

**Return of Organization Exempt From Income Tax**

**2012**

Department of the Treasury  
Internal Revenue Service

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

**Open to Public Inspection**

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

**A For the 2012 calendar year, or tax year beginning JUL 1, 2012 and ending JUN 30, 2013**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C Name of organization</b> <b>MORE THAN WORDS, INC.</b>		<b>D Employer identification number</b> <b>04-2784985</b>
	Doing Business As		<b>E Telephone number</b> <b>781-788-0035</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>G Gross receipts \$</b> <b>2,623,956.</b>
	<b>376 MOODY STREET</b>		<b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City, town, or post office, state, and ZIP code <b>WALTHAM, MA 02453</b>		<b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
<b>F Name and address of principal officer: JODI ROSENBAUM TILLINGER SAME AS C ABOVE</b>		<b>H(c) Group exemption number</b> ▶	
<b>I Tax-exempt status:</b> <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J Website:</b> ▶ <b>HTTP://MTWYOUTH.ORG/</b>			
<b>K Form of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L Year of formation:</b> <b>1983</b>
			<b>M State of legal domicile:</b> <b>MA</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>THE ORGANIZATION IS ORGANIZED EXCLUSIVELY FOR THE CHARITABLE AND EDUCATIONAL PURPOSES OF PROVIDING</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>9</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>9</b>
	<b>5</b> Total number of individuals employed in calendar year 2012 (Part V, line 2a)	<b>5</b>	<b>177</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>20</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0.</b>
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> 1,488,925.	<b>Current Year</b> 1,828,539.
	<b>9</b> Program service revenue (Part VIII, line 2g)	0.	0.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,855.	3,722.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	242,963.	408,787.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,733,743.	2,241,048.
	<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		850,925.	1,058,620.
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>66,499.</b>			
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		634,246.	797,297.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,485,171.	1,855,917.	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	248,572.	385,131.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> 1,133,332.	<b>End of Year</b> 1,526,262.
	<b>21</b> Total liabilities (Part X, line 26)	206,572.	215,163.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	926,760.	1,311,099.

**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.

<b>Sign Here</b>	Signature of officer		Date
	JODI ROSENBAUM TILLINGER, EXECUTIVE DIRECTOR		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date
	KENNETH J RAFFOL		
	Firm's name ▶ HEALD HOFFMEISTER & CO INC	Firm's EIN ▶ 04-2938174	Check if self-employed <input type="checkbox"/>
	Firm's address ▶ 105 CHESTNUT STREET NEEDHAM, MA 02492	Phone no. 781-449-3343	PTIN P00045686

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission: OUR MISSION IS TO EMPOWER YOUTH WHO ARE IN FOSTER CARE, COURT INVOLVED, HOMELESS OR OUT OF SCHOOL TO TAKE CHARGE OF THEIR LIVES BY TAKING CHARGE OF A BUSINESS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 1,735,227. including grants of \$ ) (Revenue \$ 411,010.) MORE THAN WORDS (MTW) EMPOWERS YOUTH WHO ARE IN FOSTER CARE, COURT-INVOLVED, HOMELESS, OR OUT OF SCHOOL, TO TAKE CHARGE OF THEIR LIVES BY TAKING CHARGE OF A BUSINESS. MTW BEGAN AS AN ONLINE BOOKSELLING TRAINING PROGRAM IN 2004, BECOMING A VIBRANT STOREFRONT AND CAFE ON WALTHAM MOODY STREET BY 2005. IN FALL, 2011, MORE THAN WORDS REACHED AN EXCITING INFLECTION POINT WITH THE OPENING OF ITS 2ND SITE, A WAREHOUSE BOOKSTORE IN BOSTON. MORE THAN WORDS SERVES AS A VEHICLE FOR YOUTH TO EQUIP THEMSELVES WITH THE SKILLS THEY NEED FOR A SUCCESSFUL TRANSITION TO ADULTHOOD. IN ADDITION TO THEIR BUSINESS JOB, YOUTH HAVE AN EQUALLY IMPORTANT JOB TO DEVELOP PERSONAL AND EDUCATIONAL GOALS AND CONCRETE PLANS FOR MEANINGFUL JOBS AND COLLEGE AFTER MTW.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 1,735,227.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	<b>1</b> X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? .....	<b>2</b> X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....	<b>3</b>	X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....	<b>4</b>	X
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....	<b>5</b>	X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....	<b>6</b>	X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....	<b>7</b>	X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....	<b>8</b>	X
<b>9</b> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....	<b>9</b>	X
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....	<b>10</b>	X
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	<b>11a</b> X	
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> .....	<b>11b</b>	X
<b>c</b> Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> .....	<b>11c</b>	X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> .....	<b>11d</b>	X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	<b>11e</b>	X
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> .....	<b>11f</b>	X
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	<b>12a</b>	X
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....	<b>12b</b>	X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....	<b>14a</b>	X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....	<b>14b</b>	X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....	<b>15</b>	X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....	<b>16</b>	X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> .....	<b>17</b>	X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....	<b>18</b>	X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....	<b>19</b>	X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....	<b>20b</b>	

