### Form **990**

### **Return of Organization Exempt from Income Tax**

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

2003

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

$\overline{A}$	For t	he 2003 calen	dar year,	or tax year beginning	, 2003,	, and en	ding			•	
В	Check	ıf applıcable						D En	ployer ide	ntification Number	
		idress change	Please use IRS label	LITERACY AND EDUCA	TION AWARENESS	PROJE	CT	8	8-049	7256	
	$\vdash$	ime change	or print or type.	6600 BERMUDA AVE A					lephone ni		
	$\vdash$	itial return	See specific	LAS VEGAS, NV 8911	9			(	702)	731-6001	
	$\vdash$							counting		Accrual	
	$\vdash$	Amended return						7	pecify) >	I Accidai	
	$\vdash$	oplication pending	a Saction	on 501(c)(3) organizations and	1 4047/aV1) nanayamat	. 1	and I are not applic	able to			
	^	plication pending	charit	lable trusts must attach a con	ipleted Schedule A		(a) Is this a group			· —	X No
			(Form	n 990 or 990-EZ).	''			enter number of affiliates			
G	Web	site: ► N/A					(C) Are all affiliat			_	No
J	Orga	nization type				, [''	(If 'No,' attac			<u></u>	س ۳۰
		k only one		X 501(c) 3 ◀ (insert n	o.) 4947(a)(1) <b>or</b>	527	(d) is this a sepa			-	
K				nization's gross receipts are no		ì	organization			_	X No
	\$25,0	000. The organ	nization ne	eed not file a return with the If	RS, but if the organization	on   lata.   <b>i</b>					V NO
	Some states require a complete return.  M Check ► X if										
-								0, 990-EZ, or 990-F			
Pa				ses, and Changes in Ne		lalance					<del></del>
ra	1			ants, and similar amounts rece		dianic	SS (See Ilistic	CHOITS	$\overline{}$		
	1	Direct public			ivea.	1 a	2	774			
	1	Indirect public			• • •	1 b		113	4 1		
	i	Government			•	1 c		-	- 1		
	ď			2,774. noncash		1.	<del></del>		1 d	2	774.
	2			ue including government fees			.e 93)		2		, , , .
	3	-		assessments.	and contracts (nom r ar	· · · · · · · · · · · · · · · · · · ·	10 30)	•	3		
	4	•		temporary cash investments	•				4		
	5		•	from securities.			,		5		
	-	Gross rents.	u microsi	nom securities.		6a	• •		1		
		Less rental	exnenses	·		6b			7 1		
	1		=	oss) (subtract line 6b from line	· 6a)				. 6c		
_	7	Other investr			, 64,	• •	•	,	7		
*******	-			•	(A) Securities		(B) Other	<del></del>	1		
Ě	Ва	than inventor	nt from sai	es of assets other		8a			7 1		
ũ	Ь		_	is and sales expenses		8ь		_	7		
E	l	Gain or (loss) (a		•		8c			7 1		
	l			bine line 8c, columns (A) and	(B))				8d		
	<b>E</b> 9			ivities (attach schedule). If any		ig, chec	k here. ►				
	c a	Gross revenu			of contributions	-	,		1 1		
	3	reported on I	ine 1a) .	-	<del>-</del> .	9a		450	.  1		
	¦,∂ b	Less direct e	expenses o	other than fundraising expense	es	9 b		300			
				om special events (subtract lin			STATEME	NT 1	. 9c		150.
	_10a	Gross sales	of inventor	ry, less returns and allowances	3	10 a					
	₩ b	Less cost of	goods sol	ld		10b			] ]		
		Gross profit or (	loss) from sa	iles of inventory (attach schedule) (sub	tract line 10b from line 10a)	REC	EIVED		10 c		
	<b>3</b> 1	Other revenu	ie (from Pa	art VII, line 103)	33			C.	11		
	12			es 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c,	10c, and 11) ကို	NOV 1	<u> </u>	ğ Q	12		924.
E(	<b>∄3</b>	Program sen	vices (from	n line 44, column (B))		.0,	, 6 ZUU4	Q/	13	17,	335.
X Y	14	Management	and gene	ral (from line 44, column (C))		100	18	31	14	14,	262.
XPENSES	15	Fundraising (	(from line	44, column (D))		<b>SOL</b>	N, UT	<b>≥</b>	15		
S	16	-		(attach schedule)				J	16	<u> </u>	
<u>s</u>	17			nes 16 and 44, column (A))					17		<u>597.</u>
A	18	Excess or (de	eficit) for t	he year (subtract line 17 from	line 12)				18		<u>673.</u>
N S E T T	19			ances at beginning of year (fro					19	-84,	<u>828.</u>
	20	_		ssets or fund balances (attach			•		20		
S	21	Net assets or	r fund bala	inces at end of year (combine	lines 18, 19, and 20)				21	-113,	501.

