ments			
	of facilities \$ 15,850					reported on line	20,			
(3)	Recoveries of prior			-		Form 990 \$				
	year grants \$			1	(3)	Losses reported	on line 20,			
(4)	Other (specify):			- 1		Form 990 \$			' i	
	See Stmt 10				(4)	Other (specify):				
	\$ 249,516						See Stmt	11		
	Add amounts on lines (1) through (4)	ь	265,36	6		\$	249,			
	, and amounts on miss (1) amough (1)			Ť		Add amounts on	lines (1) through (4)		ь	265,366
	Line a minus line b	С	724,82	5	_	Line a minus line			c	648,731
		٠	124,02	7					 	040,731
	Amounts included on line 12,			- 1	d	Amounts include	· ·			
	Form 990 but not on line a:					Form 990 but no				
(1)	Investment expenses		•	-	(1)	Investment expe	enses			
	not included on line					not included on I	ine			
	6b, Form 990 \$					6b, Form 990 \$				
(2)	Other (specify):			-	(2)	Other (specify):				
	\$					\$				
	Add amounts on lines (1) and (2)	d	!	-		Add amounts on	lines (1) and (2)	•	d	
	Total revenue per line 12, Form 990				е		per line 17, Form 990)		
	(line c plus line d)	_	724,82			(line c plus line c		•	اما	648,731
Pai		T						encate	q. see usus	
, u	the instructions)	, ,	asices, and itey E	,	pio,	CCS (LIST CACITY	one even in not comp	CHSale	u, see page	3 27 01
	the instructions)			- /	/B\ T	itle and average	(C) Compensation	(D)	Contrib to	(E) Expense
	(A) Name and address			hoù	urs pe	r week devoted to	(If not paid, enter	emple	Contrib to byee benefit & deferred	account and other
						position	-0)	cor	npensation	allowances
٥.	- 24 - 4 4 12									
_ <u>Se</u>	e Statement 12									
							ļ	}		1
			İ							
										<u> </u>
			•							
								 		
]]		1
						·		-		
										ļ
]]		
75	Did any officer, director, trustee, or key emp	loye	e receive aggregate com	per	nsati	on of more than \$	100,000 from your		-	
	organization and all related organizations, of	wh	ch more than \$10,000 wa	as p	provi	ded by the related	d organizations?		•	Yes X No
	If "Yes," attach schedule-see page 28 of the	inst	ructions.							

Form	990 (2003) The Literacy Alliance, Inc 35-1710780		Р	age 5
	rt VI Other Information (See page 28 of the instructions.)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of			
	each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		Х
	If "Yes," attach a conformed copy of the changes.			.,
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a	79		Х
80a	statement Is the organization related (other than by association with a statewide or nationwide organization) through common	- '''		
Jua	membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		Х
b	If "Yes," enter the name of the organization			
	and check whether it is exempt or nonexempt.			ļ
81a	Enter direct and indirect political expenditures. See line 81 instructions			1
b	Did the organization file Form 1120-POL for this year?	81b		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge			
	or at substantially less than fair rental value?	82a	X	<u> </u>
b	If "Yes," you may indicate the value of these items here. Do not include this amount as			
	revenue in Part I or as an expense in Part II. (See instructions in Part III.)	╡ '	.,	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Х	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A	83b		Х
34a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		┝≏
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b		
8 5	or gifts were not tax deductible? N/A 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a		
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	1000		t
	received a waiver for proxy tax owed for the prior year.	1		ļ
С	Dues, assessments, and similar amounts from members			
d	Section 162(e) lobbying and political expenditures			}
9	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)			ļ
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g		<u> </u>
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its			1
	reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax	ľ		ľ
	year? N/A	85h		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	4		ŀ
_b	Gross receipts, included on line 12, for public use of club facilities	4	1	ł
B7	501(c)(12) orgs Enter: a Gross income from members or shareholders	-		i
b	Gross income from other sources. (Do not net amounts due or paid to other			Ì
00	sources against amounts due or received from them) At any time during the year did the proprieton over a 50% or greater interest in a tayable corporation or	-		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections			
	301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:	- 55		
	section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			1
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction			
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach			İ
	a statement explaining each transaction	89b		Х
С	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under			
	sections 4912, 4955, and 4958			(
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			(
90a	List the states with which a copy of this return is filed IN			_
b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions)	400		20
91	The books are in care of ▶ Judith Stabelli Telephone no. ▶ 260	-426	- /3	123
	Located at ▶ 709 Clay Street, Ft Wayne, IN ZIP+4 ▶ 46802			⊾ Γ
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here			▶ [
	and enter the amount of tax-exempt interest received or accrued during the tax year		000	(2003

Part VII	Analysis of Income-Pro	oducing Activities	(See pag	e 33 of the instr	uctions.)	<u></u>
Note: Enter (gross amounts unless otherwise		Unrelate	d business income	Exclude	d by sec 512, 513, or 514	(E) Related or
indicated.	n service revenue:	E	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	exempt function income
		<u> </u>			1		