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....		X
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....		X
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? .....	X	

**Note.** All Form 990 filers are required to complete Schedule O .....

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

Main form area containing questions 1a through 14b with input fields and Yes/No columns.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed MA
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: JODI ROSENBAUM - 781-788-0035 376 MOODY ST, WALTHAM, MA 02453

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JODI ROSENBAUM TILLINGER EXECUTIVE DIRECTOR	40.00	X		X				65,961.	0.	0.
(2) MALLI GERO VICE CHAIR	2.00	X		X				0.	0.	0.
(3) TONY HELIES TREASURER	2.00	X		X				0.	0.	0.
(4) DAWN MERTINEIT SECRETARY	2.00	X		X				0.	0.	0.
(5) RICHARD RUBACK DIRECTOR	2.00	X						0.	0.	0.
(6) ELIZABETH MARCH CHAIR	2.00	X		X				0.	0.	0.
(7) JIM SLOMAN DIRECTOR	2.00	X						0.	0.	0.
(8) RITA B. ALLEN DIRECTOR	2.00	X						0.	0.	0.
(9) ERIC GROVES DIRECTOR	2.00	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position (Individual trustee or director, Institutional trustee, Officer, Key employee, Highest compensated employee, Former), (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes sub-totals for 1b, 1c, and 1d.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 0

Table with 3 columns: Question number, Question text, and Yes/No response. Questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Row 1 contains 'NONE' in column A.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0



**Part VIII Statement of Revenue**

Check if Schedule O contains a response to any question in this Part VIII

		(A)	(B)	(C)	(D)	
		Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>				
	<b>b</b> Membership dues	<b>1b</b>				
	<b>c</b> Fundraising events	<b>1c</b>				
	<b>d</b> Related organizations	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b> 390,545.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b> 1,437,994.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$					
	<b>h Total.</b> Add lines 1a-1f		1,828,539.			
	<b>Program Service Revenue</b>	<b>2 a</b> _____ Business Code _____				
<b>b</b> _____						
<b>c</b> _____						
<b>d</b> _____						
<b>e</b> _____						
<b>f</b> All other program service revenue						
<b>g Total.</b> Add lines 2a-2f						
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		1,499.		1,499.	
	<b>4</b> Income from investment of tax-exempt bond proceeds					
	<b>5</b> Royalties					
	<b>6 a</b> Gross rents	(i) Real				
		(ii) Personal				
		<b>b</b> Less: rental expenses				
		<b>c</b> Rental income or (loss)				
	<b>d</b> Net rental income or (loss)					
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities	32,383.			
		(ii) Other				
		<b>b</b> Less: cost or other basis and sales expenses	30,160.			
		<b>c</b> Gain or (loss)	2,223.			
	<b>d</b> Net gain or (loss)		2,223.	2,223.		
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>a</b>				
		<b>b</b> Less: direct expenses				
<b>c</b> Net income or (loss) from fundraising events						
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>					
	<b>b</b> Less: direct expenses					
	<b>c</b> Net income or (loss) from gaming activities					
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b> 761,535.					
	<b>b</b> Less: cost of goods sold	<b>b</b> 352,748.				
	<b>c</b> Net income or (loss) from sales of inventory		408,787.	408,787.		
<b>Miscellaneous Revenue</b>		<b>Business Code</b>				
<b>11 a</b> _____						
	<b>b</b> _____					
	<b>c</b> _____					
	<b>d</b> All other revenue					
	<b>e Total.</b> Add lines 11a-11d					
<b>12 Total revenue.</b> See instructions.		2,241,048.	411,010.	0.	1,499.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	65,961.	65,961.		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	897,425.	818,171.	24,203.	55,051.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	95,234.	88,522.	1,682.	5,030.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	4,190.	4,190.		
13 Office expenses	19,187.	17,485.	1,702.	
14 Information technology	12,139.	10,925.	1,214.	
15 Royalties				
16 Occupancy	167,245.	158,883.	8,362.	
17 Travel	5,400.	1,782.	3,618.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	44,744.	42,507.	2,237.	
23 Insurance	16,639.	14,975.	1,664.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>DIRECT CLIENT WAGES/TAX</b>	380,385.	380,385.		
b <b>SUPPLIES</b>	48,704.	43,834.	4,870.	
c <b>PROFESSIONAL SERVICES</b>	46,389.	41,750.	4,639.	
d <b>VEHICLE EXPENSE</b>	21,911.	21,911.		
e All other expenses	30,364.	23,946.		6,418.
25 <b>Total functional expenses.</b> Add lines 1 through 24e	1,855,917.	1,735,227.	54,191.	66,499.
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

