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Form **990-EZ****Short Form**
Return of Organization Exempt From Income TaxUnder 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 \$1,000,000 and total assets less than \$2,500,000 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.

OMB No 1545-1150

2008**Open to Public Inspection**Department of the Treasury
Internal Revenue Service**A** For the 2008 calendar year, or tax year beginning 7/01/08, and ending 6/30/09**B** Check if applicable

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions

C Name of organization**FLORIDA LITERACY COALITION, INC.**

Number and street (or P.O. box, if mail is not delivered to street address)

934 N. MAGNOLIA AVENUE SUITE 104

City or town, state or country, and ZIP + 4

ORLANDO**FL 32803****D** Employer identification number**59-2588924****E** Telephone number**407-246-7110****F** Group Exemption Number**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.FLORIDALITERACY.ORG****J** Organization type (check only one) ☒ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527**H** Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)**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 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 \$1,000,000 or more, file Form 990 instead of Form 990-EZ. **\$ 560,236****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	461,961
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	4,600
	4	Investment income	4	3,927
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach sch)	5c	
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
	a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	81,902
	b	Less direct expenses other than fundraising expenses	6b	35,559
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	46,343	
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe ► SEE STATEMENT 2)	8	7,846	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	524,677	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	50,000
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	200,773
	13	Professional fees and other payments to independent contractors	13	43,962
	14	For quarterly 7(a)(1) utilities, and maintenance	14	17,340
	15	Printing, publications, postage, and shipping	15	50,104
	16	Other expenses (describe ► SEE STATEMENT 4)	16	82,419
	17	Total expenses. Add lines 10 through 16	17	444,598
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	80,079
	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)	19	322,251
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	402,330

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 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	205,249	304,482
23 Land and buildings	2,887	3,285
24 Other assets (describe ► SEE STATEMENT 5)	179,912	130,591
25 Total assets	388,048	438,358
26 Total liabilities (describe ► SEE STATEMENT 6)	65,797	36,028
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	322,251	402,330

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Form 990-EZ (2008)

9

SCANNED FEB 25 2010

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

	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 but not reported to the IRS? 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 your reason for not reporting the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		X
37a Enter amount of political expenditures, direct or indirect, as described in the instr ▶ 37a		
b Did the organization file Form 1120-POL for this year?		X
38a 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 unpaid at the start of the period covered by this return?		X
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39 Section 501(c)(7) organizations Enter 39a		
a Initiation fees and capital contributions included on line 9 39b		
b Gross receipts, included on line 9, for public use of club facilities		
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 (4) organizations 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," complete Schedule L, Part I		X
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____		
d Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
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 FL		
42a The books are in care of ▶ PAMELA LOGSDON Telephone no ▶ 407-246-7110 934 N. MAGNOLIA AVENUE Located at ▶ ORLANDO, FL ZIP + 4 ▶ 32803		
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 ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X
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 ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
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 only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51

- 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
- 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a Did the organization make any transfers to an exempt non-charitable related organization?
- b If "Yes," was the related organization(s) a section 527 organization?
- 50 Complete this table for the 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"

	Yes	No
46		X
47		X
48		X
49a		X
49b		

(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 & deferred compensation	(e) Expense account and other allowances
NONE				

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

- 51 Complete this table for the 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		

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

Sign Here

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.

Signature of officer: *Gregory Smith* Date: *1/26/10*

Type or print name and title: _____

Paid Preparer's Use Only

Preparer's signature: *Ed Moore* Date: *1/06/10* Check if self-employed: ☐

Firm's name (or yours if self-employed): **BERMAN HOPKINS WRIGHT & LAHAM, LLP** Preparer's Identifying Number (See instr.): **P00531414**

address, and ZIP + 4: **480 NORTH ORLANDO AVE STE 218 WINTER PARK, FL 32789** EIN: **59-1152714**

Phone: **407-644-5811**

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) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	305,631	307,196	291,799	377,451	466,561	1,748,638
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 furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1-3	305,631	307,196	291,799	377,451	466,561	1,748,638
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)						
6 Public support. Subtract line 5 from line 4						1,748,638

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	305,631	307,196	291,799	377,451	466,561	1,748,638
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	47	2,839	5,246	9,391	3,927	21,450
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		14,250	15,000	15,000	7,846	52,096
11 Total support. Add lines 7 through 10						1,822,184
12 Gross receipts from related activities, etc. (see instructions)					12	199,801
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	95.9639 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	97.0130 %
16a 33 1/3 % support test—2008. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3 % support test—2007. 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 <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2008. 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 <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2007. 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 <input type="checkbox"/>		
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 <input type="checkbox"/>		