θ							
f Medicare	e/Medicaid payments	L					
g Fees and	d contracts from government agend	cies					
94 Members	ship dues and assessments						
95 Interest of	on savings and temporary cash inv	estments		 		,	
	ls and interest from securities	L-					·
	Net rental income or (loss) from real estate:						
	anced property	-					
	b not debt-financed property				-		
	al income or (loss) from personal pr	roperty		 	+		
	vestment income	an inventory			+		-1,191
,	` '				3	9,852	<u> </u>
	rofit or (loss) from sales of inventor	, –			+ -	3,032	
-	venue: a				_		
b							
6							
104 Subtotal	(add columns (B), (D), and (E))				0	9,852	-1,191 8,661
1 05 Total (ad	dd line 104, columns (B), (D), and (E))				-	8,661
Note: Line 105	plus line 1d, Part I, should equal th						
Part VIII	Relationship of Activiti						
Line No.	Explain how each activity for which	ch income is reported ir	column (E)	of Part VII contributed	l importan	tly to the accomplishme	nt
•	of the organization's exempt purp	oses (other than by pro	viding funds	for such purposes)			
N/A				-			
Dod IV	Information Bonordina T	'avable Cubaidian	ico and Di	iorogordod Entir	lies (Se	o page 24 of the i	notructions)
Part IX	Information Regarding T (A)		ies allu Di	(C)	lies (Se		(E)
Name add	dress, and EIN of corporation,	(B) Percentage of		lature of activities		(D) Total income	End-of-year assets
northore	partnership, or disregarded entity ownership intere						a33013
partners		ownership interest	%				
partners	ship, or disregarded entity /A	ownership interest	%				<u> </u>
partners		ownersnip interest	%				
partners		ownership interest					
partners N	I/A		% %	Personal Benefi	t Contra	ICts (See page 34 of th	ne instructions.)
partners N	Information Regarding T	ransfers Associa	% % ted with F				
Part X (a) Did t	Information Regarding T	ransfers Associa	% % ted with F ly or indirectly	, to pay premiums o	n a persor		Yes X No
Part X (a) Did t (b) Did t	Information Regarding T the organization, during the year, re the organization, during the year, p	ransfers Associa eceive any funds, direct ay premiums, directly o	% % ted with F ly or indirectly, or	, to pay premiums o	n a persor		Yes X No
Part X (a) Did t (b) Did t	Information Regarding T	ransfers Associa eceive any funds, direct ay premiums, directly o n 4720 (see instructions	% % ted with F ly or indirectly, or	y, to pay premiums on n a personal benefit o	n a persor contract?	al benefit contract?	Yes X No
Part X (a) Did t (b) Did t Note: If "Ye	Information Regarding T the organization, during the year, re the organization, during the year, p es" to (b), file Form 8870 and Form Under penalties of perjury, I declare the and belief, it is true, correct, and comp	ransfers Associa eceive any funds, direct ay premiums, directly on 4720 (see instructions nat I have examined this ret	% % ted with F ly or indirectly, or indirectly, or indirectly, or indirectly, or	y, to pay premiums on a personal benefit on a companying schedules	n a persor contract? and statem	al benefit contract?	Yes X No Yes X No
Part X (a) Did t (b) Did t	Information Regarding T the organization, during the year, re the organization, during the year, p es" to (b), file Form 8870 and Form Under penalties of perjury, I declare th and belief, at is true, correct, and comp	ransfers Associa eceive any funds, direct ay premiums, directly on 4720 (see instructions nat I have examined this ret	% % ted with F ly or indirectly, or indirectly, or indirectly, or indirectly, or	y, to pay premiums on a personal benefit on a companying schedules	n a persor contract? and statem	al benefit contract?	Yes X No Yes X No
Part X (a) Did t (b) Did t Note: If "Yo	Information Regarding T the organization, during the year, re the organization, during the year, p es" to (b), file Form 8870 and Form Under penalties of perjury, I declare the and belief, it is true, correct, and comp	ransfers Associa eceive any funds, direct ay premiums, directly on a 4720 (see instructions at I have examined this ret olete Declaration of prepare	% % % ted with F ly or indirectly, o	y, to pay premiums on a personal benefit of companying schedules fficer) is based on all info	n a persor contract? and statem	al benefit contract?	Yes X No Yes X No
Part X (a) Did t (b) Did t Note: If "Ye	Information Regarding T the organization, during the year, re the organization, during the year, p es" to (b), file Form 8870 and Form Under penalties of perjury, I declare the and belief, it is true, correct, and comp	ransfers Associa eceive any funds, direct ay premiums, directly on a 4720 (see instructions at I have examined this ret olete Declaration of prepare	% % % ted with F ly or indirectly, o	y, to pay premiums on a personal benefit on a companying schedules	n a persor contract? and statem	nal benefit contract?	Yes X No Yes X No

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

OMB No 1545-0047

Employer identification number

2003

Department of the Treasury Internal Revenue Service Name of the organization

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

The Literacy Alliance, Inc			35-171078	0
Part I Compensation of the Five Highest Paid	Employees Other Tha	n Officers, Dire	ctors, and Truste	es
(See page 1 of the instructions. List eac	h one. If there are non-	e, enter "None."		
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee ben plans & deferred compensation	(e) Expense account and other allowances
NONE				
•				
Total number of other employees paid over				
Part II Compensation of the Five Highest Paid (See page 2 of the instructions. List eac				nter "None.")
(a) Name and address of each independent contractor paid	more than \$ 50,000	(b) Type	of service	(c) Compensation
NONE				
•				
Total number of others receiving over \$50,000 for				
professional services For Paperwork Reduction Act Notice, see the Instructions for Fo	rm 990 and Form 990 F7		Schedule A (Form	000 or 000-E71 2001
FOI FADELWOIK REQUESION ACT NOTICE. SEE THE INSTRUCTIONS FOF FO	nnı əəv anu fulli əəv-EL.		JUITEUUIT A (FUIII)	777 UI 33V"EZJ ZUUJ