Check if Schedule O contains a response to any question in this Part X

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	119,249.	1	161,636.	
	<b>2</b> Savings and temporary cash investments .....	717,924.	2	744,826.	
	<b>3</b> Pledges and grants receivable, net .....		3		
	<b>4</b> Accounts receivable, net .....	73,557.	4	398,201.	
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		5		
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....		6		
	<b>7</b> Notes and loans receivable, net .....		7		
	<b>8</b> Inventories for sale or use .....	854.	8	973.	
	<b>9</b> Prepaid expenses and deferred charges .....	8,861.	9	8,994.	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 361,028.			
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 174,357.	188,349.	<b>10c</b> 186,671.	
	<b>11</b> Investments - publicly traded securities .....		11		
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		12		
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		13		
	<b>14</b> Intangible assets .....		14		
	<b>15</b> Other assets. See Part IV, line 11 .....	24,538.	15	24,961.	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	1,133,332.	16	1,526,262.		
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	176,412.	17	215,163.	
	<b>18</b> Grants payable .....		18		
	<b>19</b> Deferred revenue .....	30,160.	19	0.	
	<b>20</b> Tax-exempt bond liabilities .....		20		
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		21		
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22		
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		23		
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		24		
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....		25		
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	206,572.	26	215,163.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>				
	<b>27</b> Unrestricted net assets .....	926,760.	27	1,069,616.	
	<b>28</b> Temporarily restricted net assets .....		28	241,483.	
	<b>29</b> Permanently restricted net assets .....		29		
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>				
	<b>30</b> Capital stock or trust principal, or current funds .....		30		
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		31		
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		32		
	<b>33</b> Total net assets or fund balances .....	926,760.	33	1,311,099.	
<b>34</b> Total liabilities and net assets/fund balances .....	1,133,332.	34	1,526,262.		

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,241,048.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,855,917.
3	Revenue less expenses. Subtract line 2 from line 1	3	385,131.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	926,760.
5	Net unrealized gains (losses) on investments	5	-792.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,311,099.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form 990 (2012)

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No. 1545-0047

**2012**

Open to Public Inspection

Name of the organization  
**MORE THAN WORDS, INC.**

Employer identification number  
**04-2784985**

**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: (For lines 1 through 11, check only one box.)

- 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 a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 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).**
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to 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 - Non-functionally integrated
- 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 it 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? .....	<b>11g(i)</b>	
(ii) A family member of a person described in (i) above? .....	<b>11g(ii)</b>	
(iii) A 35% controlled entity of a person described in (i) or (ii) above? .....	<b>11g(iii)</b>	
- h Provide the following information about the supported organization(s).

(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 monetary support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

**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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....						
<b>5</b> 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) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>7</b> Amounts from line 4 .....						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					<b>12</b>	
<b>13 First five years.</b> 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 <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	%
<b>15</b> Public support percentage from 2011 Schedule A, Part II, line 14 .....	<b>15</b>	%
<b>16a 33 1/3% support test - 2012.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 33 1/3% support test - 2011.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2012.</b> 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 <b>stop here.</b> 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>b 10% -facts-and-circumstances test - 2011.</b> 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 <b>stop here.</b> 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>18 Private foundation.</b> 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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	320,651.	396,909.	966,638.	1234588.	1438793.	4357579.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....	169,419.	158,518.	220,154.	492,030.	761,535.	1801656.
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 .....						
<b>6 Total.</b> Add lines 1 through 5 .....	<b>490,070.</b>	<b>555,427.</b>	<b>1186792.</b>	<b>1726618.</b>	<b>2200328.</b>	<b>6159235.</b>
7a Amounts included on lines 1, 2, and 3 received from disqualified persons .....						0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						0.
c Add lines 7a and 7b .....						0.
<b>8 Public support</b> (Subtract line 7c from line 6.)						<b>6159235.</b>

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6 .....	490,070.	555,427.	1186792.	1726618.	2200328.	6159235.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....			117.	1,855.	1,499.	3,471.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
c Add lines 10a and 10b .....			117.	1,855.	1,499.	3,471.
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.) .....	73,800.	150,768.	95,987.	254,337.	390,545.	965,437.
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	<b>563,870.</b>	<b>706,195.</b>	<b>1282896.</b>	<b>1982810.</b>	<b>2592372.</b>	<b>7128143.</b>

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 2012 (line 8, column (f) divided by line 13, column (f)) .....	15	86.41 %
16 Public support percentage from 2011 Schedule A, Part III, line 15 .....	16	87.64 %

