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DLN: 93493133045400

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)

OMB No 1545-0047

Open to Public

Department of the Treasury
Internal Revenue Service

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

	r the 200	08 calendar yea	r, or tax year beginning 07-01-2008	and ending 06-30-200	9		
B Che	eck if appli		C Name of organization			D Employer ider	ntification number
_	Iress chan	ge use IRS	PROGRESS INDUSTRIES			42-1122161	L
	ne change	label or	Doing Business As			E Telephone nu	mber
_	ıal return	type. See Specific				(641) 792-6	119
_		Instruc-	Number and street (or P O box if mail is no 1017 E 7TH STREET N BOX 1449	t delivered to street addre	ss) Room/suite	G Gross receipts	s \$ 12,810,539
_	mination	tions.					
Am	ended retu	urn	City or town, state or country, and ZIP + 4 NEWTON, IA 50208				
App	olication pe	ending	NEW 1011, 21 30200				
		F Nan	ne and address of Principal Officer		H(a) īs thu	s a group return	for
			SKOKAN		affilia		┌ Yes
			TTH STREET N N,IA 50208				
Ta	x-exempt		(3) ◀ (insert no)	527		l affiliates include	
147	-114 1					p Exemption Nur	See instructions) nher =
W	ed site:	- www.PROGRI	ESSINDUSTRIES ORG		n(c) 0104	p Exemption ital	inder F
. Tyni	e of oman	uzation 🔽 Cornorat	ion		L Year of For	rmation 1979 M s	State of legal domicile IA
. 1,70	e or organ	nzation (* corporat	only dusty association, other p		TE real or rol	1373 111	rate of legal dofficile. In
		_					
Pa		Summary					
			e organization's mission or most signif				
			WORLD FOR PEOPLE WITH DISABILI	TIES BY PROVIDIN	G OPPORTUN	NITIES AND SKI	LLS NECESSARY TO
		DIFILL NEEDS A	ND PURSUE DREAMS				
,	3 6	hack this hav	if the organization discontinued its one	rations or disposed o	fmorethan 2	E0/ of the persons	
		•	if the organization discontinued its ope				•
		_	nembers of the governing body (Part V				9
			dent voting members of the governing))		8
			nployees (Part V, line 2a)			5 _	508
			lunteers (estimate if necessary) .			6 _	50
•		-	ted business revenue from Part VIII, l	7a	0		
	b N (et unrelated busı	ness taxable income from Form 990-T	, line 34		7b	0
					Prio	or Year	Current Year
a.	8 (Contributions and	d grants (Part VIII, line 1h)		152,000	119,487	
Hayenile	9 F	Program service	revenue (Part VIII, line 2g)			12,698,745	12,634,420
<u>9</u>	10 I	nvestment incor	ne (Part VIII, column (A), lınes 3, 4, a	nd 7d)		8,910	6,613
T	11 (Other revenue (P	art VIII, column (A), lines 5, 6d, 8c, 9		-12,465	50,019	
			dd lines 8 through 11 (must equal Part	e	12.047.100	12.010.520	
		12)				12,847,190	12,810,539
			ar amounts paid (Part IX, column (A), li				(
			r for members (Part IX, column (A), lin		(
Ø.	I .	Salaries, other co 10)	empensation, employee benefits (Part I	11,374,050	11,206,042		
Expenses		•	raising fees (Part IX, column (A), line :				
Φ							
ĭ			penses, Part IX, column (D), line 25 63,194)		1 500 166	1 472 405
		·	Part IX, column (A), lines 11a-11d, 1	•		1,500,466	1,473,487
			add lines 13-17 (must equal Part IX,	line 25, column (A))		12,874,516	12,679,529
07	19 F	Revenue less exp	penses Subtract line 18 from line 12			-27,326	131,010
5 4					Beginni	ng of Year	End of Year
3 B	20 T	Fotal assets (Par	t X, line 16)			1,672,813	1,642,188
2 de		C-4-1 /C	Part X, line 26)			1,420,284	1,258,649
