

ROBINSON, FARMER, COX ASSOCIATES

CERTIFIED PUBLIC ACCOUNTANTS

A PROFESSIONAL LIMITED LIABILITY COMPANY

Communication with Those Charged with Governance

To The Board Members of Literacy Volunteers of Charlottesville/Albemarle

We have audited the financial statements of Literacy Volunteers of Charlottesville/Albemarle for the year ended June 30, 2009, and have issued our report thereon dated February 17, 2010. Professional standards require that we provide you with the following information about our responsibilities under generally accepted auditing standards, as well as certain information related to the planned scope and timing of our audit. Professional standards also require that we communicate to you the following information related to our audit.

Significant Audit Findings

Qualitative Aspects of Accounting Practices

Management is responsible for the selection and use of appropriate accounting policies. The significant accounting policies used by Literacy Volunteers of Charlottesville/Albemarle are described in Note 1 to the financial statements. No new accounting policies were adopted and the application of existing policies was not changed during 2009. We noted no transactions entered into by Literacy Volunteers of Charlottesville/Albemarle during the year for which there is a lack of authoritative guidance or consensus. All significant transactions have been recognized in the financial statements in the proper period.

Accounting estimates are an integral part of the financial statements prepared by management and are based on management's knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the financial statements and because of the possibility that future events affecting them may differ significantly from those expected. The most sensitive estimates affecting the financial statements were Management's estimate of the useful lives of fixed assets and the functional allocation of expenses. We evaluated the key factors and assumptions used to develop the useful life of fixed assets and the functional allocation of expenses in determining that the criteria used for those items are reasonable in relation to the financial statements taken as a whole.

Difficulties Encountered in Performing the Audit

We encountered no significant difficulties in dealing with management in performing and completing our audit.

Corrected and Uncorrected Misstatements

Professional standards require us to accumulate all known and likely misstatements identified during the audit, other than those that are trivial, and communicate them to the appropriate level of management. Management has corrected all such misstatements. In addition, none of the misstatements detected as a result of audit procedures and corrected by management were material, either individually or in the aggregate, to the financial statements taken as a whole.

Disagreements with Management

For purposes of this letter, professional standards define a disagreement with management as a financial accounting, reporting, or auditing matter, whether or not resolved to our satisfaction, that could be significant to the financial statements or the auditor's report. We are pleased to report that no such disagreements arose during the course of our audit.

Management Representations

We have requested certain representations from management that are included in the management representation letter dated February 17, 2010.

Management Consultations with Other Independent Accountants

In some cases, management may decide to consult with other accountants about auditing and accounting matters, similar to obtaining a "second opinion" on certain situations. If a consultation involves application of an accounting principle to the Organization's financial statements or a determination of the type of auditor's opinion that may be expressed on those statements, our professional standards require the consulting accountant to check with us to determine that the consultant has all the relevant facts. To our knowledge, there were no such consultations with other accountants.

Other Audit Findings or Issues

We generally discuss a variety of matters, including the application of accounting principles and auditing standards, with management each year prior to retention as the Organization's auditors. However, these discussions occurred in the normal course of our professional relationship and our responses were not a condition to our retention.

This information is intended solely for the use of the board of directors and management of Literacy Volunteers of Charlottesville/Albemarle and is not intended to be and should not be used by anyone other than these specified parties.

Robinson, Farmer, Co. Associates

Charlottesville, Virginia
February 17, 2010

LITERACY VOLUNTEERS - CHARLOTTESVILLE/ALBEMARLE

FINANCIAL REPORT

YEAR ENDED JUNE 30, 2009

ROBINSON, FARMER, COX ASSOCIATES

A PROFESSIONAL LIMITED LIABILITY COMPANY CERTIFIED PUBLIC ACCOUNTANTS

CHARLOTTESVILLE □ RICHMOND □ FREDERICKSBURG □ VERONA □ CHRISTIANSBURG



LITERACY VOLUNTEERS - CHARLOTTESVILLE/ALBEMARLE

FINANCIAL REPORT

YEAR ENDED JUNE 30, 2009

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ROBINSON, FARMER, COX ASSOCIATES

