

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

Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2013 calendar year, or tax year beginning 07/01/13, and ending 06/30/14

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

C Name of organization: **LITERACY SOURCE**
A COMMUNITY LEARNING CENTER
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
720 N 35TH STREET
 City or town, state or province, country, and ZIP or foreign postal code
SEATTLE WA 98103-8803

D Employer identification number: **91-2101208**

E Telephone number: **206-782-2050**

F Name and address of principal officer:
LYNN LIVESLEY
720 N 35TH STREET
SEATTLE WA 98103-8803

G Gross receipts \$: **528,513**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **WWW.LITERACY-SOURCE.ORG**

K Form of organization: Corporation Trust Association Other

L Year of formation: **2002** **M** State of legal domicile: **WA**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO BUILD A LITERATE COMMUNITY & PROMOTE SELF-SUFFICIENCY BY PROVIDING LEARNER-CENTERED INSTRUCTION TO ADULTS IN ENGLISH LITERACY AND BASIC LIFE SKILLS.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	13
	4	Number of independent voting members of the governing body (Part VI, line 1b)	13
	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	22
	6	Total number of volunteers (estimate if necessary)	200
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0
7b	Net unrelated business taxable income from Form 990-T, line 34	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year: 482,914 Current Year: 524,052
	9	Program service revenue (Part VIII, line 2g)	0 0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,392 1,919
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	97,624 -8,253
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	581,930 517,718
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0 0
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0 0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	383,308 361,489
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0 0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 17,205	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	142,624 148,315
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	525,932 509,804
19	Revenue less expenses. Subtract line 18 from line 12	55,998 7,914	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year: 363,877 End of Year: 374,492
	21	Total liabilities (Part X, line 26)	30,069 32,770
	22	Net assets or fund balances. Subtract line 21 from line 20	333,808 341,722

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here
 Signature of officer: *Lynn Livesley* Date: **12/16/14**
LYNN LIVESLEY **EXECUTIVE DIRECTOR**
 Type or print name and title

Paid Preparer Use Only
 Print/Type preparer's name: **PAMELA A. THOMSON** Preparer's signature: *Pamela A. Thomson* Date: **12/16/14** Check if self-employed if PTIN: **P00172042**
 Firm's name: **LUBY AND THOMSON, PLLC** Firm's EIN: **91-1705418**
 Firm's address: **419 OCCIDENTAL AVE S # 600 SEATTLE, WA 98104** Phone no.: **206-628-4991**