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 year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
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 1-5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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 lines 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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a **33 1/3 % support tests—2008.** 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—2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐

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

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10, Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information (see instructions)

PART II, LINE 10 - OTHER INCOME DETAIL

PROGRAM SERVICES REVENUE	\$	44,250
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EDUCATION MATERIALS	\$	7,846
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Statement 7 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose**Description**

ESTABLISHED IN 1985, THE FLORIDA LITERACY COALITION PROMOTES, SUPPORTS AND ADVOCATES FOR THE EFFECTIVE DELIVERY OF QUALITY ADULT AND FAMILY LITERACY SERVICES IN FLORIDA.

AS A STATEWIDE UMBRELLA LITERACY ORGANIZATION AND THE HOST OF FLORIDA'S ADULT AND FAMILY LITERACY RESOURCE CENTER, FLC PROVIDES A RANGE OF SERVICES TO SUPPORT MORE THAN 300 ADULT EDUCATION, LITERACY AND FAMILY LITERACY PROVIDERS THROUGHOUT FLORIDA. SPECIAL EMPHASIS IS PLACED ON ASSISTING COMMUNITY BASED LITERACY ORGANIZATIONS WITH THEIR TRAINING AND PROGRAM DEVELOPMENT NEEDS.

Statement 8 - Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments**Description**

THROUGH THE SUPPORT OF THE FLORIDA DEPARTMENT OF EDUCATION AND OTHER CORPORATE, GOVERNMENT, FOUNDATION AND INDIVIDUAL SUPPORTERS, THE FLORIDA LITERACY COALITION (FLC) OFFERED A RANGE OF SERVICES WHICH INCLUDED:

TRAINING AND TECHNICAL ASSISTANCE:

FLC OFFERS PROFESSIONAL DEVELOPMENT OPPORTUNITIES WHICH PROVIDE LITERACY PRACTITIONERS AND VOLUNTEERS WITH TOOLS AND RESOURCES TO ENHANCE PROGRAM QUALITY.

NUMBER OF WORKSHOPS/TRAINING IN FY08-09: 87

NUMBER SERVED: 1864

FLORIDA LITERACY CONFERENCE:

THIS YEAR MARKED THE TWENTY-FIFTH ANNIVERSARY OF THIS THREE DAY ANNUAL CONFERENCE WHICH OFFERS A WIDE RANGE OF TRAINING AND NETWORKING OPPORTUNITIES TO LITERACY PRACTITIONERS AND VOLUNTEERS.

2009 CONFERENCE:

MAY 6-8, BELLEVIEW BILTMORE HOTEL, CLEARWATER

PRE-CONFERENCE SESSIONS: 5, GENERAL SESSIONS:3, CONCURRENT SESSIONS: 76

PROMOTING STUDENT INVOLVEMENT AND LEADERSHIP:

FLC WORKS TO EDUCATE AND SUPPORT ADULT LEARNERS INTERESTED IN CONTRIBUTING BACK TO THEIR PROGRAMS AND COMMUNITIES.

INITIATIVES INCLUDE: LITERACY AMBASSADOR TRAINING PROGRAM, ADULT LEARNER DAY AT THE FLORIDA LITERACY CONFERENCE, STATEWIDE STUDENT ESSAY BOOK

PROMOTING LITERACY AND STATEWIDE TOLL FREE LITERACY HOTLINE:

FLC PROMOTES READING AND RAISES AWARENESS ABOUT LITERACY ISSUES IN FLORIDA. A TRAINED REFERRAL SPECIALIST PROVIDES ON CALL INFORMATION ABOUT EDUCATION PROGRAMS AND VOLUNTEER OPPORTUNITIES THROUGHOUT THE STATE.