Form 990 (2003)

Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

E	Oo' not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (att sch)					
	(cash \$					
	non-cash \$)	22				•
23	•	23	····			,
24	,	24 25	17,417.	8,709.	8,708.	
25 26	Compensation of officers, directors, etc . Other salaries and wages	26	17,417.	0,703.	0,700.	
27		27				
28	Other employee benefits	28				
	· •	29	1,856.	928.	928.	
29	Professional fundraising fees	30	1,030.	520.	920.	
30		31	1,500.		1,500.	
31	Accounting fees	32	1,300.		150.	
32	Legal fees	_	52.	E 2	150.	
33	Supplies .	33		52.	011	<del></del>
34	Telephone.	34	422.	211.	211.	
	Postage and shipping	35	51.	51.		
	Occupancy	36				
37	Equipment rental and maintenance	37			·	
38	Printing and publications .	38	1 212			
39	Travel	39	1,943.	1,943.	<u> </u>	<del></del>
40	Conferences, conventions, and meetings	40				
41	Interest	41		<del></del> -		
42	Depreciation, depletion, etc (attach schedule)	42				
	Other expenses not covered above (itemize).					
•	SEE STATEMENT 2	43a	8,206.	5,441.	2,765.	
ı	b	43 b				
•	: <b></b>	43 c			<del>-</del>	
•	d	43 d				
	• <u></u>	43e			<del></del>	
44	Total functional expenses (add lines 22 · 43) Organizations completing columns (B) · (D), carry these totals to lines 13 · 15	44	31,597.	17,335.	14,262.	0.
Join	t Costs. Check I if you are following	SOP	98-2.			
	any joint costs from a combined education					► Yes X No
	es,' enter (i) the aggregate amount of these			, (ii) the a	mount allocated to Prog	ram services
\$_	; (iii) the amount all	located	to Management and ge	eneral \$	, and (iv) th	e amount allocated
	undraising \$ .					
Par						0 0 5
Wha All o clier zati	t is the organization's primary exempt pur organizations must describe their exempt p orts served, publications issued, etc. Discus ons and 4947(a)(1) nonexempt charitable	pose? urpose s achi trusts	SEE STATEME e achievements in a clea evements that are not must also enter the amount		State the number of (c)(3) & (4) organons to others.)	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others)
	SEE STATEMENT 4					
			(Grants and	allocations \$	)	17,335.
ı	b					
		_	(Grants and	allocations \$	)	
•	·					
			(Grants and	allocations \$		
d						
		<del>-</del>				
				allocations \$		<del></del>
	Other program services			allocations \$	<u></u>	
1	Total of Program Service Expenses (sho	ould ec	jual line 44, column (B),	Program services)	<u> </u>	17,335.

#### Part IV Balance Sheets (See Instructions)

Note	: W	here required, attached schedules and amounts within lumn should be for end-of-year amounts only.	(A) Beginning of year		<b>(B)</b> End of year	
	45	Cash — non-interest-bearing		5,844.	45	1,411.
	46	Savings and temporary cash investments .			46	
	47	a Accounts receivable	47a			
		<b>b</b> Less: allowance for doubtful accounts	47b	888.	47 c	
						<del></del>
	48	a Pledges receivable	48a		]	
	1	<b>b</b> Less: allowance for doubtful accounts	48b		48c	
	49	Grants receivable			49	
A S	50	Receivables from officers, directors, trustees, and ke employees (attach schedule)	у		50	
S S E T S	51 :	a Other notes & loans receivable (attach sch) .	51 a	·		
T S		b Less: allowance for doubtful accounts	51 b		51 c	
	52	Inventories for sale or use		1,898.	52	6,105.
	53		·		53	
	54	Investments – securities (attach schedule)	► Cost FMV		54	
	55	a Investments - land, buildings, & equipment: basis	55a			<del></del>
	١	<b>b</b> Less: accumulated depreciation (attach schedule)	55 b		55 c	
	56	investments – other (attach schedule)	302		56	
		a Land, buildings, and equipment: basis	57a		30	
	l	b Less: accumulated depreciation (attach schedule) .	57b		57 c	
	58	Other assets (describe >	)		58	
$\bot$	59	Total assets (add lines 45 through 58) (must equal li	ne 74)	8,630.	59	7,516.
-	60	Accounts payable and accrued expenses		1,884.	60	
+	61	Grants payable			61	
L-AB-L-T-ES	62	Deferred revenue	. [		62	
빖	63	,,,,	schedule) .	91,000.	63	100,589.
+		Tax-exempt bond liabilities (attach schedule)	,		64a	
Ę		b Mortgages and other notes payable (attach schedule)		<del></del>	64 b	
5		Other liabilities (describe SEE STATEMENT 5	)	574.	65	20,428.
<del>ا ا</del>		Total liabilities (add lines 60 through 65)		93,458.	66	121,017.
ħ,	rgarر		d complete lines 67			
7	67	through 69 and lines 73 and 74. Unrestricted		04 000		112 501
Annum-o	67 68	Temporarily restricted	···	-84,828.	67	-113,501.
Ĕ	69	Permanently restricted	· }		68 69	
		nizations that do not follow SFAS 117, check here	and complete lines		03	
R	, gui	70 through 74.	and complete lines			
E 020	70	Capital stock, trust principal, or current funds			70	
	71	Paid-in or capital surplus, or land, building, and equil		71		
R	72	Retained earnings, endowment, accumulated income			72	
日本レイアいせん	73		·	04 000		
5	74			<del>-84,828.</del>	73	-113,501.
	/4	Total liabilities and net assets/fund balances (add lii	nes oo ang /3)	8,630.	74	7,516.