CERTIFIED PUBLIC ACCOUNTANTS

A PROFESSIONAL LIMITED LIABILITY COMPANY

INDEPENDENT AUDITORS' REPORT

TO THE BOARD OF DIRECTORS
LITERACY VOLUNTEERS - CHARLOTTESVILLE/ALBEMARLE
CHARLOTTESVILLE, VIRGINIA

We have audited the accompanying statement of financial position of Literacy Volunteers - Charlottesville/Albemarle (a nonprofit organization) as of June 30, 2009, and the related statements of activities, functional expenses, and cash flows for the year then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Literacy Volunteers - Charlottesville/Albemarle as of June 30, 2009, and the changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

Robinson, Farmer, Cox Associates
Charlottesville, Virginia
February 17, 2010

- Financial Statements -

LITERACY VOLUNTEERS - CHARLOTTESVILLE/ALBEMARLE

Statement of Financial Position

June 30, 2009

Assets:

Current assets:

Cash and cash equivalents	\$	94,210
Accounts receivable		20
Prepaid rent		1,500
Rent deposit		1,400
		<u>1,400</u>
Total current assets	\$	<u>97,130</u>

Property and equipment:

Office equipment	\$	12,939
Less accumulated depreciation		<u>(6,049)</u>
Total property and equipment	\$	<u>6,890</u>

Total assets	\$	<u><u>104,020</u></u>
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Liabilities:

Accounts payable and accrued expenses	\$	<u>4,202</u>
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Net assets:

Unrestricted	\$	92,318
Temporarily restricted		<u>7,500</u>

Total net assets	\$	<u>99,818</u>
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Total liabilities and net assets	\$	<u><u>104,020</u></u>
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The accompanying notes to financial statements are an integral part of this statement.

LITERACY VOLUNTEERS - CHARLOTTESVILLE/ALBEMARLE

Statement of Activities
For the Year Ended June 30, 2009

	Unrestricted	Temporarily Restricted	Total
Revenues, gains, and other support:			
City of Charlottesville	\$ 37,853	\$ -	\$ 37,853
County of Albemarle	26,355	-	26,355
Community Based Literacy Organization grant	21,819	-	21,819
Civic grant	5,908	-	5,908
United Way grant	4,592	-	4,592
VA Literacy Foundation grant	5,000	-	5,000
General unrestricted donations	29,118	-	29,118
Local fundraising	3,987	-	3,987
Special events	44,883	-	44,883
Other grants	12,225	-	12,225
In-Kind donations	3,263	-	3,263
Interest	1,410	-	1,410
Loss on disposal of office equipment	(107)	-	(107)
Total revenues, gains, and other support	<u>\$ 196,306</u>	<u>\$ -</u>	<u>\$ 196,306</u>
Expenses:			
Program services	\$ 115,780	\$ -	\$ 115,780
Management & general	32,771	-	32,771
Fundraising	44,143	-	44,143
Total expenses	<u>\$ 192,694</u>	<u>\$ -</u>	<u>\$ 192,694</u>
Change in net assets	\$ 3,612	\$ -	\$ 3,612
Net assets, beginning of year	<u>88,706</u>	<u>7,500</u>	<u>96,206</u>
Net assets, end of year	<u>\$ 92,318</u>	<u>\$ 7,500</u>	<u>\$ 99,818</u>

The accompanying notes to financial statements are an integral part of this statement.