Part III Statements About Activities (See page 2 of the instructions.) 1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$ (Must equal amounts on line 38, Part VI-A, or line I of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities. 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any	1	Yes	No
attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$ (Must equal amounts on line 38, Part VI-A, or line I of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities. 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any	1		
or incurred in connection with the lobbying activities Part VI-A, or line I of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities. 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any	1		
Part VI-A, or line I of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities. 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any	1		
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities. 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any			X
organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities. 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any		1	<u> </u>
the lobbying activities. 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any			
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any			
authoratical contributions to return advantage officers annotage from annotage of their females, as		Ì	
substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or			
with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority			
owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the			
transactions.)			
a Sale, exchange, or leasing of property?	2a	ļ	X
b Lending of money or other extension of credit?	2b		X
c Furnishing of goods, services, or facilities?	2c		Х
d Payment of compensation (or payment or reimbursement of expiration if more than \$1,000)?	2d		Х
			1
Transfer of any part of its income or assets?	2ө	ļ	X
3a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how			,,
you determine that recipients qualify to receive payments.)	3a	-	X
3b Do you have a section 403(b) annuity plan for your employees?	3b		Х
4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4		Х
		·	
Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
The organization is not a private foundation because it is. (Please check only ONE applicable box.)			
A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
A school. Section 170(b)(1)(A)(ıı). (Also complete Part V.)			
A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v). A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name,	city.		
Trinodical resourch organization operated in conjunction with a neophalic costion from the neophalic name	·,,		
and state ▶			
10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(7)(A)(iv).		
(Also complete the Support Schedule in Part IV-A.)			
11a X An organization that normally receives a substantial part of its support from a governmental unit or from the general public.			
Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
12 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross			
receipts from activities related to its charitable, etc., functions-subject to certain exceptions, and (2) no more than 33 1/3% 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) (Also complete the Support Schedule in Part IV-A.)	00		
13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization	s		
described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See			
section 509(a)(3))			
Provide the following information about the supported organizations. (See page 5 of the instructions.)			
(a) Name(s) of supported organization(s)	(b) Line		:r
(4)	from	above	
An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)			

Part IV-A , Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting.