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

BAA

	990 (2003) LITERACY AND ED			PR	OJECT	·	88-0	49	7256	Page 4
Par	t IV-A Reconciliation of Reven	ue	per Audited	Pai	t IV-B	Reconcili	ation of Expens	es	per Audited	
	Financial Statements wi					Financial per Retur	Statements with	1 E	xpenses	
	per return (See matruct	I	s.,	-		per Ketur	<u> </u>	<u> </u>	T	
а	Total revenue, gains, and other support per audited financial statements.	а	N/A	а	Total e	expenses and lial statement	l losses per audited s	a		N/A
b	Amounts included on line <b>a</b> but not on line 12, Form 990.			Ь		nts included o	on line <b>a</b> but not			
(1)	Net unrealized gains on investments \$			(1		ed serv- nd use lities	\$			, , , , , , , , , , , , , , , , , , ,
(2)	Donated services and use of facilities \$			(2	Prior yea ments re line 20,	ar adjust- eported on Form 990 \$	\$			
• •	Recoveries of prior year grants \$			1	line 20,	reported on Form 990	\$			in the second
(-,				`		(Specify).				4
	\$						·			
_	Add amounts on lines (1) through (4).	_b c				ounts on lines (1)		b		
C	Line a minus line b	C		С		minus line b	·	С		
d	Amounts included on line 12, Form 990 but not on line a:		,	d	Amour Form 9	nts included o 990 but not or	n line 17, 1 line <b>a:</b>		<u> </u>	
(1)	Investment expenses not included on line 6b, Form 990 \$			(1		ent expenses aded on line n 990 \$	<b>3</b>			,
(2)	Other (specify)		•	(2	) Other	(specify).				
	s									
	Add amounts on lines (1) and (2)	d			Add ar	mounts on lin	es (1) and (2)	d		
е	Total revenue per line 12, Form 990 (line c plus line d)	е		е	990 (lii	ne c plus line	line 17, Form	e		
Part	V List of Officers, Directors,	, Tr	ustees, and Key E	mple	yees	(List each on	e even if not compe	nsa	ted; see instructi	ions.)
	(A) Name and address	(E	3) Title and average hor per week devoted to position	urs	i (if n	mpensation not paid, nter -0-)	(D) Contributions of employee benefit plans and deferre compensation	t	(E) Expens account and c allowance	other
JEF	F JONAS	P	RESIDENT	$\top$	<del></del>	0.	<del> </del>	0.		0.
	7 WINTER PALACE	]2		-						• •
	VEGAS, NV 89145	_								
	E BALLARD	→ -	RUSTEE			0.		۱.٥		0.
	9 CLEARWATER CANYON DERSON, NV 89012	۱۷۱	ONE							
BEN	TOCCI	T	RUSTEE			17,417.		0.		0.
	EAST MESA VERDE LANE VEGAS, NV 89123	2	0							
	RY PERNA	S	ECRETARY			0.		5.	<u> </u>	0.
722	1 JOHN GLENN CIRCLE VEGAS, NV 89128	8	BCIWIAKI			0.	,	۱.		υ.
		丁		$\neg \vdash$		<del></del>		┪		
		]								
		+		$\dashv$				$\dashv$		
<del>-</del>		-								
75	Did any officer, director, trustee, or ke than \$100,000 from your organization \$10,000 was provided by the related of	and	i all related organization nizations?	gate o	ompens f which r	sation of more more than		· [	Yes X	No
BAA	If 'Yes,' attach schedule - see instruc	ction	ns.							
DAA									Form <b>990</b>	(2003)