HOTLINE PHONE REFERRALS FY08-09 1,653

ON-LINE HOTLINE (NUMBER OF TIMES THE WEB-BASED SERVICE WAS

Statement 8 - Form 990-EZ, Part III, Line 28 - Statement of Program Service
Accomplishments (continued)

Description

USED) 25,951

RESOURCE SHARING, NETWORKING AND COMMUNICATIONS:

STATE LITERACY RESOURCE CENTER WEBSITE: PROVIDES A PORTAL
TO ADULT EDUCATION AND LITERACY NEWS, DATA AND RESOURCES.
NUMBER OF VISITS TO WEBSITE FY08-09: 193,819

OTHER COMMUNICATIONS, INFORMATION AND NETWORKING SERVICES
INCLUDED:

- VOLUNTEER CORPS OF TRAINER COACHES
- THE LITERACY NEWS NEWSLETTER AND E-LITERACY NEWS
- E-MAIL DISCUSSION LISTS
- CLEARINGHOUSE OF OVER 100 FREE HARDCOPY RESOURCES
- TUTOR RESOURCE CENTER
- CBO PROFESSIONAL DEVELOPMENT NEEDS ASSESSMENT
- CUSTOMIZABLE VOLUNTEER AND STUDENT RECRUITMENT POSTERS
- NEW PROGRAM MANAGER'S RESOURCE KIT
- FLORIDA LITERACY DATA AND STATISTICS REFERENCE GUIDE
- GUIDE TO PROMISING PRACTICES IN ADULT LITERACY EDUCATION
- GUIDE TO GETTING STARTED IN ADULT LITERACY

FLORIDA HEALTH LITERACY INITIATIVE:

THROUGH THE SUPPORT OF BLUE CROSS AND BLUE SHIELD OF
FLORIDA, A STATEWIDE INITIATIVE WAS LAUNCHED TO PROVIDE
MINI-GRANTS, RESOURCES AND PROFESSIONAL DEVELOPMENT TO
ADULT AND FAMILY LITERACY PRACTITIONERS. THE FOCUS OF THE
PROGRAM IS TO ASSIST ESOL STUDENTS TO BETTER UNDERSTAND
THE MEDICAL SYSTEM AND HOW TO MAKE WISE HEALTH DECISIONS.

STAYING HEALTHY: AN ENGLISH LEARNER'S GUIDE TO HEALTH CARE
AND HEALTHY LIVING

DEVELOPED CURRICULUM TO TEACH ENGLISH WHILE COMMUNICATING
IMPORTANT INFORMATION ON HEALTH AND NUTRITION. FUNDED
THROUGH THE FLORIDA DEPARTMENT OF EDUCATION *

AMERICORPS VISTA LITERACY INITIATIVE:

FLC, IN PARTNERSHIP WITH THE CORPORATION FOR NATIONAL AND
COMMUNITY SERVICE, IS PLEASED TO SPONSOR A STATEWIDE
PROGRAM TO MAKE AVAILABLE NATIONAL SERVICE CORPS MEMBERS
TO COMMUNITY BASED LITERARY PROGRAMS. THESE INDIVIDUALS
HELP WITH PROGRAM DEVELOPMENT AND CAPACITY BUILDING IN
AREAS SUCH AS VOLUNTEER AND STUDENT RECRUITMENT, FUND
DEVELOPMENT AND FINANCIAL LITERACY.

NUMBER OF VISTA MEMBERS WHO SERVED IN FY08-09: 31

NUMBER OF PROGRAM PARTNERS: 16

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		FL LITERACY CON (event type)	(event type)	NONE (total number)	(Add col (a) through col (c))
Revenue	1 Gross receipts	81,902			81,902
	2 Less Charitable contributions				
	3 Gross revenue (line 1 minus line 2)	81,902			81,902
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Other direct expenses	35,559			35,559
	8 Direct expense summary Add lines 4 through 7 in column (d)				35,559
	9 Net income summary Combine lines 3 and 8 in column (d)				46,343

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No %	<input type="checkbox"/> Yes <input type="checkbox"/> No %	<input type="checkbox"/> Yes <input type="checkbox"/> No %	
	7 Direct expense summary Add lines 2 through 5 in column (d)				
	8 Net gaming income summary Combine lines 1 and 7 in column (d)				

9 Enter the state(s) in which the organization operates gaming activities

a Is the organization licensed to operate gaming activities in each of these states?

b If "No," Explain

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," Explain

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

	Yes	No
9a		
10a		
11		
12		

		Yes	No
13	Indicate the percentage of gaming activity operated in		
a	The organization's facility	13a	%
b	An outside facility	13b	%
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records		
	Name ►		
	Address ►		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$		
c	If "Yes," enter name and address		
	Name ►		
	Address ►		
16	Gaming manager information		
	Name ►		
	Gaming manager compensation ► \$		
	Description of services provided ►		
	<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor		
17	Mandatory distributions		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$		

Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

<u>Description</u>	<u>Amount</u>
MEMBERSHIP FEES	\$ 4,600
TOTAL	\$ 4,600

Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

<u>Description</u>	<u>Amount</u>
EDUCATIONAL MATERIALS	\$ 7,846
TOTAL	\$ 7,846

Federal Statements

Statement 3 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid

Description of Property	Name and Address	Cash Contribution	Noncash Contribution	Relationship to Organization	Class of Activity		Date of Gift	Purpose
					Book Value	Book Value Explanation		
ADULT LITERACY LEAGUE			NONE				5/06/09	ENGLISH EDUCATION
345 W. MICHIGAN ST, SUITE 100		5,000						
ORLANDO, FL 32806								
VOLUNTEERS OF AMERICA			NONE				5/06/09	ENGLISH EDUCATION
1619 TRUESDELL COURT, APT 6		5,000						
KEY WEST, FL 33040								
LITERACY VOLUNTEERS OF LEE COUNTY			NONE				5/06/09	ENGLISH EDUCATION
1609 SE 26TH STREET		5,000						
CAPE CORAL, FL 33904								
UNITED METHODIST COOPERATIVE MINIST			NONE				5/06/09	ENGLISH EDUCATION
1625 UNION ST		5,000						
CLEARWATER, FL 33755								
HAITIAN-AMERICAN ORGANIZATION			NONE				5/06/09	ENGLISH EDUCATION
1005 NORTH KROME AVENUE		5,000						
HOMESTEAD, FL 33030								

Federal Statements

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Statement 3 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid (continued)

Description of Property	Name and Address	Cash Contribution	Relationship to Organization		Book Value	Book Value Explanation	FMV Explanation	Date of Gift	Purpose
			Noncash Contribution						
MANATEE TECHNICAL INSTITUTE 5603 34TH STREET WEST BRADENTON, FL 34210		5,000	NONE					5/06/09	ENGLISH EDUCATION
LITERACY COALITION OF PALM BEACH 551 SE 8TH STREET, SUITE 505 DELRAY BEACH, FL 33483		5,000	NONE					5/06/09	ENGLISH EDUCATION
FLORIDA COMMUNITY COLLEGE 501 W STATE STREET JACKSONVILLE, FL 32202		5,000	NONE					5/06/09	ENGLISH EDUCATION
SOUTH FL COMMUNITY COLLEGE 600 WEST COLLEGE DRIVE AVON PARK, FL 33825		5,000	NONE					5/06/09	ENGLISH EDUCATION
TECO/ALCO 501 SIMPSON ROAD KISSIMMEE, FL 34744		5,000	NONE					5/06/09	ENGLISH EDUCATION

12287 Florida Literacy Coalition, Inc.
59-2588924
FYE: 6/30/2009

Federal Statements

Statement 3 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid (continued)

Description of Property	Name and Address	Cash Contribution	Noncash Contribution	Relationship to Organization	Class of Activity		Date of Gift	Purpose
					Book Value	Book Value Explanation		
TOTAL		50,000						

Federal Statements

FYE: 6/30/2009

Statement 4 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
EXPENSES	\$
TRAVEL	45,117
TELEPHONE	7,803
COMPUTER & EQUIPMENT	3,096
TRAINING /PROJECT SUPPLIE	22,244
INSURANCE EXPENSE	1,841
DUES, SUBSCRIPTIONS, MEMB	702
LICENSES AND FEES	61
MEALS AND ENTERTAINMENT	383
BANK/MERCHANT/FINANCE CHA	104
MISC EXPENSE	1,068
TOTAL	<u>\$ 82,419</u>

Statement 5 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beginning of Year	End of Year
GRANTS RECEIVABLE	\$ 170,477	\$ 122,044
ACCOUNTS RECEIVABLE	4,880	5,735
PREPAID EXPENSES AND DEFERRED CHARGES	2,855	2,112
DEPOSITS	1,700	700
	<u>179,912</u>	<u>130,591</u>

Statement 6 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Beginning of Year	End of Year
ACCOUNTS PAYABLE AND ACCRUED EXPENSES	\$ 65,797	\$ 12,504
PAYROLL TAXES PAYABLE		3,965
SUTA PAYABLE		43
ACCRUED VACATION PAY		10,643
ACCRUED PAYROLL		8,802
ACCRUED TELEPHONE		71
	<u>65,797</u>	<u>36,028</u>