d Balanc		rotal liabilities (F		252,529	383,539		
Fend Balanc	21 T		d balances Subtract line 21 from line :	20			
	21 T	Net assets or fun		20		•	
	21 T 22 N	Net assets or fun Signature Blo	ock		schedules and s	tatements, and to th	ne best of my knowledge
Par	21 T 22 N 1 III	Net assets or fun Signature Blo Juder penalties of pe		n, including accompanying			
Par lea	21 T 22 M 1 III	Net assets or fun Signature Blo Under penalties of pena	TOCK Try I declare that I have examined this return correct, and complete Declaration of preparer (n, including accompanying	d on all informat 2010-		
Par lea ign	21 T 22 M 1 III	Net assets or fun Signature Blo Under penalties of penant belief, it is true, or	TOCK Try I declare that I have examined this return correct, and complete Declaration of preparer (n, including accompanying	d on all informat I	ion of which prepare	
Par lea ign	21 T 22 M 1 III	Net assets or fun Signature Blo Under penalties of pe and belief, it is true, of ****** Signature of office DAN D SKOKAN P	TOCK ITJUTY, I declare that I have examined this return correct, and complete Declaration of preparer (PER RESIDENT & CEO	n, including accompanying	d on all informat 2010-	ion of which prepare	
Par lea ign	21 T 22 M 1 III	Net assets or fun Signature Blo Under penalties of pe and belief, it is true, of ****** Signature of office	TOCK ITJUTY, I declare that I have examined this return correct, and complete Declaration of preparer (PER RESIDENT & CEO	n, including accompanying	d on all informat 2010-	ion of which prepare	
Par lea ign	21 T 22 N 1 II	Signature Blo Under penalties of penalties o	Truny, I declare that I have examined this return correct, and complete Declaration of preparer (TRESIDENT & CEO Te and title	n, including accompanying other than officer) is base	d on all informat 2010- Date Check if	ion of which prepare	r has any knowledge
Plea Sign Here	21 T 22 N t III	Signature Blo Under penalties of penalties o	Trury, I declare that I have examined this return correct, and complete Declaration of preparer (PRESIDENT & CEO e and title	n, including accompanying other than officer) is base	d on all informat 2010- Date Check if self-	on of which prepare	r has any knowledge
Par Plea Sign Here	21 T 22 N T III	Signature Blo Under penalties of penalties o	Trury, I declare that I have examined this return correct, and complete Declaration of preparer (TRESIDENT & CEO E and title DEL KLYNSMA	n, including accompanying other than officer) is base	d on all informat 2010- Date Check if	on of which prepare	r has any knowledge
Plea Sign Here	21 T 22 N 1 III	Signature Ble Under penalties of office of the second secon	POCK Injury, I declare that I have examined this return correct, and complete Declaration of preparer (PORT OF THE PORT OF	n, including accompanying other than officer) is base	d on all informat 2010- Date Check if self-	on of which prepare	r has any knowledge
Plea Sign lere	21 T 22 N 1 III	Signature Blo Dinder penalties of office DAN D SKOKAN P Type or print name reparer's gnature DONAL	Trury, I declare that I have examined this return correct, and complete Declaration of preparer (TRESIDENT & CEO E and title DEL KLYNSMA	n, including accompanying other than officer) is base	d on all informat 2010- Date Check if self-	Preparer's PTIN (S	r has any knowledge

