

Form **990-EZ**

**Short Form
Return of Organization Exempt From Income Tax**

OMB No 1545 1150

2009

Department of the Treasury
Internal Revenue Service

**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 and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 4/01 , **2009, and ending** 3/31 , **2010**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific instructions.	C LITERACY NETWORK OF GREATER CINCINNATI 635 WEST SEVENTH STREET SUITE 103 CINCINNATI, OH 45203-1513	D Employer identification number 31-6332564
			E Telephone number 513-621-7323
			F Group Exemption Number

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method. Cash Accrual
Other (specify) ▶

I Website: ▶ WWW.LNGC.ORG

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

J Tax-exempt status (check only one) — 501(c) (3) (insert no) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 260,622.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

		1	2	3	4	5a	5b	5c	6a	6b	6c	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21																					
REVENUE	1	Contributions, gifts, grants, and similar amounts received														256,709.																																	
	2	Program service revenue including government fees and contracts															2,310.																																
	3	Membership dues and assessments																																															
	4	Investment income																																															
	5a	Gross amount from sale of assets other than inventory																																															
	5b	Less cost or other basis and sales expenses																																															
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)																																															
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>																																															
	6a	Gross revenue (not including \$ _____ of contributions reported on line 1)																																															
	6b	Less direct expenses other than fundraising expenses																																															
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)																																																
7a	Gross sales of inventory, less returns and allowances																																																
7b	Less cost of goods sold																																																
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)																																																
8	Other revenue (describe ▶ _____)																																																
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8																																																
EXPENSES	10	Grants and similar amounts paid (attach schedule)																																															
	11	Benefits paid to or for members																																															
	12	Salaries, other compensation, and employee benefits																																															
	13	Professional fees and other payments to independent contractors																																															
	14	Occupancy, rent, utilities, and maintenance																																															
	15	Printing, publications, postage, and shipping																																															
	16	Other expenses (describe ▶ SEE STATEMENT 1)																																															
17	Total expenses. Add lines 10 through 16																																																
18	Excess or (deficit) for the year (Subtract line 17 from line 9)																																																
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)																																																
20	Other changes in net assets or fund balances (attach explanation)																																																
21	Net assets or fund balances at end of year. Combine lines 18 through 20																																																

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	123,339.	105,061.
23	Land and buildings		
24	Other assets (describe ▶ _____)		
25	Total assets	123,339.	105,061.
26	Total liabilities (describe ▶ _____)	0.	0.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	123,339.	105,061.

BAA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

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Part V Other Information (Note the statement requirements in the instrs for Part V.)

SEE STATEMENT 3

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
35 a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
35 b	If 'Yes,' has it filed a tax return on Form 990-T for this year?		
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		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37 a 0.		
37 b	Did the organization file Form 1120-POL for this year?		X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		X
38 b	If 'Yes,' complete Schedule L, Part II and enter the total amount involved		N/A
39	Section 501(c)(7) organizations Enter		
39 a	Initiation fees and capital contributions included on line 9		N/A
39 b	Gross receipts, included on line 9, for public use of club facilities		N/A
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0., section 4912 ▶ 0., section 4955 ▶ 0.		
40 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 is it 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		X
40 c	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 ▶ 0.		
40 d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ▶ 0.		
40 e	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		X
41	List the states with which a copy of this return is filed ▶ <u>NONE</u>		

42 a The organization's books are in care of ▶ HEIDI SMITH Telephone no ▶ 513-621-7323
 Located at ▶ 635 WEST SEVENTH STREET SUITE 103 CINCINNATI OH ZIP + 4 ▶ 45203-1513

		Yes	No
42 b	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)? If 'Yes,' enter the name of the foreign country ▶ _____		X
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.			
42 c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If 'Yes,' enter the name of the foreign country ▶ _____		X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** – Check here ▶ N/A
 and enter the amount of tax-exempt interest received or accrued during the tax year ▶ **43** N/A

		Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 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		X
47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II		X
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
49a Did the organization make any transfers to an exempt non-charitable related organization?		X
49b If 'Yes,' was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

Under 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.

Sign Here
 Signature of officer: Stephanie M. Graves Date: 8/9/10
 Type or print name and title: STEPHANIE M. GRAVES, PRESIDENT / EX. DIRECTOR

Paid Preparer's Use Only
 Preparer's signature: Elizabeth A. Mathews Date: 8/4/10 Check if self employed: Preparer's Identifying Number (See instructions): N/A
 Firm's name (or yours if self employed), address, and ZIP + 4: WIRTH LOWE WISSEMEIER CPAS, INC
10700 MONTGOMERY RD STE 226
CINCINNATI, OH 45242-3260 EIN: N/A Phone no: (513) 247-3900

May the IRS discuss this return with the preparer shown above? See instructions ▶ Yes No

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	239,183.	328,352.	326,173.	333,506.	300,003.	1,527,217.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3 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 public without charge						0.
4 Total. Add lines 1-through 3	239,183.	328,352.	326,173.	333,506.	300,003.	1,527,217.
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)						170,896.
6 Public support. Subtract line 5 from line 4						1,356,321.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	239,183.	328,352.	326,173.	333,506.	300,003.	1,527,217.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,978.	4,311.	4,169.	4,656.	3,216.	19,330.
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						1,546,547.