dar year (or fiscal year beginning in) Gifts, grants, and contributions	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
, ,					
received. (Do not include unusual					
grants See line 28)	670 , 020	887 , 682	545,741	505,142	<u>2,608,585</u>
Membership fees received					0
Gross receipts from admissions, merchandise					
sold or services performed, or furnishing of					
facilities in any activity that is related to the					
organization's charitable, etc , purpose					0
,					
, <u>,</u>	,				
,					
by the organization after June 30, 1975	1,351	3,868	10,994	8,278	24,491
Net income from unrelated business					
activities not included in line 18					0
Tax revenues levied for the organization's					
benefits and either paid to it or expended on					
its behalf					0
-					
		. =-			0
include asin or (loss) from					
sale of capital assets Stmt 13					70,255
Total of lines 15 through 22					2,703,331
Line 23 minus line 17					2,703,331
•					
Organizations described on lines 10 or	11: a Enter 2% of	f amount in column (e),	line 24	. ► 26a_	54,067
Prepare a list for your records to show the	name of and amount of	contributed by each per	son (other than a		
• • • • • • • • • • • • • • • • • • • •	•	•			4 455 005
			ese excess amounts		1,455,987
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				▶ <u>26c</u>	2,703,331
Add: Amounts from column (e) for lines:	18 24,	<u>491</u> 19	455 005		1 550 700
		$\frac{255}{26b}$ 26b $\frac{1}{2}$	<u>, 455, 987</u>		1,550,733
					1,152,598
					42.6362%
-				•	
			I in each year from, eac	h "disqualified person."	
•		•			N/A
	•	•		• •	
·	_			=	· -
	ed and the larger amou	nt described in (1) or (7	2), enter the sum of the	se differences (the exce	
·					N/A
	•	•)	(1999)	
• •	15	16		<u>.</u> 1	I
		7b total		▶ 27d	
			. 1 1	▶ 27e	
	· · · · · · · · · · · · · · · · · · ·			▶ 27g	%
				▶ 27h	%
	Prepare a list for your records to show the governmental unit or publicly supported or amount shown in line 26a. Do not file this Total support for section 509(a)(1) test: En Add: Amounts from column (e) for lines: Public support (line 26c minus line 26d tot Public support percentage (line 26e (nu Organizations described on line 12: person," prepare a list for your records to Do not file this list with your return. En (2002) (2 For any amount included in line 17 that washow the name of, and amount received fit (Include in the list organizations described the difference between the amount received amounts) for each year (2002) (2 Add: Amounts from column (e) for lines: 17 Add: Line 27a total Public support (line 27c total minus line 27 Total support percentage (line 27e (nu Investment income percentage (line 18	faculities in any activity that is related to the organization's charitable, etc., purpose Gross income from interest, dividends, amounts received from payment on securities loans (section 512(a)5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 Net income from unrelated business activities not included in line 18 Tax revenues levied for the organization's benefits and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge Other Income Attach a schedule Do not include gain or (loss) from sale of capital assets Total of lines 15 through 22 Tat 1, 626 Enter 1% of line 23 Total of lines 15 through 22 Trepare a list for your records to show the name of and amount of governmental unit or publicly supported organization) whose tota amount shown in line 26a. Do not file this list with your return. Total support for section 509(a)(1) test: Enter line 24, column (e) Add: Amounts from column (e) for lines: 18 24, 22 Public support (line 26c minus line 26d total) Public support percentage (line 26e (numerator) divided by I Organizations described on line 12: a For amounts incluperson," prepare a list for your records to show the name of, and amount received for each year, that was included in the list organizations described in lines 5 through 11, at the difference between the amount received and the larger amound amounts) for each year: (2002) (2001) For any amount included in line 17 that was received from each year, that was included in the list organizations described in lines 5 through 11, at the difference between the amount received and the larger amound amounts) for each year: (2002	facilities in any activity that is related to the organization's charitable, etc., purpose Gross income from interest, dividends, amounts received from payment on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 1, 351 3, 868 Net income from unrelated business activities not included in line 18 Tax reverues levied for the organization's benefits and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge to not include the value of services or facilities generally furnished to the public without charge to not include the value of services or facilities generally furnished to the public without charge to not include the value of services or facilities generally furnished to the public without charge. Total of lines 15 through 22 7, 416 891, 550 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), Prepare a list for your records to show the name of and amount contributed by each per governmental unit or publicly supported organization) whose total gifts for 1999 through amount shown in line 26a. Do not file this list with your return. Enter the total of all the Total support for section 509(a)(1) test: Enter line 24, column (e) Add: Amounts from column (e) for lines: 18	facilities in any activity that is related to the organization's charitable, etc. purpose Gross income from interest, dividends, amounts received from payment on securities leans (section 511 (axes) from businesses acquired yith organization after June 30, 1975 Net income from unrelated businesses acquired yith organization after June 30, 1975 Net income from unrelated business activities not included in line 18 Tax revenues levied for the organization's benefits and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge to not include the value of services or facilities generally furnished to the organization by a governmental unit without charge to not include the value of services or facilities generally furnished to the public without charge to not include the value of services or facilities generally furnished to the public without charge. Other Income Attach a schedule Don to include gain or (oss) from \$\frac{\text{time 27}}{2}\$ \$\frac{\text{71}}{2}\$ \$\frac{\text{71}}{2}\$ \$\frac{\text{72}}{2}\$ \$\frac{\text{73}}{2}\$ \$\frac{\text{75}}{2}\$ \$\frac{\text{73}}{2}\$ \$\frac{\text{73}}{2}\$ \$\frac{\text{73}}{2}\$ \$\frac{\text{73}}{2}\$ \$\frac{\text{74}}{2}\$ \$\frac{\text{74}}{2}\$ \$\frac{\text{74}}{2}\$ \$\frac{\text{75}}{2}\$ \$\t	facilities in any activity that is related to the organization's charable, etc., purpose Gross income from interest, dividends, amounts received from payment on securities librosis (accion 51(1), 26(1)), rents, regulates, and unrelated business taxable income (less section 511 (axea) from businesses acquired by the organization after June 30, 1975 1, 351 3, 868 10, 994 8, 278 Not income from unrelated business acquired by the organization's benefits and either paid to it or septended on its behalf Tax reviews levied for the organization's benefits and either paid to it or septended on its behalf Tax reviews levied for the organization's benefits and either paid to it or septended on its behalf Tax reviews levied for the organization's benefits and either paid to it or septended on its behalf Tax visition of services or facilities generally furnished to the public without charge to not include the visition of the organization's period on the organization's period on the organization's period on the organization's period on the organization's period organization organization's period organization organization's period organization organization organization organization's period organization organization organization's period organization o

P۵	'n	۵	4

Pa	rrt V Private School Questionnaire (See page 7 of the instructions.)			
	(To be completed ONLY by schools that checked the box on line 6 in Part IV)			<u> </u>
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, N/A	00	Yes_	No
	other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its			Ì
	brochures, catalogues, and other written communications with the public dealing with student admissions,			
	programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during			ĺ
	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way	31		
	that makes the policy known to all parts of the general community it serves?	31		\vdash
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following.	00-		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b_		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		<u> </u>
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b_		<u> </u>
С	Employment of faculty or administrative staff?	33c		_
d	Scholarships or other financial assistance?	33d	-	_
е	Educational policies?	33е_		_
f	Use of facilities?	33f		-
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
.	Has the organization's right to such aid ever been revoked or suspended?	34b		
מ	If you answered "Yes" to either 34a or b, please explain using an attached statement.	340		
	Done the constitution and for the tit has considered with the contradition of a stitute of a stitute of A OA through A OE		1	
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C. B. 587, covering racial pondiscrimination? If "No " attach an explanation	35		1