LITERACY VOLUNTEERS - CHARLOTTESVILLE/ALBEMARLE

Statement of Functional Expenses
For the Year Ended June 30, 2009

	Program Services	Supporting Services			Total
		Management & General	Fundraising	Total Support	
Salaries	\$ 78,779	\$ 3,981	\$ 3,981	\$ 7,962	\$ 86,741
Employee benefits	-	7,953	-	7,953	7,953
Payroll taxes	5,986	304	304	608	6,594
Advertising	-	-	35	35	35
Depreciation expense	-	3,006	-	3,006	3,006
Dues and subscriptions	314	340	-	340	654
Fundraising fees	-	-	36,713	36,713	36,713
Insurance	814	625	187	812	1,626
Miscellaneous	353	1,056	230	1,286	1,639
Postage	84	1,778	211	1,989	2,073
Printing and copying	957	3,546	463	4,009	4,966
Professional services	-	6,492	-	6,492	6,492
Rent	16,800	600	600	1,200	18,000
Repair and maintenance	1,517	-	240	240	1,757
Supplies	6,296	1,725	734	2,459	8,755
Telephone	1,320	570	-	570	1,890
Training and development	-	35	-	35	35
Travel/Meeting expense	2,560	760	445	1,205	3,765
Total	\$ 115,780	\$ 32,771	\$ 44,143	\$ 76,914	\$ 192,694

The accompanying notes to financial statements are an integral part of this statement.

LITERACY VOLUNTEERS - CHARLOTTESVILLE/ALBEMARLE

Statement of Cash Flows
For the Year Ended June 30, 2009

Cash flows from operating activities:	
Change in net assets	\$ 3,612
Adjustments to reconcile change in net assets to net cash provided by (used in) operating activities:	
Depreciation	3,006
Loss on disposal of equipment	107
(Increase) decrease:	
Accounts receivable	(20)
Increase (decrease):	
Accounts payable and accrued expenses	855
Net cash provided by (used in) operating activities	<u>\$ 7,560</u>
Cash flows from investing activities:	
Purchase of equipment	<u>\$ (7,534)</u>
Net cash provided by (used in) investing activities	<u>\$ (7,534)</u>
Net increase in cash	\$ 26
Cash and cash equivalents, beginning of the year	<u>94,184</u>
Cash and cash equivalents, end of the year	<u><u>\$ 94,210</u></u>

The accompanying notes to financial statements are an integral part of this statement.

LITERACY VOLUNTEERS - CHARLOTTESVILLE/ALBEMARLE

Notes to Financial Statements June 30, 2009

NOTE 1 - ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Background:

Literacy Volunteers - Charlottesville/Albemarle, an affiliated member of the national Section 501(c)(3) nonprofit organization, Pro Literacy America was organized to promote and foster literacy in the City of Charlottesville in Albemarle County, Virginia and in the contiguous areas. Its primary purpose is to recruit and train volunteers to tutor clients on a one to one basis. As a member organization of Pro Literacy America, Literacy Volunteers - Charlottesville/Albemarle is covered under Pro Literacy America's corporate tax-exempt filing status. During the 2004 fiscal year the Organization's parent company merged with another organization. As a result, the Organization changed its name from Literacy Volunteers of America - Charlottesville/Albemarle to Literacy Volunteers - Charlottesville/Albemarle. The change was effective January 1, 2004. In preparation for this change, the Organization incorporated in November 2003 and applied for its own 501(c)(3) status. The IRS granted 501(c)(3) status in February 2004. Literacy Volunteers - Charlottesville/Albemarle is an autonomous organization and is treated independently of Pro Literacy America.

The Organization receives its funds primarily from local, city and county governments and through private donations and fundraising.

Basis of Accounting:

The financial statements of the Organization have been prepared on the accrual basis of accounting. Under the accrual method, revenues are recognized in the period in which they are earned, while expenses are recognized in the accounting period in which the related liability is incurred.

Financial Statement Presentation:

The Organization follows Statement of Financial Accounting Standards (SFAS) No. 117, *Financial Statements for Not-for-Profit Organizations* for financial statement presentation. Under SFAS No. 117, the Organization is required to report information regarding its financial position and activities according to three classes of net assets as follows:

Unrestricted Net Assets - Net assets not subject to donor-imposed restrictions. At June 30, 2009 the Organization had unrestricted net assets of \$92,318.

Temporarily Restricted Net Assets - Net assets subject to donor-imposed stipulations that may or will be met either by actions of the Organization and/or the passage of time. At June 30, 2009 the Organization had temporarily restricted net assets of \$7,500.