Form 990 (2003) LITERACY AND EDUCATION AWARENESS PROJECT 88-0497256						
Part VI Other Information (See instructions.)		Page 5				
76 Did the organization engage in any activity not previously reported to the IRS? If 'Yes attach a detailed description of each activity	s,'	76 X				
77 Were any changes made in the organizing or governing documents but not reported	——————————————————————————————————————	77 X				
If 'Yes,' attach a conformed copy of the changes.						
78 a Did the organization have unrelated business gross income of \$1,000 or more during	the year covered by this return?	78a X				
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		78b N/A				
79 Was there a liquidation, dissolution, termination, or substantial contraction during the	<u>,</u>					
year? If 'Yes,' attach a statement	· <u>[</u>	79 X				
80 a is the organization related (other than by association with a statewide or nationwide membership, governing bodies, trustees, officers, etc., to any other exempt or nonexe	organization) through common	30 a X				
b If 'Yes,' enter the name of the organization ► N/A						
and check whether it i	s exempt or nonexempt.					
81 a Enter direct and indirect political expenditures. See line 81 instructions	81 a 0.					
<b>b</b> Did the organization file Form 1120-POL for this year?	<u>.</u> <u>] [</u>	31b X				
82 a Did the organization receive donated services or the use of materials, equipment, or substantially less than fair rental value?	facilities at no charge or at	12a X				
<b>b</b> If 'Yes,' you may indicate the value of these items here. Do not include this amount a revenue in Part I or as an expense in Part II. (See instructions in Part III.)	as   <b>82b</b>   600.					
83a Did the organization comply with the public inspection requirements for returns and e		3a X				
<b>b</b> Did the organization comply with the disclosure requirements relating to guid pro quo		3b X				
84a Did the organization solicit any contributions or gifts that were not tax deductible?	· · · · · · · · · · · · · · · · · · ·	4a X				
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that	such contributions or aifts were					
not tax deductible?	guest contributions of girls were	46 N/A				
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by m		5a N/A				
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<u></u>	56 N/A				
If 'Yes' was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below waiver for proxy tax owed for the prior year.	unless the organization received a					
c Dues, assessments, and similar amounts from members	. 85c N/A					
d Section 162(e) lobbying and political expenditures	85d N/A					
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A					
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A	_				
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f		5g N/A				
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to dues allocable to nondeductible lobbying and political expenditures for the following tax year?		5h N/A				
86 501(c)(7) organizations Enter a Initiation fees and capital contributions included or	1 1					
line 12	86a N/A					
<ul> <li>b Gross receipts, included on line 12, for public use of club facilities .</li> <li>87 501(c)(12) organizations. Enter: a Gross income from members or shareholders</li> </ul>	86b N/A 87a N/A					
	N/A					
<b>b</b> Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them )	87b N/A					
88 At any time during the year, did the organization own a 50% or greater interest in a tor an entity disregarded as separate from the organization under Regulations section If 'Yes,' complete Part IX.	s 301.7701-2 and 301.7701-3?	8 X				
89 a 501(c)(3) organizations Enter: Amount of tax imposed on the organization during the						
<b>b</b> 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 49!						
during the year or did it become aware of an excess benefit transaction from a prior y explaining each transaction	year? If 'Yes,' attach a statement	9b X				
c Enter: Amount of tax imposed on the organization managers or disqualified persons of year under sections 4912, 4955, and 4958	during the	0.				
d Enter: Amount of tax on line 89c, above, reimbursed by the organization	<b>&gt;</b>	0.				
90 a List the states with which a copy of this return is filed NONE						
b Number of employees employed in the pay period that includes March 12, 2003 (See	· · · · · · · · · · · · · · · · · · ·	0b 1				
	hone number - (702) 851-46	9 <u>5</u>				
Located at ► 6600 BERMUDA, SUITE A, LAS VEGAS, NEVADA  92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041.	ZIP + 4 ► 89119	Ñ/A . ► 🗂				
and enter the amount of tax-exempt interest received or accrued during the tax year	- Check here  ▶ 92	N/A. ~ []				
and the same of th		14/ 21				

rait vii	Analysis of income 1 road		business income		ection 512, 513, or 514	
<b>Note:</b> Ente otherwise i	er gross amounts unless indicated.	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	(E) Related or exempt function income
<b>93</b> Pro	gram service revenue:					
a						
b		ļ				
c				<u> </u>		
d				ļ	<u> </u>	<del></del>
e						
	dicare/Medicaid payments	<del></del>		<del>                                     </del>	<del></del>	<del></del>
_	& contracts from government agencies	<b></b>		<del> </del>	<del></del>	
	mbership dues and assessments			+		
	rest on savings & temporary cash invmnts	ļ	<del> </del>	<del> </del>		
_	rental income or (loss) from real estate:			<del> </del>	<del></del>	
	ot-financed property					
	debt-financed property.			<del> </del>		
	rental income or (loss) from pers prop					
	ner investment income.					
100 Gar oth	in or (loss) from sales of assets er than inventory					
<b>101</b> Net	income or (loss) from special events			3	150.	
	ss profit or (loss) from sales of inventory .		· · · · · · · · · · · · · · · · · · ·	<u> </u>		
	ner revenue: a			<b></b>		: 
Ь				<del> </del>		
₹.—		ļi	<del></del>	<del></del>		
		<del></del>				<del> </del>
e	total (add columns (B), (D), and (E))			<del>                                     </del>	150.	
	tal (add line 104, columns (B), (D),	and (E))		<u> </u>		150.
	105 plus line 1d, Part I, should equ		t on line 12 Part I		·· —	130.
	Relationship of Activities t			empt Purpose	S (See instructions.)	
Line No.	Explain how each activity for which of the organization's exempt purp	h income is re	eported in column (E)	of Part VII contril	outed importantly to the	accomplishment
N/A						
<u> </u>						
	<del>                                     </del>					
Part IX	Information Regarding Tax	able Subsid	diaries and Disrec	arded Entitie	S (See instructions.)	··········
	(A)	(B)			(D)	(E)
Name	address, and EIN of corporation,	Percentage		activities	Total	End-of-year
par	tnership, or disregarded entity	ownership in		activities	ıncome	assets
N/A			8			
			<u></u>			
			8			···
			<u> </u>		<u></u>	
Part X	Information Regarding Tra					
	e organization, during the year, receive any fu		*	•		Yes X No
	he organization, during the year, pa			n a personal beni	efit contract?	Yes X No
Note: /	if 'Yes' to <b>(b)</b> , file Form 8870 <b>and</b> Fo	orm 4720 (see	instructions)			
	Under pepalties of perfun, I declare that I hat true, correct, an complete Declaration of pro-	ve examined this re eparer (other than	eturn, including accompanying officer) is based on all informations.	schedules and statem ation of which prepare	ents, and to the best of my knowledge.	owledge and belief, it is
					liliale	<i>y</i>
					Date	<del>'  </del>
				<del></del>	<del></del> _	

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

## Organization Exempt Under Section 501(c)(3)

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

Supplementary Information — (See separate instructions.)