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)) .....	17	.05 %
18 Investment income percentage from 2011 Schedule A, Part III, line 17 .....	18	.04 %

19a **33 1/3% support tests - 2012.** 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 - 2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," to Form 990,  
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2012**

**Open to Public  
Inspection**

Name of the organization

**MORE THAN WORDS, INC.**

Employer identification number

**04-2784985**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education)       Preservation of an historically important land area

Protection of natural habitat       Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

Yes       No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

Yes       No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_



**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items

(check all that apply):

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	<b>1c</b>
d Additions during the year	<b>1d</b>
e Distributions during the year	<b>1e</b>
f Ending balance	<b>1f</b>

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment  \_\_\_\_\_ %
- b Permanent endowment  \_\_\_\_\_ %
- c Temporarily restricted endowment  \_\_\_\_\_ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	<b>3a(i)</b>	
(ii) related organizations	<b>3a(ii)</b>	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	<b>3b</b>	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		361,028.	174,357.	186,671.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				186,671.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include Financial derivatives, Closely-held equity interests, and Other (A-I).

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

Table with 3 columns: (a) Description of investment type, (b) Book value, (c) Method of valuation. Rows numbered 1 through 10.

Part IX Other Assets. See Form 990, Part X, line 15.

Table with 2 columns: (a) Description, (b) Book value. Rows numbered 1 through 10.

Part X Other Liabilities. See Form 990, Part X, line 25.

Table with 2 columns: (a) Description of liability, (b) Book value. Row 1 includes Federal income taxes and rows 2-11 are blank.

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	2,240,256.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains on investments	<b>2a</b>	-792.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	-792.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	2,241,048.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	0.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	2,241,048.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	1,855,917.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	0.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	1,855,917.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	0.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	1,855,917.

**Part XIII Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**IN-KIND DONATIONS HAVE BEEN REMOVED.**

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**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

**2012**

Open to Public  
Inspection

Name of the organization

MORE THAN WORDS, INC.

Employer identification number

04-2784985

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

EMPOWERING LEADERSHIP AND SUPPORTIVE EMPLOYMENT OPPORTUNITIES FOR YOUTH  
WHO ARE IN THE FOSTER CARE SYSTEM, COURT INVOLVED, HOMELESS, OUT OF  
SCHOOL, OR WHO HAVE MENTAL HEALTH OR SUBSTANCE ABUSE ISSUES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

BELOW OUTLINES DETAILS OF THE ACCOMPLISHMENTS AT MTW THIS PAST YEAR:

MTW IS BOTH PROUD AND EXCITED TO HAVE COMPLETED ITS FIRST FULL YEAR OF  
OPERATING 2 SITES WHILE EXPERIENCING TREMENDOUS GROWTH AND SUCCESS IN  
TERMS OF BUSINESS GOALS AND YOUTH OUTCOMES. AS PART OF RAMP-UP AT THE  
NEW SITE, WE INCREASED YOUTH SERVED IN BOSTON BY 65% IN FY13 AND WE  
HAVE SEEN YOUTH MOVE THROUGH THE MODEL SUCCESSFULLY. IN TOTAL, MTW  
SERVED 150 UNDUPLICATED YOUTH IN FY13. YOUTH GENERATED A REMARKABLE  
\$406,000 FROM RUNNING THEIR BUSINESSES, A 53% INCREASE IN EARNED  
REVENUE FROM LAST YEAR. MTW HAS ALSO INCREASED GOVERNMENT FUNDING BY  
51% WHICH IS A TESTAMENT TO OUR INCREASED RELEVANCE IN THE YOUTH  
DEVELOPMENT SECTOR AND EFFECTIVENESS AS AN INTERVENTION MODEL FOR OUR  
MOST DISCONNECTED AND SYSTEM-INVOLVED YOUTH. IN ADDITION TO THESE  
ACHIEVEMENTS, MTW HAS MADE GREAT STRIDES IN CODIFYING THE MODEL AND  
RESTRUCTURING AND STRENGTHENING THE ORGANIZATION FOR LONG-TERM  
SUSTAINABILITY. A FEW OUTCOMES AND ANECDOTAL HIGHLIGHTS WE WOULD LIKE  
TO SHARE INCLUDE (YOUTH OUTCOMES, EMPLOYMENT, EDUCATION, AND  
SELF-EFFICACY):

CORE SOCIAL ENTERPRISE PROGRAM: \*YOUTH HAVE ATTAINED LEVELS OF >80%

Name of the organization MORE THAN WORDS, INC.	Employer identification number 04-2784985
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ATTENDANCE, PUNCTUALITY, PROFESSIONALISM AND ENGAGEMENT ON SHIFTS