Permanently Restricted Net Assets - Net assets subject to donor-imposed stipulations that they be maintained permanently by the Organization. At June 30, 2009 the Organization did not have any permanently restricted net assets.

LITERACY VOLUNTEERS - CHARLOTTESVILLE/ALBEMARLE

Notes to Financial Statements
June 30, 2009 (continued)

NOTE 2 - CASH AND CASH EQUIVALENTS:

The Organization considers all highly liquid investments with an initial maturity of three months or less at the date of acquisition to be cash and cash equivalents.

NOTE 3 - PROPERTY AND EQUIPMENT:

Equipment costing greater than the \$250 capitalization rate is recorded at cost or if donated, at the estimated fair market value at the date of the gift. Depreciation is provided over the estimated useful lives of the equipment on a straight-line basis. Depreciation expense was \$3,006 for the year ended June 30, 2009.

	Office Equipment
Cost	\$ 12,939
Accumulated depreciation	(6,049)
Net Book Value	<u>\$ 6,890</u>

NOTE 4 - LEASE COMMITMENT:

On March 5, 2007, the Organization entered into a lease agreement for facilities terminating on May 31, 2010. Rent expense was \$18,000 for the year ended June 30, 2009. The future minimum lease payments are as follows:

Fiscal Year	Annual Rent
2010	\$ 17,325
Total	<u>\$ 17,325</u>

NOTE 5 - ESTIMATES:

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

NOTE 6 - INCOME TAX STATUS:

The Organization is a not-for-profit organization exempt from income taxes under 501(c)(3) of the Internal Revenue Code. The Organization has also been classified as an entity that is not a private foundation within the meaning of Section 509(a) and qualifies for deductible contributions as provided in Section 170 (b)(1)(A)(vi).

LITERACY VOLUNTEERS - CHARLOTTESVILLE/ALBEMARLE

Notes to Financial Statements
June 30, 2009 (continued)

NOTE 7 - FUNCTIONAL ALLOCATION OF EXPENSES:

The costs of providing the various programs and other activities have been summarized on a functional basis in the statement of activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

NOTE 8 - CONCENTRATION OF CREDIT RISK:

Cash on deposit with financial institutions is insured through the Federal Deposit Insurance Corporation (FDIC) up to \$250,000. At June 30, 2009 all cash in banks was federally insured.

NOTE 9 - IN-KIND DONATIONS:

Contributions of donated noncash assets are recorded at their fair market values in the period received. Contributions of donated services that create or enhance non-financial assets or that require specialized skills, are provided by individuals possessing those skills and would typically need to be purchased if not provided by donation, are recorded at their fair values in the year received. Contributions for the fiscal year ended June 30, 2009 were \$3,263.

NOTE 10 - DONATED SERVICES:

A substantial number of volunteers have donated time for the Organization and providing its program services. However, since there is no objective basis to measure the value of donated time, it is not reflected in the accompanying financial statements.

NOTE 11 - TEMPORARILY RESTRICTED NET ASSETS:

Temporarily restricted net assets at June 30, 2009 consist of unexpended funds for the following:

Dollar General Literacy Foundation	<u>\$ 7,500</u>
Total	<u><u>\$ 7,500</u></u>

Short Form
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)

2008

Department of the Treasury
Internal Revenue Service

▶ 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.

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning Jul 1, 2008, **and ending** Jun 30, 2009

B Check if applicable:
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

C Name of organization
 Literacy Volunteers - Charlottesville/Albemarle
 Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
 418 7th Street NE
 City or town, state or country, and ZIP + 4
 Charlottesville VA 22902

D Employer identification number
35-

E Telephone number
(434) 977-3838

F Group Exemption Number ▶

G Accounting method: Cash Accrual
 Other (specify) ▶

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

I Website: ▶ www.literacyforall.org

J Organization type (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 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 ▶ \$ 193,043.