2003

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the org			number		
	Y AND EDUCATION AWARENESS PR Compensation of the Five Higher		or Than Officers	88-0497256	Twistons
Part I	(See instructions. List each one. If there a	st Paid Employees Othi	er man Omcers,	Directors, and	rustees
	(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
NONE					
Total number	er of other employees paid		0		· · · · · · · · · · · · · · · · · · ·
Part II	Compensation of the Five Highes (See instructions, List each one (whether	st Paid Independent Co individuals or firms) If there	ntractors for Prof are none, enter 'None	essional Servi	ces
(a) Nam	ne and address of each independent contract	tor paid more than \$50,000	<b>(b)</b> Type (	of service	(c) Compensation
NONE					
			-		
				·	
			-		
Total number \$50,000 for	er of others receiving over professional services		0		

Sche	dule	A (Form 990 or 990-EZ) 2003 LITERACY AND EDUCATION AWARENESS PROJECT 88-04972:	00		age
Par	ţIII	Statements About Activities (See Instructions.)		Yes	No
1		ring the year, has the organization attempted to influence national, state, or local legislation, including any attempt influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid			
		ncurred in connection with the lobbying activities \$\ \sim \\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1	l	x
	•	,	<b>'</b>	<del> </del>	<del>  ^</del>
	org lobi	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other anizations checking 'Yes,' must complete Part VI-B AND attach a statement giving a detailed description of the bying activities.			
2	sub tax	ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any ostantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any able organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal neficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.)			
8	Sal	e, exchange, or leasing of property?	2a		Х
t	Len	nding of money or other extension of credit?	<u>2b</u>		х
C	Fur	rnishing of goods, services, or facilities?	2c	<del></del>	X
c	l Pay	yment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		х
		insfer of any part of its income or assets?	2e		х
38	Do	you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an planation of how you determine that recipients qualify to receive payments.)	3a		x
t	•	you have a section 403(b) annuity plan for your employees?	3b		X
4	Did on	you maintain any separate account for participating donors where donors have the right to provide advice the use or distribution of funds?	4		х
Par	t IV	Reason for Non-Private Foundation Status (See instructions.)			
5 6 7 8 9		A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).  A school Section 170(b)(1)(A)(ii). (Also complete Part V)  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital and state.  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section (Also complete the Support Schedule in Part IV-A.)  An organization that normally receives a substantial part of its support from a governmental unit or from the general Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)  A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)  An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, ar from activities related to its charitable, etc, functions. — subject to certain exceptions, and (2) no more than 33-1/3% from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquire organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A).  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(3).)  Provide the following information about the supported organizations. (See instructions.)	170(b public and gros of its s d by th	s rece	)(IV).
			<b>/5</b> \		
		(a) Name(s) of supported organization(s)	(b) Lir fron	abov	
				<del> </del>	
1.4		An organization organized and operated to test for public sofety. Seeken 500(a)(A) (See institutions)			
_14		An organization organized and operated to test for public safety. Section 509(a)(4) (See instructions)			

<u>Part IV-A</u>   Support Schedule (0						ınting.
Note: You may use the worksheet in th	e instructions for con	verting from the accr	rual to the ca	sh method of account	ıng	
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2002	<b>(b)</b> 2001	( <b>c)</b> 2000	) ( <b>d)</b> 1999	,	<b>(e)</b> Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28)	10,945.	300.				11,245.
16 Membership fees received						
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose						
amounts received from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975.						
Net income from unrelated business activities not included in line 18						
Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf			į			
21 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						
22 Other income Attach a schedule. Do not include gain or (loss) from sale of capital assets						
23 Total of lines 15 through 22	10,945.	300.				11,245.
24 Line 23 minus line 17	10,945.	300.				11,245.
25 Enter 1% of line 23	109.	3.				
26 Organizations described on lines	i 10 or 11: a Ente	er 2% of amount in co	olumn (e), lır	ie 24	► 26a	225.
b Prepare a list for your records to show the supported organization) whose total gifts fi return. Enter the total of all these excess a	or 1999 through 2002 excee	ibuted by each person (other ded the amount shown in li	er than a govern ine 26a. <b>Do not</b>	mental unit or publicly file this list with your	► 26 b	9,895.
c Total support for section 509(a)(1	) test: Enter line 24,	column (e) .			► 26c	11,245.
d Add: Amounts from column (e) fo	r lines: 18		19			
	22		26 b	9,895.	26 d	9,895.
e Public support (line 26c minus lin	•			•	► 26e	1,350.
f Public support percentage (line 2		led by line 26c (deno	minator))		► 26f	12.01 %
27 Organizations described on line a For amounts included in lines 15, name of, and total amounts receisuch amounts for each year.	16, and 17 that were ved in each year from	n, each 'disqualified p	erson.' <b>Do n</b>	ot file this list with yo	ur return.	. Enter the sum of
(2002)	(2001)	(2000)		(1999)		
<b>b</b> For any amount included in line 17 to show the name of, and amount re \$5,000. (Include in the list organization computing the difference between (the excess amounts) for each ye	eceived for each year, zations described in li i the amount received	that was more than tines 5 through 11, as	the <b>larger</b> of well as indiv	(1) the amount on lin	e 25 for this list with	he year or <b>(2)</b> <b>h vour return.</b> After
(2002)	(2001)	(2000)		(1999)		
c Add: Amounts from column (e) fo 17 d Add: Line 27a total	r lines 15		16			
17	20		21		27 c	
		d line 27b total			27d	
e Public support (line 27c total mini	· ·	bac 00	سم اج دی	f		
f Total support for section 509(a)(2	•					<u> </u>
g Public support percentage (line 2 h Investment income percentage (l	•	•			27g 27h	ક ક
28 Unusual Grants: For an organization						
list for your records to show, for e nature of the grant. Do not file th	ach vear, the name of	of the contributor, the	date and am	ount of the grant, and	a brief de	escription of the