\*100% OF YOUTH ARE ACCOUNTABLE FOR AN EDUCATION PLAN, WITH >80%

PASSING ALL CLASSES

\*>90% OF YOUTH HAVE OBTAINED LIFE ESSENTIALS CRITICAL FOR A

SUCCESSFUL TRANSITION FROM MTW (SECURING HOUSING, OBTAINING AN ID,

SETTING UP A BANK ACCOUNT ETC.) AND OVER 80% HAVE COMPLETED

INDIVIDUALIZED MONTHLY SMART (SPECIFIC, MEASURABLE, ATTAINABLE,

REALISTIC, TIMELY) GOALS

GRADUATE PROGRAM (2 YRS. OUT)

\*76% OF YOUTH ARE PRODUCTIVE AND CURRENTLY ENGAGED IN WORK AND/OR

SCHOOL

\*81% OF GRADUATES HAVE OBTAINED THEIR GED OR DIPLOMA

\*WHILE APPROXIMATELY 48% OF YOUTH COME TO MTW WITH COURT-INVOLVEMENT,

THIS NUMBER DROPS TO 27% WHEN THEY LEAVE THE PROGRAM AND CONTINUES TO

DROP TO 10% WITHIN 24 MONTHS AFTER THE CORE PROGRAM.

BUSINESS ACCOMPLISHMENTS:

MTW HAS DEVELOPED CREATIVE BUSINESS OPPORTUNITIES AND PARTNERSHIPS TO

DRIVE EARNED REVENUE AND EXPAND SKILL-BUILDING FOR YOUTH:

⊙ MTW WAS CHOSEN TO BE MOONBOX PRODUCTION'S NON-PROFIT PARTNER

FOR THEIR PLAY OF MICE AND MEN. WE WERE ABLE TO HAVE YOUTH GO TO EACH

PERFORMANCE AND SPEAK TO THE AUDIENCE ABOUT MORE THAN WORDS AND OUR

MISSION AS WELL AS PROVIDING CATERING SERVICES FOR THE EVENT. MTW WAS

ABLE TO REPRESENT AT 14 SHOWS AND GAINED EXPOSURE TO MORE THAN 1000

PEOPLE FROM THE GREATER BOSTON AREA.

⊙ MTW HAS HOSTED SEVERAL SUCCESSFUL DOLLAR-DAY BARGAIN SALE

EVENTS AT BOTH SITES, INCREASING ITS CUSTOMER BASE AND STORE REVENUE.

Name of the organization MORE THAN WORDS, INC.	Employer identification number 04-2784985
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THESE EVENTS FEATURED A HIGH LEVEL OF YOUTH INVOLVEMENT AND OWNERSHIP, PROVIDING SEVERAL SKILL-BUILDING OPPORTUNITIES INCLUDING EVENT PLANNING AND PROMOTIONAL MARKETING.

⊙ MTW HAS HAD GREAT SUCCESS SETTING UP A BOOTH AT THE SUNDAY SOWA (SOUTH OF WASHINGTON STREET) MARKET, A COLLECTION OF VIBRANT OPEN AIR MARKETS AND FOOD TRUCKS WHICH BRINGS OVER FIVE THOUSAND VISITORS TO THE SOUTH END EVERY SUNDAY. MTW HAS ALSO BEGUN TO MAKE AND SELL UP-CYCLED BOOK PROJECTS (SUCH AS NOTECARDS AND BAGS) MADE OUT OF LEFTOVER BOOKS AT OUR WALTHAM STORE AND SOWA.

#### YOUTH/TRANSITIONS:

⊙ YOUTH HAD THE OPPORTUNITY TO ATTEND VARIOUS SITE VISITS IN ORDER TO EXPLORE OPPORTUNITIES BEYOND MTW INCLUDING A VISIT TO THE STAPLES HEADQUARTERS WHERE THEY TOOK PART IN AN INTERACTIVE TELECONFERENCE WITH THE STAFF FROM THE COLORADO STAPLES OFFICE.

⊙ FOR A SECOND YEAR IN A ROW THE BOSTON SITE HOSTED AN ALL-DAY VOLUNTEER EVENT WITH GOLDMAN SACHS. A GROUP FROM GOLDMAN SPENT THE MORNING WORKING ON OPERATIONS PROJECTS FOLLOWED BY AN AFTERNOON OF SPEED INTERVIEWING WITH YOUTH AND A WORKSHOP ON FINANCIAL LITERACY.

#### GRADUATE PROGRAM

⊙ THE GRADUATE PROGRAM CURRICULUM HAS BEEN RE-VAMPED TO PUT MORE FOCUS ON CAREER EXPLORATION AND DEFINED PATHS TO DIFFERENT EMPLOYMENT AND EDUCATION PATHS.

⊙ MTW FORMED A PARTNERSHIP WITH AFC MENTORING WHO PRESENTED A SERIES OF WORKSHOPS FOR YOUTH ON DEALING WITH THE PROCESS OF CHANGE AND TRANSITIONING.