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	146,857.
	2 Program service revenue including government fees and contracts	
	3 Membership dues and assessments	
	4 Investment income	1,410.
	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 ln 5b from ln 5a) (att sch)	
	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 \$ 0. of contributions reported on line 1)	44,883.
6b Less: direct expenses other than fundraising expenses	36,713.	
6c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	8,170.	
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 ▶ Loss on Disposal of Office Equipment)	-107.	
9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	156,330.	
EXPENSES	10 Grants and similar amounts paid (attach schedule)	
	11 Benefits paid to or for members	
	12 Salaries, other compensation, and employee benefits	101,288.
	13 Professional fees and other payments to independent contractors	6,492.
	14 Occupancy, rent, utilities, and maintenance	19,757.
	15 Printing, publications, postage, and shipping	7,039.
	16 Other expenses (describe ▶ See Other Expenses Statement)	21,405.
17 Total expenses (add lines 10 through 16)	155,981.	
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	349.	
ASSETS	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)	96,206.
	20 Other changes in net assets or fund balances (attach explanation) See L-20 Stmt	3,263.
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	99,818.

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	94,184.	94,230.
23 Land and buildings	2,469.	6,890.
24 Other assets (describe ▶ See L-24 Stmt)	2,900.	2,900.
25 Total assets	99,553.	104,020.
26 Total liabilities (describe ▶ See L-26 Stmt)	3,347.	4,202.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	96,206.	99,818.

Part III Statement of Program Service Accomplishments (See the instructions.)		Expenses	
What is the organization's primary exempt purpose? See Attached Note		(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)	
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.			
28	<u>Recruit and train volunteers to provide one-on-one literacy training for adults</u>		
	(Grants \$ 0.) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	115,780.
29			
	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30			
	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31	Other program services (attach schedule)		
	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32	Total program service expenses (add lines 28a through 31a)	32	115,780.

Part IV List of Officers, Directors, Trustees, and Key Employees. (List each one even if not compensated. See the instrs.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
<u>Mike Etchemendy</u> 418 7th St. NE Charlottesville VA 22902	President 3.00	0.	0.	
<u>Jane Fruchtnicht</u> 418 7th St. NE Charlottesville VA 22902	Vice President 2.00	0.	0.	
<u>Kevin O'Connor</u> 418 7th St. NE Charlottesville VA 22902	Treasurer 5.00	0.	0.	
<u>Jennifer Meiss</u> 418 7th St. NE Charlottesville VA 22902	Secretary 2.00	0.	0.	
<u>Sandra Blair</u> 418 7th St. NE Charlottesville VA 22902	Director 2.00	0.	0.	
<u>Kate Redding Brown</u> 418 7th St. NE Charlottesville VA 22902	Director 2.00	0.	0.	
<u>Paul Coleman</u> 418 7th St. NE Charlottesville VA 22902	Director 2.00	0.	0.	
<u>Anita Dunbar</u> 418 7th St. NE Charlottesville VA 22902	Director 2.00	0.	0.	
<u>George Garrett</u> 418 7th St. NE Charlottesville VA 22902	Director 2.00	0.	0.	
<u>Nancy Grable</u> 418 7th St. NE Charlottesville VA 22902	Director 2.00	0.	0.	
<u>Renee Hoffman</u> 418 7th St. NE Charlottesville VA 22902	Director 2.00	0.	0.	
See List of Officers, Directors, Trustees, & Key Employees Stmt				

Part V Other Information (Note the statement requirement in General Instruction V.)

		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 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 instructions ▶ 37a 0.		
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	501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 39a		
b	Gross receipts, included on line 9, for public use of club facilities 39b		
40a	501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____; section 4912 ▶ _____; section 4955 ▶ _____		
b	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 ▶ _____		

42a The books are in care of **▶ Jackie Bright** Telephone no. **▶ (434) 977-3838**
 Located at **▶ 418 7th Street NE** **Charlottesville VA** ZIP + 4 **▶ 22902**

		Yes	No
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)?		X
	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 a Foreign Bank and Financial Accounts.			
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?		X
	If 'Yes,' enter the name of the foreign country: ▶ _____		

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

		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 only. All section 501(c)(3) organizations must answer questions 46-49 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	46	X
47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	47	X
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	48	X
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	X
b If 'Yes,' was the related organization(s) a section 527 organization?	49b	

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.'