	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/A		
			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	-	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?  If 'Yes,' please describe, if 'No,' please explain (If you need more space, attach a separate statement.)	31		
32	Does the organization maintain the following:		e de la constante de la consta	
á	a Records indicating the racial composition of the student body, faculty, and administrative staff?	32 a		
1	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32 b		
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?  d Copies of all material used by the organization or on its behalf to solicit contributions?	32 c		ļ 
	a copied of all indicator as a significant of the solution of			
	If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement )			
33	Does the organization discriminate by race in any way with respect to:			
i	a Students' rights or privileges?	33a		
1	b Admissions policies?	33 b		
(	c Employment of faculty or administrative staff?	33c		
(	d Scholarships or other financial assistance?.	33 d		
•	e Educational policies?	33e		
	f Use of facilities?	33f		
•	g Athletic programs? .	33g		
1	h Other extracurricular activities?	33 h		
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)	-		l
34 8	a Does the organization receive any financial aid or assistance from a governmental agency?	34a	_	
1	<b>b</b> Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered 'Yes' to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B 587, covering racial nondiscrimination? If 'No,' attach an explanation.	35		

	Lobbying Ex		cting Public Chariorganization that filed				_ 00-	049/	N/A	
		zation belongs to an aff					'lımıtec	l cant	rol' provisions apply.	
<u> </u>	L	imits on Lobbying	Expenditures			Affiliati			(b) To be completed for ALL electing organizations	
36	Total lobbying expenditi				36				organizations	
37	Total lobbying expenditi				37	·			<u> </u>	
38	Total lobbying expendite	•	• •	,g,	38					
39	Other exempt purpose				39				<del></del>	
40	Total exempt purpose e				40					
41	Lobbying nontaxable an			ole –				***********		
• •	If the amount on line 40		lobbying nontaxable a							
		Not over \$500,000 20% of the amount on line 40								
	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000									
	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 - 41									
	Over \$1,500,000 but not over \$	\$17,000,000 \$225,	000 plus 5% of the excess ov	rer \$1,500,000						
	Over \$17,000,000	\$1,0	. 000,000							
42	Grassroots nontaxable	amount (enter 25% of li	ne 41) .		42					
43	Subtract line 42 from lin	ne 36. Enter -0- if line 4	2 is more than line 36	• •	43					
44	Subtract line 41 from lin	ne 38 Enter -0- if line 4	1 is more than line 38		44					
	Caution: If there is an a	amount on either line 4	3 or line 44, you must f	ile Form 4720.						
	(Some organ	izations that made a se	Averaging Period oction 501(h) election do the the instructions for life	not have to con	nplete a	( <b>h)</b> all of the fi	ve colu	ımns	below	
	Lobbying Expenditures During 4 -Year Averaging Period									
	Calendar year (or fiscal year beginning in) ►	<b>(a)</b> 2003					( <b>d)</b> 000		<b>(e)</b> Total	
45	Lobbying nontaxable amount									
46	Lobbying ceiling amount (150% of line 45(e))					<del></del>	<del></del>			
47	Total lobbying expenditures									
48	Grassroots non- taxable amount									
49	Grassroots ceiling amount (150% of line 48(e))					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	Grassroots lobbying expenditures  t VI-B Lobbying Advisory	Alaika, haa Nomalaasi	ing Dublic Charle's							
rai	(For reporting of	only by organizations the	at did not complete Par	t VI-A) (See insti	ructions	;)			N/A	
Dur	ng the year, did the organ	nization attempt to influ	ence national state or	local legislation	ıncludu	ng any	Т		11/21	
atter	mpt to influence public of	oinion on a legislative m	natter or referendum, th	rough the use of	:	·g uriy	Yes	No	Amount	
á	a Volunteers								<del></del>	
t	Paid staff or manageme	ent (include compensati	on in expenses reporte	d on lines c thro	ugh <b>h.</b> )			$\neg$		
	Media advertisements	•	·		ŕ					
•	d Mailings to members, le	egislators, or the public								
•	Publications, or publish	ed or broadcast stateme	ents.							
f	Grants to other organization	ations for lobbying purp	oses							
ç	Direct contact with legis	slators, their staffs, gove	ernment officials, or a le	egislative body				$\Box$		
ŀ	n Rallies, demonstrations	, seminars, conventions	s, speeches, lectures, o	r any other mean	ıs			]		
i	Total lobbying expendition							]		
	If 'Yes' to any of the above	ve, also attach a statemer	nt giving a detailed descr	ption of the lobby	ing activ	<u>rities</u>				
						0.4.	ها الد	/F -	000 000 ET 000°	