Name of the organization MORE THAN WORDS, INC.	Employer identification number 04-2784985
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## DEVELOPMENT &amp; ORGANIZATIONAL:

⊙ MTW HAS EXCEEDED ITS FY13 DEVELOPMENT GOALS, SECURING OVER \$300,000 IN INDIVIDUAL GIVING, AN 11% INCREASE FROM FY12.

⊙ MTW PILOTED A NEW DONOR LUNCHEON EVENT THIS PAST SPRING WHICH HAS BEEN VERY SUCCESSFUL IN FURTHER ENGAGING YOUTH WITH DONORS.

⊙ MTW HAS HIRED A DIRECTOR OF ADMINISTRATION TO STREAMLINE ITS HUMAN RESOURCE AND ACCOUNTING PRACTICES AND IS ALSO WORKING WITH AN EXTERNAL CFO AND ACCOUNTING SERVICE TO BECOME MORE SOPHISTICATED IN ITS FISCAL MANAGEMENT SYSTEMS.

FORM 990, PART VI, SECTION B, LINE 11: COPIES OF THE 990 AND THE FINANCIALS WERE GIVEN TO THE DIRECTORS OF MORE THAN WORDS BEFORE BEING FILED. COPIES OF FINANCIAL INFORMATION ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART VI, SECTION B, LINE 12C: MORE THAN WORDS PROVIDES A CONFLICT OF INTEREST FORM TO ALL NEW BOARD MEMBERS AND ENSURES THESE ARE UPDATED ON AN ANNUAL BASIS.

FORM 990, PART VI, SECTION C, LINE 19: MORE THAN WORDS PROVIDES THE FINANCIAL STATEMENTS AND THE TAX RETURN TO ALL DIRECTORS BEFORE BEING FILED. THE CONFLICT OF INTEREST POLICY AND THE FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

2012 DEPRECIATION AND AMORTIZATION REPORT

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	COMPUTER	010104	SL	5.00	16	7,000.			7,000.	7,000.		0.
2	COMPUTER SOFTWARE	010104	SL	5.00	16	1,600.			1,600.	1,600.		0.
3	COMPUTER	010104	SL	5.00	16	4,098.			4,098.	4,098.		0.
4	OFFICE EQUIPMENT	010104	SL	7.00	16	1,750.			1,750.	1,750.		0.
5	COMPUTER SOFTWARE	010104	SL	7.00	16	1,889.			1,889.	1,889.		0.
6	OFFICE FURNITURE	010104	SL	7.00	16	1,392.			1,392.	1,392.		0.
7	OFFICE EQUIPMENT	010104	SL	5.00	16	1,274.			1,274.	1,274.		0.
8	DELL COMPUTERS	010105	SL	5.00	16	1,016.			1,016.	1,016.		0.
9	VIDEO CAMERA	010105	SL	5.00	16	1,157.			1,157.	1,157.		0.
10	STORE SETUP	010105	SL	7.00	16	1,851.			1,851.	1,851.		0.
11	STORE FRONT SIGN	010105	SL	7.00	16	1,988.			1,988.	1,846.		0.
12	EQUIPMENT	010106	SL	5.00	16	348.			348.	348.		0.
13	FURNITURE AND SHELVING	010106	SL	7.00	16	13,787.			13,787.	11,688.		985.
14	COMPUTER EQUIP & SUPPLIES	010106	SL	5.00	16	1,438.			1,438.	1,438.		0.
15	2 GUN SCANNER & CREDIT CARD SWIPER	010106	SL	5.00	16	335.			335.	335.		0.
16	STORE SHELVING	010107	SL	7.00	16	2,496.			2,496.	1,960.		357.
17	APPLE MINI MAC	010107	SL	5.00	16	777.			777.	777.		0.
18	INTUIT QUICKBOOKS UPGRADE	010108	SL	3.00	16	168.			168.	168.		0.