Part III Statement of Program Service Accomplishments (See the instructions.)

1	Briefly describe the organization's mission			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	CHANGING THE WORLD FOR PEOPLE WITH D	SISABILITIES BY PROVIDING	OPPORTUNITIES AND SKILLS	S NECESSARY TO FULFILL NEEDS AND	PURSUE DREAMS
2	Did the organization undertake any the prior Form 990 or 990-EZ? .		ervices during the year v	which were not listed on	Yes ▼ No
	If "Yes," describe these new service				
3	Did the organization cease conduct services?		t changes in how it cond		Yes 🔽 No
4	Describe the exempt purpose achie Section 501(c)(3) and (4) organization others, the total expenses, and reve	vements for each of th tions and 4947(a)(1)	trusts are required to re	port the amount of grants and	
4a	(Code) (Expenses VOCATIONAL PROGRAMS WORK SERVICE WORK HABITS AND GENERAL WORK SERV	S AND JOB PREPARATION F) (Revenue \$ DIVIDUALS PROGRAMS TO TEACH AI	1,136,425) ND ASSIST CLIENTS GOOD
4b	(Code) (Expenses RESIDENTIAL PROGRAMS PROGRAMS CO DISABLED INDIVIDUALS		including grants of \$ OF SERVICE FROM VERY STR) (Revenue \$ RUCTURED ENVIRONMENTS TO INDIN	11,497,994) /IDUAL APARTMENTS FOR
4c	(Code) (Expenses	s \$	ıncludıng grants of \$) (Revenue \$)
4d	Other program services (Describe	ın Schedule O)			
	(Expenses \$	ıncludıng grants o) (Revenue \$)
4e	Total program service expenses \$	11,319,09	9 Must equal Part IX, I	une 25, column (B).	

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		No
15	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, Part II</i>	15		No
16	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</i> "Yes," complete Schedule F, Part III	16		Νo
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νo
22	Did the organization report more than \$5,000 on Part IX, column (A), line $2?$ If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		No
24a	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? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section $501(c)(3)$ and $501(c)(4)$ organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part VI . . .

Part IV Checklist of Required Schedules (Continued)

			res	NO
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		No
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νο
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Νο
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νο
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related	37	Yes	

Pa	rt V Statements Regarding Other IRS Filings and Tax Complian	ce				
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal					
	of U.S. Information Returns. Enter -0- if not applicable					
		1a	20			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments	to ven	dors and reportable			
_	gaming (gambling) winnings to prize winners?	; ·		1c		No
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this		508			
h	return					
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file the			2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during return?	ng the	year covered by this	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Sc	hedule	0	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a over, a financial account in a foreign country (such as a bank account, securities a account)?	_	·	4a		No
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Financial Accounts.	Report d	of Foreign Bank and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time dur	ing the	tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibite	d tax sl	nelter transaction?	5b		Νο
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exem</i> Tax Shelter Transaction?	pt Enti	ty Regarding Prohibited	5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		No
ь	If "Yes," did the organization include with every solicitation an express statement					
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo co more?	ntrıbut	ion of \$75 or	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services	provide	ed?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal prop	erty for	which it was required to	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	 7d		70		110
u	11 res, indicate the number of forms 5252 med during the year.					
e	Did the organization, during the year, receive any funds, directly or indirectly, to pa		niums on a personal	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a per	sonal b	enefit contract?	7f		Νο
g	For all contributions of qualified intellectual property, did the organization file Form	8899	as required?	7g		Νο
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization	file a F	orm 1098-C as			
_	required?	• •		7h		No
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds supporting organizations. Did the supporting organization, or a fund maintained by a excess business holdings at any time during the			8		Νο
_	year?		ļ			
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds					
a	Did the organization make any taxable distributions under section 4966?			9a		N o
b	Did the organization make a distribution to a donor, donor advisor, or related perso	n ⁷ .		9b		No
10	Section 501(c)(7) organizations. Enter	1.0-	I			
	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club	10a 10b				
D	facilities	100				
11	Section 501(c)(12) organizations Enter					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	ın lıeu	of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

8

Section A. Governing Body and Management

No

Νo

Νo

Νo

Νo

Νo

Νo

Νo

Yes

2

3

4

5

6

7a

7Ь

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below processes, or changes in Schedule O. See instructions.	ı, desc	ribe the circumstances,
1a	Enter the number of voting members of the governing body	1a	9
Ь	Enter the number of voting members that are independent	1b	8

	other officer, director, trustee, or key employee?	•
š	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?	