(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				
Total number of other employees paid over \$100,000	0			

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 receiving over \$100,000	0	

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 Date

Signature: **DRAFT**

Type or print name and title: Jackie Bright

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: **ROBINSON, FARMER, COX ASSOCIATES**
530 WESTFIELD RD
CHARLOTTESVILLE VA 22901-1726 Preparer's Identifying Number (See instructions): _____

EIN: _____ Phone no.: **(434) 973-8314**

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization Literacy Volunteers - Charlottesville/Albemarle	Employer identification number 35-2220618
--	---

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only **one** organization.)

- 1 A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 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 exempt 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)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III — Functionally integrated
 - d Type III— Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11 g (i)	
(ii) a family member of a person described in (i) above?	11 g (ii)	
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	11 g (iii)	

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of Support
			Yes	No	Yes	No	Yes	No	
Total									

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 'unusual grants.')	113,858.	114,213.	134,688.	162,486.	146,857.	672,102.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
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						
4 Total. Add lines 1-3	113,858.	114,213.	134,688.	162,486.	146,857.	672,102.
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						672,102.

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	113,858.	114,213.	134,688.	162,486.	146,857.	672,102.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	629.	749.	828.	2,443.	1,410.	6,059.
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.)						
11 Total support. Add lines 7 through 10						678,161.
12 Gross receipts from related activities, etc. (see instructions)					12	
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	99.11 %
15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f	15	98.95 %
16a 33-1/3 support test – 2008. 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.	<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 yr 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 "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 1-5						
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 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 yr 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 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 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 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 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.

REVENUE	(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events	
	<u>WORDPLAY</u> (event type)	<u>GALA</u> (event type)	<u>OTHER</u> (total number)	(Add col. (a) through col. (c))	
1	Gross receipts	24,531.	8,143.	12,209.	44,883.
2	Less: Charitable contributions				
3	Gross revenue (line 1 minus line 2)	24,531.	8,143.	12,209.	44,883.
DIRECT EXPENSES	4	Cash prizes			
	5	Non-cash prizes			
	6	Rent/facility costs			
	7	Other direct expenses	17,539.	1,012.	18,162.
8	Direct expense summary. Add lines 4- through 7 in column (d)				36,713.
9	Net income summary. Combine lines 3 and 8 in column (d)				8,170.

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.

REVENUE	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
	(Add col. (a) through col. (c))			
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)			

	YES	NO
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? _____	9a	
b If 'No,' Explain: -----		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? _____	10a	
b If 'Yes,' Explain: -----		
11 Does the organization operate gaming activities with nonmembers? _____	11	
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? _____	12	

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 contact 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: ▶ -----

Director/officer Employee 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: ▶ \$ _____

	YES	NO
13		
14		
15a		
16		
17a		

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990, 990-EZ and 990-PF**
▶ **See separate instructions.**

OMB No. 1545-0047

2008

Name of the organization

Literacy Volunteers - Charlottesville/Albemarle

Employer identification number

35-2220618

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

General Rule –

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules –

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year.) ▶ \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name as Shown on Return Literacy Volunteers - Charlottesville/Albemarle	Employer Identification No. 35-2220618
--	---

	Beginning of Year	End of Year
Line 24 - Other Assets:		
Prepaid Expenses	1,500.	1,500.
Rent Deposit	1,400.	1,400.
Totals to Form 990-EZ, Part II, line 24	2,900.	2,900.
Line 26 - Total Liabilities:		
Accounts Payable and Accrued Expenses	3,347.	4,202.
Totals to Form 990-EZ, Part II, line 26	3,347.	4,202.