			<u> </u>						2 - T
F	• - •	litures by Electing			~		•		
_		ONLY by an eligi							
Chi		ngs to an affiliated grou Lobbying Expend		<u> </u>	you ch	ecked "a" and "limite (a) Affiliated group total		(b) To be completed for ALL electing	
	(The term "expendit	ures" means amounts p	oald or incurred)	··			\longrightarrow	organizations	
36	Total lobbying expenditures to influence	public opinion (grassro	ots lobbying)		36				
	Total lobbying expenditures to influence	- ,	ct lobbying)		37		\longrightarrow		
38	Total lobbying expenditures (add lines 3	6 and 37)			38				
	Other exempt purpose expenditures				39		\longrightarrow		
	Total exempt purpose expenditures (ad	•			40				
41	Lobbying nontaxable amount. Enter the	amount from the follow	ing table-						
	If the amount on line 40 is-	The lobbying no	ontaxable amount is-	_					
	Not over \$500,000	20% of the amount							
	Over \$500,000 but not over \$1,000,000	·	of the excess over \$500,0	L			1		
	Over \$1,000,000 but not over \$1,500,000	·	of the excess over \$1,000		41		\rightarrow		
	Over \$1,500,000 but not over \$17,000,000		of the excess over \$1,500,	000			- 1		
40	Over \$17,000,000	\$1,000,000			١				
	Grassroots nontaxable amount (enter 2	•	- 00		42		\dashv		
	Subtract line 42 from line 36. Enter -0- i				43		\longrightarrow		
44	Subtract line 41 from line 38 Enter -0- i	riine 41 is more than iin	e 38		44		\rightarrow		
	Cautian If there is an amount on either	tino 42 or lino 44 voice	must file Form 4720						
_	Caution: If there is an amount on either		ging Period Unde	r Saction	501/	l			
	(Same arganizations	that made a section 50			•	•	low		
		structions for lines 45 th				or the live columns be	IUW.		
_	oce me m	Structions for lines 40 ti	nough 50 on page 111	or the monac	dons /				
			Lobbying Ex	oenditures (During	4-Year Averaging P	eriod		
	Calendar year (or	(a)	(b)	(0	;)	(d)		(e)	
_	fiscal year beginning in)	2003	2002	20	01	2000		Total	
45	Labbuma mantavable amount]		j	i		
	Lobbying nontaxable amount			1			\longrightarrow		
40	Lobbying ceiling amount (150% of line 45(e))								
_	ine 43(e))						$\overline{}$		
<u>47</u>	Total lobbying expenditures						ŀ		
	Q								
	Grassroots nontaxable amount			-					
49	Grassroots ceiling amount (150% of								
	line 48(e))						-+		—
50	Grassroots lobbying expenditures					İ			
_		by Nonelecting I	Public Charities	·	····	!			
-		y by organizations		nlete Part	VI-A) (See page 12 (of the	instructions) N	I/P
Du	ring the year, did the organization attemp					, (000 pago 12)	<u> </u>	mon donono.,	•/-
	empt to influence public opinion on a legis		-	-	,	Yes	No	Amount	
а			, y						
b		mpensation in expense	s reported on lines c tl	rough h.)					
C		,		3					
d		ne public							
е									
f									
g			ls, or a legislative body	,					
h		-	= = =						
i	Total lobbying expenditures (Add line	•	.,	-			$\neg \uparrow$		
	If "Ves" to any of the above, also attac	. .	datailed description of	the lebbure	o o tu u t			• • • • • • • • • • • • • • • • • • • •	

6

Schedule A (Form	990 or 990-EZ) 2003	The Li	teracv	Alliance.	Inc	35-1710780		P	age
						ionships With Noncharitable			
	Exempt Organiza	ations (Se	ee page 12	of the instruction	ns.)				
51 Did the repo	orting organization direc	tly or indirect	tly engage in a	ny of the following wi	th any other org	anization described in section			
	e Code (other than sect		-			I organizations?			
	om the reporting organi	zation to a ne	oncharitable ex	cempt organization of	•			Yes	No
(i) Cash							51a(i)		X
(ii) Other b Other transa	assets						a(ii)		<u> </u>
	or exchanges of assets	s with a nonc	haritable exem	nnt organization			b(i)		Х
• •	ases of assets from a r				b(ii)		X		
, ,	al of facilities, equipmen					b(iii)		Х	
` '	bursement arrangemen	•					b(iv)		Х
(v) Loans	s or loan guarantees						b(v)		Χ
(vi) Perfor	rmance of services or n	nembership (or fundraising s	olicitations			b(vi)		Х
c Sharing of fa	acilities, equipment, ma	ılıng lısts, oth	er assets, or p	aid employees			_ c		X
d If the answe	r to any of the above is	"Yes," comp	lete the followi	ing schedule Column	(b) should always	ays show the fair market value of the			
_	-	-		_		ss than fair market value in any			
transaction	or sharing arrangement	, show in col	umn (d) the va	lue of the goods, oth	er assets, or se				
(a)	(b)	ľ	(c)			(d)			
Line no	Amount involved	Name o	f nonchantable e	xempt organization	Descrip	tion of transfers, transactions, and sharing	arrangem	ents	
NI / D					 				
N/A		<u> </u>			 				
					<u> </u>				
•		<u> </u>							
				-	 				
				 	 				