2012 DEPRECIATION AND AMORTIZATION REPORT

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Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
19	STORAGE CABINET	010108	SL	7.00	16	153.			153.	99.		22.
20	COAT RACK	010108	SL	7.00	16	216.			216.	136.		31.
21	STORAGE CABINETS	010107	SL	7.00	16	588.			588.	336.		84.
22	STORAGE CABINETS	010107	SL	7.00	16	578.			578.	578.		0.
23	CUBICLES	082208	SL	7.00	16	3,322.			3,322.	3,322.		0.
24	CUBICLES	082208	SL	7.00	16	2,545.			2,545.	1,456.		364.
25	ETO EVALUATION	010108	SL	5.00	16	12,495.			12,495.	12,081.		414.
26	COMPUTER SOFTWARE	010107	SL	3.00	16	1,215.			1,215.	1,215.		0.
27	COMPUTER- 3 YR	082208	SL	3.00	16	2,447.			2,447.	2,447.		0.
28	COMPUTERS	010108	SL	5.00	16	3,732.			3,732.	3,357.		375.
29	COMPUTER & EQUIPMENT	010108	SL	5.00	16	712.			712.	639.		73.
30	CASE MANAGER LAPTOP	010108	SL	5.00	16	662.			662.	662.		0.
31	STAFF LAPTOP	010107	SL	3.00	16	764.			764.	764.		0.
32	COMPUTER FOR CAFE	082208	SL	5.00	16	799.			799.	640.		159.
33	COMPUTER FOR ONLINE STORE	010107	SL	3.00	16	799.			799.	799.		0.
34	COMPUTER & EQUIPMENT	010106	SL	5.00	16	1,288.			1,288.	1,288.		0.
35	BASEMENT BUILDOUT COUNTER	010106	SL	7.00	16	1,405.			1,405.	1,405.		0.
36	CAFE BUILDOUT	082208	SL	15.00	16	43,945.			43,945.	11,720.		2,930.

2012 DEPRECIATION AND AMORTIZATION REPORT

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
37	SAFE SHERMAN LOCK	080608	SL	7.00	16	1,498.			1,498.	856.		214.
38	FREEZER	090408	SL	7.00	16	950.			950.	544.		136.
39	SECURITY ALARM SYSTEM	091508	SL	7.00	16	1,593.			1,593.	912.		228.
40	THERMAL RECEIPT PRINTERS	091708	SL	7.00	16	1,490.			1,490.	852.		213.
41	TIME CLOCK	091608	SL	7.00	16	380.			380.	216.		54.
42	POST READER	100208	SL	7.00	16	408.			408.	232.		58.
43	FURNITURE AND SHELVING	091208	SL	7.00	16	3,666.			3,666.	2,096.		524.
44	LAPTOP & COMP EQUIP	071508	SL	5.00	16	2,234.			2,234.	1,788.		446.
45	SIGN	123108	SL	7.00	16	1,739.			1,739.	992.		248.
46	SOFTWARE	113008	SL	5.00	16	2,216.			2,216.	1,772.		444.
47	FENDER PASSPORT DELUXE, SPEAKER STA	071509	SL	5.00	16	650.			650.	390.		130.
48	LIGHTING FIXTURES	083109	SL	7.00	16	799.			799.	342.		114.
49	PRINTER - CRESCENT STREET	092709	SL	5.00	16	425.			425.	251.		85.
50	FRIDGE/MICROWAVE - CRESCENT STREET	092809	SL	5.00	16	149.			149.	90.		30.
51	SCANNER & PART	041210	SL	5.00	16	2,507.			2,507.	1,503.		501.
52	IKEA FURNITURE FOR CAFE	041610	SL	7.00	16	505.			505.	216.		72.
53	PROJECTOR & SCREEN	061710	SL	5.00	16	570.			570.	342.		114.
54	2 LAPTOPS	081809	SL	5.00	16	1,060.			1,060.	636.		212.

2012 DEPRECIATION AND AMORTIZATION REPORT

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
55	SATELITE LAPTOP DELL INSPIRION	021610	SL	5.00	16	637.			637.	381.		127.
56	COMPUTER	060710	SL	5.00	16	1,525.			1,525.	915.		305.
57	2008 FORD CARGO VAN	041210	SL	5.00	16	16,200.			16,200.	9,720.		3,240.
58	CAF FREEZER	072710	SL	5.00	16	620.			620.	248.		124.
59	CARTS/BASKET BOOK COLLECTION	081910	SL	5.00	16	780.			780.	312.		156.
60	BOXES IKEA FURNITURE FOR	120210	SL	5.00	16	2,800.			2,800.	1,120.		560.
61	CAF BOOK COLLECTION	123110	SL	7.00	16	680.			680.	194.		97.
62	BOXES BOOK COLLECTION	020811	SL	5.00	16	4,200.			4,200.	1,680.		840.
63	BOXES SHELVING - BOSTON	051111	SL	5.00	16	569.			569.	228.		114.
64	LOCATION 10 NEW COMPUTERS	062911	SL	15.00	16	3,081.			3,081.	205.		205.
65	(DONATED) LAPTOP STORAGE	093010	SL	5.00	16	7,979.			7,979.	3,192.		1,596.
66	CHARGER BOSTON LOCATION	102110	SL	5.00	16	1,733.			1,733.	694.		347.
67	BUILDOUT	063011	SL	15.00	16	21,635.			21,635.	1,442.		1,442.
68	VAN WRAP	102110	SL	5.00	16	3,979.			3,979.	1,592.		796.
69	PASSENGER VAN BOSTON LOCATION	091012	SL	5.00	16	16,555.			16,555.			2,759.
70	BUILDOUT	112311	SL	15.00	16	25,359.			25,359.	846.		1,691.
71	SIGN - BOSTON	072111	SL	7.00	16	1,590.			1,590.	114.		227.
72	INDABA SOFTWARE	020812	SL	3.00	16	4,000.			4,000.	667.		1,333.