# Schedule A (Form 990 or 990-EZ) 2003 LITERACY AND EDUCATION AWARENESS PR 88-0497256 Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did th	e reporting organization of Code (other than section	directly or in	ndirectly engage in any of the follow organizations) or in section 527, re	wing with any other organization describe lating to political organizations?	d in section	on 501	(c)
			o a noncharitable exempt organiza			Yes	No
<b>(1)</b> Ca	ash .				51 a (i)		X
(ii)O	ther assets				a (ii)		X
<b>b</b> Other	transactions:						
(i)S:	ales or exchanges of ass	ets with a n	oncharitable exempt organization		b (i)		X
			ble exempt organization .	•••	b (ii)		X
			r assets	• •	b (iii)		X
	eimbursement arrangeme			• •	b (iv)		X
	oans or loan guarantees.				b (v)		X
			ip or fundraising solicitations .		b (vi)		X
c Sharir	ng of facilities, equipment	t, mailing lis	its, other assets, or paid employee complete the following schedule. C	S	C arket valu		X
the go	ods, other assets, or ser ansaction or sharing arra	vices given ingement, s	by the reporting organization. If the	olumn (b) should always show the fair mage organization received less than fair mar goods, other assets, or services received	ket value	in	
(a) Line no.	(b) Amount involved		(c) noncharitable exempt organization				<u></u>
N/A						<b>J</b>	
IN/ A	!						
		-		<del></del>			
	<u> </u>						
					-		
					,		
	organization directly or in bed in section 501(c) of t s,' complete the following		liated with, or related to, one or me her than section 501(c)(3)) or in se	ore tax-exempt organizations ction 527?	►  Ye:	s X	No
Will Tes		scriedule.	(b)	(c)			
	(a) Name of organization		<b>(b)</b> Type of organization	(c) Description of relations	ship		
N/A							
			-				
	<u> </u>		<del></del>				
				<del> </del>	<del></del> ,_		
				<del></del>	<del></del>		
<del></del>				<del> </del>	·		
				<del> </del>			
							<del></del>

2003

#### **FEDERAL STATEMENTS**

PAGE 1

**CLIENT LEAP** 

LITERACY AND EDUCATION AWARENESS PROJECT

88-0497256

9/20/04

02:50PM

STATEMENT 1 FORM 990, PART I, LINE 9 NET INCOME (LOSS) FROM SPECIAL EVENTS

SPECIAL EVENTS		GROSS RECEIPTS	LESS CONTRI- BUTIONS	GROSS REVENUE	LESS DIRECT EXPENSES	NET INCOME (LOSS)
SEMINARS/TUTORING	TOTAL	\$ 450. \$ 450.	<u>0.</u> \$ 0.	450. \$ 450.	300. \$ 300.	150. \$ 150.

#### STATEMENT 2 FORM 990, PART II, LINE 43 OTHER EXPENSES

	(A)	(B) PROGRAM	(C) MANAGEMENT	(D)
	TOTAL	SERVICES	& GENERAL	<b>FUNDRAISING</b>
AUTOMOBILE BANK CHARGES	23. 70.		23. 70.	
BOOKS AND PACKS CREDIT CARD (PRIOR YEAR) EDUCATIONAL SEMINARS	2,049. 2,652. 3,190.	2,049. 3,190.	2,652.	
MEALS ROYALTY FEES	185. 17.	185. 17.		
TAXES AND LICENSES	TOTAL \$ 8,206.	\$ 5,441.	<u>20.</u> \$ 2,765.	\$ 0.

# STATEMENT 3 FORM 990, PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE

THE ORGANIZATION'S PRIMARY EXEMPT PURPOSE IS THE ADVANCING OF LITERACY THROUGH THE PROMOTION AND PROPER USE OF DICTIONARIES, IMPLEMENTATION OF EFFECTIVE EDUCATIONAL TECHNOLOGIES, AND ASSISTING SCHOOL TEACHERS WITH EDUCATION IN THESE METHODS.

### STATEMENT 4 FORM 990, PART III, LINE A STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION

GRANTS AND ALLOCATIONS

PROGRAM SERVICE EXPENSES

LITERACY AND EDUCATION AWARENESS PROJECT (LEAP) SPENT THE MAJORITY OF THEIR TIME PERFORMING VOLUNTEER ACTIVITIES IN SCHOOLS AND TEACHER TRAINING. LEAP GAVE PRESENTATIONS TO THE FACULTIES OF PUBLIC SCHOOLS AND WAS ALSO INVOLVED IN RUNNING AN ENGLISH CLASS THROUGH TWO OF THE APPLIED SCHOLASTICS STURDY TECHNOLOGY COURSES.