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any

supervision of officers, unectors of trustees, of key employees to a management company of other person.	•
Did the organization make any significant changes to its organizational documents since the prior Form 990	was
filed?	

Did the organization become aware during the year of a material diversion of the organization's assets	57.	•	
Does the organization have members or stockholders?			
Describes a service being manufacture at a liberal dans an athermore and the service and a service a			ı

	Does the organiza	tıon	have	: men	nbers	, st	ockł	nolde	rs, o	r otheı	rperson	s who	may	elect	one	or	more	me	mbers	ofthe
	governing body?																			
h	Are any decisions	of t	ho ac	warn	na h	odv	cub	oct t	. an	nroval	by man	nhare	ctoo	khald	orc	or	othor	nor	conc2	,

D	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	•
	Did the organization contemporaneously document the meetings held or written actions undertaken during t	the
	year by the following	

	year by the following			 	 		 			 	 		 J	-
а	the governing body?													

b	each committee with authority to act on behalf of the governing body?						
	Does the organization have local chapters, branches, or affiliates? .						

b	If "Yes," does the organization have written policies and procedures governing the activities of such	ı ch	hap	ter	s,
	affiliates, and branches to ensure their operations are consistent with those of the organization? $$.				

Was a copy of the Form 990 pr	ovided to the organization's	s governing body before	ıt was filed? All	organ	ıızatı	ions	3
must describe in Schedule O t	he process, if any, the orga	nization uses to review t	he Form 990 .				

11	Is there any officer, director or 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

8a	Yes	
8b	Yes	
9a		Νo
9b		
10	Yes	
11	Yes	

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b		No
	Describe the process in Schedule O			
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?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. I another's website.
 - L9 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

AMY DAVIS 1017 E 7TH ST N NEWTON,IA 50208 (641) 792-6119

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- * 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, or 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 the organization did not compensate any officer, director, trustee or key employee												
		Posit ti	(C non (hat a	chec		I			(5)	(F)		
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Key employee Officer Institutional Trustee Inclindual Trustee or Prector		Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations		
DAN SKOKAN , PRESIDENT/CEO	36 00	Х		Х				120,098	0	16,006		
BRIAN I BUCH , CHAIR	2 00	Х		Х				0	0	0		
GERI A DOYLE , VICE CHAIR	2 00	Х		Х				0	0	0		
ALAN L WELLS , TREASURER	2 00	Χ		Х				0	0	0		
MARK B PARRIOTT , SECRETARY	2 00	Χ		Х				0	0	0		
RITA A BAKER , TRUSTEE	1 00	Χ						0	0	0		
NOREEN F OTTO , TRUSTEE	1 00	Х						0	0	0		
TOD B HOCKENSON, TRUSTEE	1 00	Χ						0	0	0		
WILLIAM T MCKENNA , TRUSTEE	1 00	Х						0	0	0		
JODY L EATON , EX OFFICIO MEMBER	1 00	Χ						0	0	0		
AMY DAVIS , CFO	36 00			Х				65,369	0	4,260		
							<u> </u>					

Part VIII Continued

(A) Name and Title	(B) Average hours per week			Position (check a that apply)				Position (check all that apply) Highest complemble employee Institutional or Director			Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Total							F	185,467	0	20,266				

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►1

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

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

(A) Name and business address	(B) Description of services	(C) Compensation							
7. Total number of independent contractors (including those in 1) who recoved more than \$100,000 in compensation									

Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization

0

Statement of Revenue

				(A) Total Revenue	(B) Related or	(C) Unrelated	(D) Revenue
					Exempt Function	Business Revenue	Excluded from Tax under IRC
					Revenue	Revenue	512, 513, or 514
92.92	1a	Federated campaigns 1	a 33,750				
필	ь	Membership dues 18	·				
s, g amo	С	Fundraising events					
<u>#</u>	d	Related organizations 10					
E S	e	Government grants (contributions) 16					
Contributions, gifts, grants and other similar amounts	f	All other contributions, gifts, grants, and similar amounts not included above	85,737				
훈등	_	16 Noncash contributions included in					
E E	g	lines 1a-1f \$	<u>'</u>				
O	h	Total (Add lines 1a-1f)	· · · · .	119,487			
			Business Code				
euri	2a	FEES FROM GOVERMENTAL	900,099	12,123,912	12,123,912		
₽e⊀	Ь	PROGRAM SERVICE INCOME	623,990	410,568	410,568		
AS 6	c d	PRIVATE PAY	623,990	99,940	99,940		
<u> </u>	e		-				
Ë	f	All other program service revenue	_ e				
Program Serwce Revenue			_				
<u> </u>	g	Total. Add lines 2a-2f					
	3	Investment income (including div	· •	6.612			6.612
		other similar amounts)	▶	6,613			6,613
	4	Income from investment of tax-exempt	bond proceeds				
	5	Royalties					
	c-	(i) Real	(II) Personal				
	6a b	Gross Rents Less rental					
	c	expenses Rental income					
	d	or (loss) Net rental income or (loss)					
			<u> </u>				
	7a	(1) Securities Gross amount	(II) O ther				
		from sales of assets other					
	ь	than inventory Less cost or					
		other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)	, ▶				
	8a	Gross income from fundraising events (not including					
άν		\$					
· 东		of contributions reported on line 1c) See Part IV, line 18					
ě		Attach Schedule G if total exceeds \$15,000					
法	ь	Less direct expenses					
Other Revenue	С	Net income or (loss) from fundrais					
•	9a	Gross income from gaming	<u> </u>				
		activities See part IV, line 19 Complete Schedule G if total					
		exceeds \$15,000					
	ь	Less direct expenses					
	c	Net income or (loss) from gaming					
	100	Cross color of inventory loss	<u> </u>				
	IVa	Gross sales of inventory, less returns and allowances .					
	_	a					
	b c	Less cost of goods sold b Net income or (loss) from sales o					
	<u> </u>	Miscellaneous Revenue	Business Code				
	11a	salary reimbursements	900,099	41,763	41,763		<u> </u>
	ь	MISCELLANEOUS INCOME	900,099	6,728	6,728		
	С	EQUITY METHOD INCOME F	900,099	1,528	1,528		
	d	All other revenue					
	е	Total. Add lines 11a-11d	\$ 50,019				
	12	Total Revenue. Add lines 1h, 2g,		12,810,539	12,684,439	0	6,613
		8c,	_				

Part IX Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) orgalised in the section 501(c)(3) and 501(c)(4) orgalised in the section 501(c)(4) organizations must complete column (A) but are not reference in the section of the se				
	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 U S See Part IV, line 21		Схрензез	general expenses	скрепаса
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	224,260		209,131	15,129
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	7,854,733	7,328,784		38,430
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	405,183	372,110	31,126	1,947
9	Other employee benefits	1,906,279	1,744,163	159,345	2,771
10	Payroll taxes	815,587	743,099	67,571	4,917
11	Fees for services (non-employees)				
а	Management				
b	Legal	10,038	7,473	2,565	
С	Accounting	21,654	16,533	5,121	
d	Lobbying				
е	Professional fundraising See Part IV, line 17				
f	Investment management fees				_
g	Other	12,279	2,421	9,858	
12	Advertising and promotion	14,150	10,439	3,711	
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	603,625	492,899	110,726	_
17	Travel	187,371	180,232	7,139	_
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings	29,850	12,043	17,807	
20	Interest	8,715	8,715		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	61,607	59,139	2,468	
23	Insurance				
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	SUPPLIES	279,169	166,419	112,750	_
ь	EQUIPMENT RENTAL AND MA	98,145	68,310	29,835	
c	TELEPHONE AND INTERNET	76,082	62,350	13,732	
d	BUILDING AND LIABILITY	49,147	34,748	14,399	
e	DUES	10,689	623	10,066	
f	All other expenses	10,966	8,599	2,367	
25	Total functional expenses. Add lines 1 through 24f	12,679,529	11,319,099	1,297,236	63,194
26	Joint Costs. Check If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	12,013,323	11,013,033	1,231,230	V3,137