2012 DEPRECIATION AND AMORTIZATION REPORT

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
73	LOUNGE FURNITURE	071411	SL	7.00	16	2,220.			2,220.	159.		317.
74	IKEA FURNITURE FOR CAF - BOSTON	091511	SL	7.00	16	3,489.			3,489.	249.		498.
75	SHELVING - BOSTON LOCATION	080411	SL	7.00	16	596.			596.	1,191.		0.
77	BARCODE READER	081011	SL	5.00	16	6,050.			6,050.	6,055.		0.
78	COLLECTION BOXES	082611	SL	5.00	16	7,000.			7,000.	7,005.		0.
79	VARIOUS PIECES OF EQUIPMENT	093011	SL	5.00	16	2,225.			2,225.	2,230.		0.
80	LOCKERS, CHAIRS, STORAGE CABINETS, S	093011	SL	5.00	16	3,694.			3,694.	3,699.		0.
81	LOUNGE FURNITURE	093011	SL	7.00	16	2,220.			2,220.	2,227.		0.
82	STORE BANNERS	110111	SL	5.00	16	2,552.			2,552.	2,557.		0.
83	SAFE-SHERMAN LOCK	122711	SL	7.00	16	1,200.			1,200.	1,207.		0.
84	16 BUSHEL CANVAS BASKET TRUCK	052412	SL	5.00	16	1,483.			1,483.	1,488.		0.
85	SHELVING - BOSTON LOCATION	060612	SL	7.00	16	3,328.			3,328.	3,335.		0.
86	VARIOUS PIECES OF EQUIPMENT	010112	SL	5.00	16	6,401.			6,401.	6,406.		0.
87	INDUSTRIAL SHELVING	071812	SL	7.00	16	9,984.			9,984.			1,307.
88	5 BOOK BOXES	092412	SL	5.00	16	3,850.			3,850.			578.
89	PRINTERS/SCANNERS	020613	SL	5.00	16	455.			455.			38.
90	POSTAL SCALES - BOSTON	030513	SL	5.00	16	1,974.			1,974.			132.
91	CHAIRS	062513	SL	7.00	16	760.			760.			0.

2012 DEPRECIATION AND AMORTIZATION REPORT

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
92	7 DELL C2D NOTEBOOKS	090711	SL	3.00	16	2,317.			2,317.	2,320.		0.
93	10 DELL C2D NOTEBOOK & LCD MONI	090711	SL	3.00	16	4,110.			4,110.	4,113.		0.
94	DATALINK STORAGE	101411	SL	3.00	16	2,094.			2,094.	2,097.		0.
95	5 HP PROBOOK 4530S VARIOUS COMPUTER	021612	SL	3.00	16	2,872.			2,872.	2,875.		0.
96	ACCESSORIES	010112	SL	3.00	16	1,148.			1,148.	1,151.		0.
97	3 HP LAPTOPS (DONATED)	103112	SL	3.00	16	3,987.			3,987.			886.
98	9 HP PROBOOK LAPTOPS	030713	SL	3.00	16	5,012.			5,012.			557.
99	IPAD	050413	SL	3.00	16	488.			488.			27.
100	2000 FORD E350 BOX TRUCK	081111	SL	5.00	16	9,095.			9,095.	910.		1,819.
101	BOX TRUCK WRAP	011812	SL	5.00	16	3,889.			3,889.	389.		778.
	* TOTAL 990 PAGE 10 DEPR					353,283.		0.	353,283.	173,774.	0.	32,513.

# Application for Extension of Time To File an Exempt Organization Return

▶ **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  **X**
- 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.*

**Electronic filing (e-file)** - You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

**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.*

<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>MORE THAN WORDS, INC.</b>	Employer identification number (EIN) or <b>04-2784985</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>376 MOODY STREET</b>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>WALTHAM, MA 02453</b>	

Enter the Return code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**JODI ROSENBAUM**

- The books are in the care of ▶ **376 MOODY ST - WALTHAM, MA 02453**  
 Telephone No. ▶ **781-788-0035** 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 is for.

**1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2014**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year \_\_\_\_\_ or  
 ▶  tax year beginning **JUL 1, 2012**, and ending **JUN 30, 2013**.

**2** If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

<b>3a</b> 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.	<b>3a</b>	\$	0.
<b>b</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.	<b>3b</b>	\$	0.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	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.