12 Gross receipts from related activities, etc (see instructions) 12 0.

13 **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

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 87.7%

15 Public support percentage from 2008 Schedule A, Part II, line 14 15 87.4%

16a **33-1/3 support test – 2009.** If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶

b **33-1/3 support test – 2008.** If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶

17a **10%-facts-and-circumstances test – 2009** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶

b **10%-facts-and-circumstances test – 2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶

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.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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						
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 furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 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

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (add lns 9, 10c, 11, and 12)						

14 **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 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a **33-1/3 support tests – 2009.** 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 – 2008.** If the organization did not check a box on line 14 or 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 ▶

CLIENT 4

LITERACY NETWORK OF GREATER CINCINNATI

31-6332564

7/27/10

04 28PM

STATEMENT 1
FORM 990-EZ, PART I, LINE 16
OTHER EXPENSES

ADULT DYSLEXIA EXPENSES	\$	134.
BANK CHARGES		11.
CBRP EXPENSES		1,483.
CINCINNATI READS EXPENSES		4,269.
CONFERENCES, CONVENTIONS, AND MEETINGS		-207.
DIR & OFFIC LIABILITY INSURANC		2,143.
DUES AND SUBSCRIPTIONS		605.
EQUIPMENT RENTAL		7,062.
MEDICAL & DISABILITY INSURANCE		7,642.
MISCELLANEOUS		18.
OFFICE SPACE MAINTENANCE		2,400.
OFFICE SUPPLIES		508.
PAYROLL PROCESSING FEES		1,270.
PROFESSIONAL SERVICES		1,120.
SPELLING BEE		8,878.
TELEPHONE		5,132.
TUTOR TRAINING EXPENSES		223.
WORKERS COMPENSATION INSURANCE		986.
TOTAL	\$	<u>43,677.</u>

STATEMENT 2
FORM 990-EZ, PART III
ORGANIZATION'S PRIMARY EXEMPT PURPOSE

LITERACY NETWORK OF GREATER CINCINNATI IS A COORDINATING BODY OF PUBLIC, PRIVATE AND VOLUNTARY AGENCIES, ASSOCIATES AND INDIVIDUALS DEDICATED TO PROVIDING SERVICES FOR THOSE WHO CANNOT READ OR WRITE.

STATEMENT 3
FORM 990-EZ, PART V
REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT? NO

(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? NO

**Literacy Network of Greater Cincinnati
Board Roster
March 31, 2010**

Mr. Peter Bauer
1615 Peaslee Avenue
Cincinnati, OH 45244

Ms. Ruth E. Bosley
Great American Insurance Group
5277 Adena Trail
Cincinnati, OH 45230

Ms. Kerry A. Broderick
Northlich
720 E. Pete Rose Way
Cincinnati, OH 45202

Mr. Tom Callinan
Cincinnati Enquirer/Cincinnati.com
312 Elm Street
Cincinnati, OH 45202

Mr. Harry Cappel
Graydon Head & Ritchey LLP
1900 Fifth Third Center
Cincinnati, OH 45202

Sr. Julia Deiters
5776 Delhi Road
Cincinnati, OH 45233

Mr. Kenneth Feldmann (1st Chair)
Axon, LLC Pulsar Technologies, Inc.
4555 Lake Forest Drive, Suite 650
Cincinnati, OH 45242

Ms. Leah Silverman Gales (2nd Secretary)
4348 Haight Avenue
Cincinnati, OH 45223

Mr. Joseph S. Gillis (2nd Chair)
Fifth Third Bank
5001 Kingsley Drive, 1MOB2K
Cincinnati, OH 45227

Mr. Matthew L. Gutzwiller (Treasurer)
Clark, Schaefer, Hackett & Co.
105 E. Fourth Street, Suite 1500
Cincinnati, OH 45202

Mr. Al Harmann
17 Hill & Hollow Lane
Cincinnati, OH 45208

Ms. Michelle Hibbard
Bridge Worldwide
302 W. 3rd Street, Suite 900
Cincinnati, OH 45202

Mr. Tim King
The E.W. Scripps Company
312 Walnut Street, Ste. 2800
Cincinnati, OH 45202

Ms. Therese McDonough
Ohio National Financial Services, Inc.
One Financial Way
Cincinnati, OH 45242

Mr. Jim O'Connor
Duke Energy
139 E. 4th Street, Mezz 02
Cincinnati, OH 45202

Ms. Rachelle E. Oltean
xpedx/International Paper
6287 Tri-Ridge Blvd
Loveland, OH 45140

Ms. Rita Perkins
Towers Perrin
255 E. 5th Street, Ste. 2120
Cincinnati, OH 45202

Mr. Matthew Riggs
Deloitte & Touche LLP
250 East Fifth Street, Suite 1900
Cincinnati, OH 45202

Mr. Roy E. Rogers
JPMorgan Chase Bank, N.A.
303 Broadway Suite 900
Cincinnati, OH 45202

Ms. Kathleen Scahill
The Public Library
800 Vine Street
Cincinnati, OH 45202

Ms. Melissa Schwartz
7434 E. Aracoma Dr.
Cincinnati, OH 45237

Mr. John G. Slauson
119 E. Court Street
Cincinnati, OH 45202

Ms. Diane Smiley
Duke Energy
139 E. 4th Street, Mezz 50
Cincinnati, OH 45202

Ms. Bonnie Hood Smith
Urban Appalachian Council
3636 Warsaw Avenue
Cincinnati, OH 45205

Ms. Nancy M. Strassel (1st Secretary)
3000 Observatory Ave.
Cincinnati, OH 45208

Mr. Will Woodward
Mercy Hospital Anderson
7500 State Road
Cincinnati, OH 45255

Mr. Dave Woughter
UPS, Kentucky District
500 Gest Street
Cincinnati, OH 45203

Board Officers serve 3-year terms. The terms ended in September. I am indicating 1st for those who served the first 6 months of the year and 2nd for those who served the last 6 months of the year.