IN ADDITION TO THE PRESENTATIONS MENTIONED ABOVE, PRO BONO TEACHER TRAINING IN THESE METHODS WAS PROVIDED. AS A RESULT OF THE ABOVE EFFORTS, COURSES ON 'HOW TO USE A DICTIONARY

2003

#### **FEDERAL STATEMENTS**

PAGE 2

**CLIENT LEAP** 

LITERACY AND EDUCATION AWARENESS PROJECT

88-0497256

9/20/04

02:50PM

STATEMENT 4 (CONTINUED)
FORM 990, PART III, LINE A
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION

GRANTS AND PROGRAM
SERVICE

GRANTS AND SERVICE
ALLOCATIONS EXPENSES

AND STUDY SKILLS FOR LIFE' WERE COMPLETED AT A LOCAL HIGH SCHOOL.

THESE ACTIVITIES DISCUSSED ABOVE ARE POSITIVE STEPS IN LEAP'S OBJECTIVES IN THAT THEY ENABLE TEACHERS AND STUDENTS TO BETTER STUDY ON THEIR OWN. THE STUDY METHODS THEY LEARN INCLUDE AN INTRODUCTION TO SELF-AWARENESS AS A STUDENT, I.E., THE STUDENTS ARE TAUGHT HOW TO SELF-MONITOR THEIR OWN PROGRESS AND THE STEPS TO REMEDY ANY BARRIERS AS A STUDENT.

17,335.

0. \$ 17,335.

STATEMENT 5 FORM 990, PART IV, LINE 65 OTHER LIABILITIES

LOAN PAYABLE . . . PAYROLL TAXES PAYABLE . . .

Form 8868	(12-2000)	Page 2			
• If you a	are filing for an Additional (not automatic) 3-Month Extension, complete only	y Part II and check this box ▶ X			
Fort	complete Part II if you have already been granted an automatic 3-month exercises.	, ,			
	are filing for an Automatic 3-Month Extension, complete only Part I (on page Additional (not automatic) 3-Month Extension of Time — Mus				
Part ID	Name of Exempt Organization	Employer Identification number			
	Traine of Example organization				
Type or	T THEN SOL AND EDUCATION AND DEVICE DECIDED	le de la company			
print	LITERACY AND EDUCATION AWARENESS PROJECT	88-0497256			
File by the	Number, street, and room or suite number. If a P.O. box, see instructions.	For IRS Use Only			
extended due date for		The second second			
filing the	6600 BERMUDA AVE A				
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.				
	LAS VEGAS, NV 89119				
Check type	of return to be filed (file a separate application for each return):				
X Form 9	90 Form 990-EZ Form 990-T (Section 401(a) or 408(a) trust)	Form 1041-A Form 5227 Form 8870			
Form 9	90-BL Form 990-PF Form 990-T (trust other than above)	Form 4720 Form 6069			
Stop: Do n	ot complete Part II if you were not already granted an automatic 3-month ex	tension on a previously filed Form 8868.			
	rganization does not have an office or place of business in the United States				
	s for a Group Return, enter the organizations four digit Group Exemption Nur				
	up, check this box > . If it is part of the group, check this box >				
U	he extension is for.				
4 I requ	uest an additional 3-month extension of time until 11/15 , 20 (	)4.			
	alendar year 2003, or other tax year beginning, 20	and ending , 20 .			
	s tax year is for less than 12 months, check reason: Initial return	Final return   Change in accounting period			
	in detail why you need the extension . TAXPAYER RESPECTFULLY				
	THER INFORMATION NECESSARY TO FILE A COMPLETE AND				
nonre <b>b</b> If this paym	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tenterundable credits. See instructions	credits and estimated tax amount paid previously with			
c Balar	i 8868	r, if required, deposit with			
FID					
	Signature and Verification				
Under penaltie correct, and co	is of perjury, I declare that I have examined this form, including accompanying schedules and statement omplete, and that I am authorized to prepare this form.	s, and to the best of my knowledge and belief, it is true,			
_		$\varphi(z)$			
Signature	Ason Com Title CPH	Date > 1/5/0 4			
	Notice to Applicant – To be Complete	d by the IRS			
	have approved this application. Please attach this form to the organization's re				
We h	nave not approved this application. However, we have granted a 10-day grace date of the organization's return (including any prior extensions). This grace pations otherwise required to be made on a timely filed return. Please attach this	period from the later of the date shown below or the period is considered to be a vent extension of time for some to the organization's lettin.			
We It	have not approved this application. After considering the reasons stated in iter to file. We are not granting a 10-day grace period.	m 7, we cannot grant your request for an extension of $\frac{1}{2}$			
We do	cannot consider this application because it was filed after the due date of the	return for which an extension was requested CTOR. FIELD DIRECTOR. FIELD DIRECTOR. SUBMISSION PROCESSING, OGDEN			
<del></del>		CURMISSION PROCESSING			
Director	By	Date			
	Mailing Address — Enter the address if you want the copy of this application for fiferent than the one entered above.	or an additional 3-month extension returned to an			
	Name				
	O'BANNON WALLACE & NEUMANN, LLP				
Type or Number and street (include suite, room, or apartment number) or a P.O. box number					
print	624 S. 10TH ST.				
	City or town, province or state, and country (including postal or ZIP code)	1			
	ILAS VEGAS NV 89101	1.			