					 	····			
					<u> </u>				
		 			 				
					•				
				· · · · · · · · · · · · · · · · · · ·					
		 							
					<u> </u>				
52a Is the organ	ization directly or indire	ctly affiliated	with or related	to one or more tax.	evernat organia	rations			
	section 501(c) of the C						- Y	as IX	n E
	nplete the following sch	•	555 55	.(0)(0)) 0 000	52. .	•	<u>ب</u> .		J
	(a)			(b)	1	(c)			
	Name of organization		Type	of organization		Description of relationship			
N/A			1						
					-				
· ··									
			1						

0.0		ı	S	ipecial Even	ts Schedule			0000
Form 99	3 0		0000		0/01/02		/21/04	2003
ame		For calendar	year 2003, or tax year b	eginning	9/01/03	, and ending 8	3/31/04 Employer Ider	itification Number
The Tit	orac	v Allia	nce, Inc				35-1710	
THE TI	LETAC	y Allia	nce, me				1 33-1710	7700
			(A)	(B)	(C)	Oth	ners	Total
Gross receipts	5	_	9,852		<u> </u>	0	0	9,85
Less contrib		-	0 053		0	0	0	9,85
Gross revenue Less direct		-	9,852 0		0	0	0	9,00
Net income (lo		-	9,852		0	0	0	9,85
Description:	(A)	MISC	ELLANEOUS					
	(B)							
		 		·				
	(C)							
	Others							
								
								
				 				
								
								
								

Federal Statements

632100 The Literacy Alliance, Inc 35-1710780 FYE: 8/31/2004

- Other
Inventory
er Than
ets Othe
of Assets
c - Sale
Line 8
). Part I
orm 990, F
int 1 - F
Stateme

•		Gain/ -Loss	-1,191	-1,191
		Deprec	1,119 \$	1,119 \$
		Cost & Expense	S	\$ 2,310 \$
		Sale Price		0
		Date Sold	2/28/04 \$	
		Date Acquired	9/30/01	
		Whom		
	Desc	How Rec'd	- DONATED Purchase	
			COMPUTERS - DONATED	Total

35-1710780 FYE: 8/31/2004

Federal Statements

Statement 2 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$ \$;	\$	\$
Expenses				
STAFF DEVELOPMENT	377	105		272
INSTRUCTION	23,514	23,514		
INSTRUCTION	500	500		
LEARNING CENTERS	398	398		
RESOURCE MATERIAL	1,471	1,471		
RESOURCE MATERIAL	2,109	2,109		
LEARNING CENTERS	5,017	5,017		
READ TO ME	93,566	93,566		
ADVERTISING AND PROMOTION	25,851	166	25,020	665
ADVERTISING AND PROMOTION	166	166		
LEARNING CENTERS	166	166		
READ TO ME	394	394		
PROFESSIONAL FEES	20,822	17,743	1,103	1,976
PROFESSIONAL FEES	1,210	1,210		
PROFESSIONAL FEES	5,058	5,058		
PROFESSIONAL FEES	3,299	3,299		
INSURANCE	976	616	211	149
INSURANCE	426	426		
INSURANCE	590	590		
INSURANCE	357	357		
DUES AND SUBSCRIPTIONS	900	439	144	317
DUES AND SUBSCRIPTIONS	391	391		
DUES AND SUBSCRIPTIONS	391	391		
DUES AND SUBSCRIPTIONS	287	287		
MISC STUDENT EXPENSE	4,958	4,958		
MISC STUDENT EXPENSE	50	50		
MISC STUDENT EXPENSE	3,231	3,231		
MISC STUDENT EXPENSE	25	25		
CHILDCARE	12,723	12,723		
SPECIAL EVENTS	820	,		820
Total	\$ 210,043	179,366	\$ 26,478	

Statement 3 - Form 990, Part III - Organization's Primary Exempt Purpose

THE LITERACY ALLIANCE STRIVES TO END ILLITERACY BY TEACHING ADULTS THROUGH LEARNING CENTERS, LITERACY PROGRAMS AND TUTORING SERVICES THAT EMPOWER INDIVIDUALS TO SUCCEED AT WORK, AT HOME, AND IN THE COMMUNITY. TO THAT END, THE ORGANIZATION PROVIDES INSTRUCTION FOR ADULTS THROUGH ONE -ON-ONE TUTORING, ADULT LEARNING CENTERS; AND A COLLABORATIVE FAMILY LITERACY PROJECT. THE LITERACY ALLIANCE ALSO CONDUCTS THE READ TO ME CAMPAIGN THAT ENCOURAGES ADULTS TO READ TO CHILDREN BY DISTRIBUTING NEW CHILDREN'S BOOKS TO LOW-INCOME FAMILIES.

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Statement 4 - Form 990, Part III, Line a - Statement of Program Service Accomplishments

ONE-ON-ONE LETERACY TUTORING - TRAINED LETERACY VOLUNTEERS PROVIDE ONE-ON-ONE INSTRUCTION FOR ADULT LEARNERS USING PRINTED MATERIALS AND SPECIALIZED COMPUTER SOFTWARE (9/03-8/04, 107 LEARNERS)

Statement 5 - Form 990, Part III, Line b - Statement of Program Service Accomplishments

LEARNING CENTERS - ADULT LEARNERS GATHER TO STUDY BASIC SKILLS IN READING, WRITING AND MATH WITH THE GUIDANCE OF LICENSED TEACHERS AND VOLUNTEER TUTORS (9/03-8/04, 107 ADULT LEARNERS)