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization Literacy Volunteers - Charlottesville/Albemarle	Employer identification number 35-2220618
File by the due date for filing your return. See instructions.	Number, street, and room or suite number. If a P.O. box, see instructions. 418 7th Street NE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Charlottesville VA 22902	

Check type of return to be filed (file a separate application for each return):

- | | | |
|---|--|------------------------------------|
| <input type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input checked="" type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

● The books are in the care of ▶ Jackie Bright -----

Telephone No. ▶ (434) 977-3838 ----- FAX No. ▶ -----

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Feb 16, 20 10, to file the exempt organization return for the organization named above.
The extension is for the organization's return for:

- ▶ calendar year 20__ or
- ▶ tax year beginning Jul 1, 20 08, and ending Jun 30, 20 09.

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	0.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$	0.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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

• If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. You must file original and one copy.

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization Literacy Volunteers - Charlottesville/Albemarle	Employer identification number 35-2220618 For IRS use only
	Number, street, and room or suite number. If a P.O. box, see instructions. 418 7th Street NE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Charlottesville VA 22902	

Check type of return to be filed (File a separate application for each return):

- | | | | |
|---|--|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust) | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8870 |
| <input checked="" type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 5227 | |

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

• The books are in care of **Jackie Bright**
 Telephone No. **(434) 977-3838** FAX No. **(434) 979-7846**

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

- 4** I request an additional 3-month extension of time until May 17, 20 10.
- 5** For calendar year _____, or other tax year beginning Jul 1, 20 08, and ending Jun 30, 20 09.
- 6** If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- 7** State in detail why you need the extension . . . Additional time needed to file an complete and accurate return.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	\$ 0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$ 0.
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instrs	8c	\$ 0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Title Date

Form 990-EZ, Part I, Line 16

Other Expenses Statement

Other expenses (describe)

Advertising	35.
Dues and Subscriptions	654.
Insurance	1,626.
Miscellaneous	1,639.
Depreciation	3,006.
Supplies	8,755.
Telephone	1,890.
Training & Development	35.
Travel/Meeting Expense	3,765.
Total	21,405.

Form 990-EZ, Page 2, Part IV

List of Officers, Directors, Trustees, & Key Employees Stmt

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
Business <input type="checkbox"/> Person <input type="checkbox"/> Jean Kollar 418 7th St. NE Charlottesville VA 22902 Foreign city ... Foreign country	Title Director Hours/Week 2.00	0.	0.	
Business <input type="checkbox"/> Person <input checked="" type="checkbox"/> Jackie Lichtman 418 7th St. NE Charlottesville VA 22902 Foreign city ... Foreign country	Title Director Hours/Week 2.00	0.	0.	
Business <input type="checkbox"/> Person <input checked="" type="checkbox"/> Marta Ramsey 418 7th St. NE Charlottesville VA 22902 Foreign city ... Foreign country	Title Director Hours/Week 2.00	0.	0.	
Business <input type="checkbox"/> Person <input checked="" type="checkbox"/> Ankit Tejani 418 7th St. NE Charlottesville VA 22902 Foreign city ... Foreign country	Title Director Hours/Week 2.00	0.	0.	
Business <input type="checkbox"/> Person <input checked="" type="checkbox"/> Elisabeth Golden 418 7th St. NE Charlottesville VA 22902 Foreign city ... Foreign country	Title Former Executive Hours/Week 40.00	38,500.	0.	

Form 990-EZ, Page 2, Part IV

Continued

List of Officers, Directors, Trustees, & Key Employees Stmt

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
Business <input type="checkbox"/> Person <input checked="" type="checkbox"/> Jackie Bright 418 7th St. NE Charlottesville VA 22902 Foreign city ... _____ Foreign country _____	Title Executive Directo Hours/Week 40.00	0.	0.	

Form 990-EZ, Page 1, Part I, Line 20

Other Changes in Net Assets or Fund Balances

Description	Amount
In-Kind Donations of Office Equipment	3,263.
Total	<u>3,263.</u>

Additional Information For Tax Return

Literacy Volunteers - Charlottesville/Albemarle

35-2220618

Form 990-EZ: Exempt purpose _____

Literacy Volunteers - Charlottesville/Albemarle provides one-on-one, confidential tutoring in basic literacy and English as a second language to adults living or working in the City of Charlottesville and Albemarle County.