Statement 6 - Form 990, Part III, Line c - Statement of Program Service Accomplishments

READ TO ME - NEW AND GENTLY USED CHILDREN'S BOOKS ARE DISTRIBUTED TO PRE-SCHOOL CHILDREN IN LOW INCOME FAMILIES BY PIGGYBACKING ON THE SERVICE DELIVERY SYSTEMS OF OTHER LOCAL SOCIAL SERVICE ORGANIZATIONS (9/03-8/04, 26,291 NEW AND 7,992 GENTLY USED BOOKS)

Statement 7 - Form 990, Part III, Line e - Other Program Services

EVERYBODY READS - PROGRAM WITH LILLY ENDOWMENT CALLED THE CAPE PROJECT THAT WILL IMPROVE THE READING LEVELS OF ALLEN COUNTY CHILDREN.
MIX - PROGRAM TO PROVIDE TRANSLATION INFORMATION AND

REFERRAL SERVICES TO NON-ENGLISH SPEAKING ALLEN COUNTY RESIDENTS.

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Statement 8	- Form 990	, Part IV	Line 56 -	Other Investments	j
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Description	В	eginning of Year	 End of Year	Basis of Valuation
Ft Wayne Community Foundation	\$	2,000	\$ 2,000	Cost
Total	\$	2,000	\$ 2,000	

Statement 9 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description							
	_	Beginning of Year	Accum Deprec	_	End of Year	_	Accum Deprec
EQUIPMENT & FURNITURE							
	\$_	130,179	57,706	\$_	136,869	\$_	79,217
Total	\$	130,179	57,706	\$	136,869	\$	79,217

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Description	Amount
NET ASSETS RELEASED FROM RESTRICTIONS	\$ 249,516
Total	\$ <u>249,516</u>

Statement 11 - Form 990, Part IV-B - Other Expenses Included on Financial Statements

Description	 Amount
RESTRICTIONS SATISFIED BY PAYMENTS	\$ 249,516
Total	\$ 249,516

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632100 The Literacy Alliance, Inc 35-1710780 FYE: 8/31/2004

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			Average	did ney Lindioyees
Name		Title	Hrs	
Comp Benefits	,	Expenses	Address	City, State, Zip
JOE CONTRUCCI		DIRECTOR 0		
0	0	0 6119 STELLHORN RD	0	FORT WAYNE IN 46815
VICKI LEE JOHNSON		DIRECTOR 0		
	0	0 8101 WEST JEFFERSON	NOS	FORT WAYNE IN 46804
DOUGLAS E STEPHENS		RECTOR		
0	0	0 116 EAST BERRY ST		FORT WAYNE IN 46802
JAMES DAVIS		DIRECTOR 0		
	0	BARF	ST	FORT WAYNE IN 46802
CASEY SCHUERICH		TREASURER 0		
0	0	0 1610 SPY RUN		FORT WAYNE IN 46802
LAURA TALIAFERRO		PRESIDENT 0		
0	0	0 3028 PEPPERTREE TRAIL	FRAIL	FORT WAYNE IN 46808
KAREN FRANCISCO		DIRECTOR 0		
0	0	0 600 WEST MAIN ST		FORT WAYNE IN 46802
JOE SHADE		\overline{a}		
0	0	λ	HILL PARKWAY	FORT WAYNE IN 46835
BRIAN K THOMASON		DIRECTOR 0		
0	0	0 8001 WEST JEFFERSON	SON BLVD	FORT WAYNE IN 46804
JIMELLA HARRIS		DIRECTOR 0		
	0	0 PO BOX 6566		FORT WAYNE IN 46896
JANELLA SPRINKLE		DIRECTOR 0		
0	0	0		FORT WAYNE IN 46801
JEAN VRABEL		DIRECTOR 0		
0	0	0 PO BOX 5508		FORT WAYNE IN 46895
WILLIAM HERX		DIRECTOR 0		
0	0	0 1300 SOUTH CLINTON	NC	FORT WAYNE IN 46802
SUSAN ST CLAIR		RECTOR		
0	0	0 720 TAYLOR ST		FORT WAYNE IN 46802

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Statement 13 - Schedule A, Part IV-A, Line 22 - Other Income

Description	2002	 2001	_	2000	_	1999
REIMBURSEMENTS SPECIAL EVENT	\$ 60,135 10,120	\$	\$		\$	
Total	\$ 70,255	\$ 0	\$_	0	\$_	0

Department of the Treasury

4562 Form

Depreciation and Amortization

(Including Information on Listed Property)

See separate instructions.

Attach to your tax return.

23

OMB No 1545-0172

2003

Attachment Sequence No 67

The Literacy Alliance, Inc Identifying number Name(s) shown on return 35-1710780 Business or activity to which this form relates Indirect Depreciation **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 100,000 1 Maximum amount. See page 2 of the instructions for a higher limit for certain businesses 1 Total cost of section 179 property placed in service (see page 2 of the instructions) 2 400,000 Threshold cost of section 179 property before reduction in limitation 3 3 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see page 2 of the instructions (b) Cost (business use only) (c) Elected cost (a) Description of property 6 7 Listed property. Enter the amount from line 29 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2002 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2004 Add lines 9 and 10, less line 12 13 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified prop (other than listed prop) placed in service during the tax year (see pg. 3 of the instr.) 14 15 Property subject to section 168(f)(1) election (see page 4 of the instructions) 15 Other depreciation (including ACRS) (see page 4 of the instructions) 16 Part III MACRS Depreciation (Do not include listed property.) (See page 4 of the instructions.) Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2003 If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2003 Tax Year Using the General Depreciation System (b) Month and year placed in service (c) Basis for depreciation (d) Recovery (e) Convention (f) Method (g) Depreciation deduction (a) Classification of property (business/investment use only-see instructions) period 19a 3-year property 5-year property 7-year property 10-year property 15-year property 0 20-year property S/L 25-year property 25 yrs h Residential rental 27.5 yrs MM S/L мм S/L property 27 5 yrs MM Nonresidential real 39 yrs S/L MM S/L property Section C-Assets Placed in Service During 2003 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs. S/L 40-year MM S/L 40 yrs. Part IV Summary (see page 6 of the instructions) Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 21,123 Enter here and on the appropriate lines of your return Partnerships and S corporations-see instr 22

For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

Form	1 4002 (2003)													Page_z
Pa	art V Listed Property (Include property used for enterta Note: For any vehicle for which you a 24a, 24b, columns (a) through (c) of \$	inment, red	creatio	n, or a	muser or deduct	nent.) ing lease		-		s, certa	in cor	nputers	s, and	
Sect	ion A-Depreciation and Other Information						mits for p	assenger	autom	obiles)				
24a	Do you have evidence to support the business/inv	estment use cla	aimed?		Yes	No	24b	lf "Yes," ı	s the e	vidence v	vritten?		Yes	No
	(a) (b) (c) (d) ype of prop Date placed in st vehicles service use percentage			other Basis for depreciation			(f) Recovery period	/ Me	(g) thod/ vention		(h) Depreciation deduction) cted n 179 est
25	Special depreciation allowance for qualified	l listed proper	ty placed	in serv	ice durin	g the tax	(
	year and used more than 50% in a qualified	d business us	e (see pa	ige 6 of	the instr	uctions)			2	5				
26	Property used more than 50% in a qualified	e (see pa	ge 6 of	the instr	uctions)									
		/d									<u> </u>			
		/d												
<u>27</u>	Property used 50% or less in a qualified but	siness use (s	ee page	6 of the	instruction	ons)	ı	_					r	
													ľ	
		/	_	 				S/L-	•	-			{	
								S/L-						
28	Add amounts in column (h), lines 25 through	M 27 Entor h	oro and a	n line 2	1 222	1	i	3/1.		8			i	
29	Add amounts in column (i), line 26 Enter h				i, page	1				<u> </u>		29		
	And amounts in column (i), the 20 Litter in		tion B-l		tion on I	Ise of V	ehicles						1	
	plete this section for vehicles used by a sole	proprietor, pa	artner, or	other "r	nore that	n 5% ow	ner," or r			- 6 th				
30	provided vehicles to your employees, first answer the question Total business/investment miles driven during		Section C						1				(f)	
30	the year (do not include commuting miles-			-	(b) 1 Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		Vehicle 6	
	see page 2 of the instructions)			Vehicle 1 Vehicle 2			vernue 3 Vern		iicie 4	#5 4 VOINGE 5		Ve.11	Cic U	
31	Total commuting miles driven during the year						<u> </u>							
32	Total other personal (noncommuting) miles				1			Ì						
33	Total miles driven during the year.				1		1	Ì					<u> </u>	-
	Add lines 30 through 32						1							
34	Was the vehicle available for personal		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use during off-duty hours?								-					
35	Was the vehicle used primarily by a													
	more than 5% owner or related person?									ļ				
<u>36</u>	Is another vehicle available for personal us	e?			<u> </u>		<u> </u>					<u> </u>	Ļ	
	Section C-Que	estions for E	mployer	s Who I	Provide	Vehicle	s for Use	by Thei	r Empl	oyees				
	wer these questions to determine if you meet					for vehic	des used	by emplo	oyees v	vho				
are i	not more than 5% owners or related persons	(see page 8	of the ins	truction	s)								T	T
										_	_		Yes	No
37	Do you maintain a written policy statement	•	•				_	•	• •		es?	• •		
38	Do you maintain a written policy statement	•	•			•		.	ur emp	ioyees?				
39	See page 8 of the instructions for vehicles Do you treat all use of vehicles by employe	•		ærs, air	ectors, o	r 1% Or	more owi	iers						
40	Do you provide more than five vehicles to			ınform	ation froi	m vour e	mnlovee	s about						
70	the use of the vehicles, and retain the infor			1 111101111	auon noi	ii youi e	inployee.	s about					}	
41	Do you meet the requirements concerning			emonstr	ration usi	e? (See	page 9 o	f the instr	ructions	:)				
	Note: If your answer to 37, 38, 39, 40, or 4									,			ļ	
Pi	art VI Amortization													•
			4-3					4.45		(e)				
	(a) (b) Date amortiz Description of costs begins		rtization				(d) Code section		Amortization period or percentage		(f) Amortization for this year		for	
42	Amortization of costs that begins during yo			page 9 d			3).			porcent	-84			
	OFTWARE LICENSE			1			•		1					
							,000 0 3			.0	1,50			
43	• •										43			(
44	Total. Add amounts in column (f) See pag	e 9 of the inst	tructions	for whe	re to rep	ort					44		1	,500