Part X	Balance	Shoot
	Balance	Sneer

					(A) Beginning of year			3) fyear
	1	Cash—non-interest-bearing			Beginning of year	1	Ella o	ii yeai
	2	Savings and temporary cash investments	•		314,095	-		321,976
	3	Pledges and grants receivable, net			16,000			27,000
	4	Accounts receivable, net		1,126,656	- 		1.041.319	
	5	Receivables from current and former officers, directors, trustees,			1,120,000	-		1,041,010
		other related parties $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		5				
	6	Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$ Complete Part II of S		6				
	7	Notes and loans receivable, net		7				
	8	Inventories for sale or use				8		
ş	9	Prepaid expenses and deferred charges			19,109	9		12,343
Assets	10a	Land, buildings, and equipment cost basis	10a	445,283				
•	ь	Less accumulated depreciation <i>Complete Part VI of</i> Schedule D	10a	233,447	1	10c		211,836
	11	Investments—publicly traded securities	<u> </u>			11		
	12	Investments—other securities See Part IV, line 11 Complete Par Schedule D	f		12			
	13	Investments—program-related See Part IV, line 11 Complete Part of Schedule D.		13				
	14	Intangible assets		14				
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule	52,324			27,714		
		D			4 070 040	15		1 040 400
	16	Total assets. Add lines 1 through 15 (must equal line 34)			1,672,813			1,642,188
	17	Accounts payable and accrued expenses .	927,880			893,097		
	18	Grants payable		18				
	19	Deferred revenue		19				
Ø.	20	Tax-exempt bond liabilities		20				
Eg	21	Escrow account liability Complete Part IV of Schedule D		21				
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		,				
		persons Complete Part II of Schedule L		•		22		
	23	Secured mortgages and notes payable to unrelated third parties			35,440	23		5,540
	24	Unsecured notes and loans payable			414,987	24		319,563
	25	Other liabilities Complete Part X of Schedule D	41,977	25		40,449		
	26	Total liabilities. Add lines 17 through 25			1,420,284	26		1,258,649
У		Organizations that follow SFAS 117, check here ▶ and complete through 29, and lines 33 and 34.	ete line	es 27				
Balance	27	Unrestricted net assets			236,529	27		356,539
<u> </u>	28	Temporarily restricted net assets			16,000	28		27,000
Ę	29	Permanently restricted net assets				29		
Fund		Organizations that do not follow SFAS 117, check here 🕨 🦵 and	compl	lete				
		lines 30 through 34.						
Ş	30	Capital stock or trust principal, or current funds				30		
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund .				31		
	32	Retained earnings, endowment, accumulated income, or other fun	ds			32		
Ŋet	33	Total net assets or fund balances			252,529	33		383,539
_	34	Total liabilities and net assets/fund balances			1,672,813	34		1,642,188
Pa	rt XI	Financial Statements and Reporting						
							Yes	No

Dart VI	Financial Statements and Reporting
P. 1 4 D. 1	Financial Statements and Reporting

1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νο
ь	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 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?	2c	Yes	
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?	3a		No
ь	If "Yes," did the organization undergo the required audit or audits?	3b		

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DLN: 93493133045400

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

2008

Open to Public Inspection

		e organizat i	on					En	ıployer ide	nt if icat ic	on nu	ımber			
PROG	RESS IN	IDUSTRIES						143	1122161						
Da	rt I	Peacon	for Public C	harity Status (to be co	mnleted	hy all or	nanizatio		-1122161 Instruct						
				ation because it is (Please					instruct	10113)					
1				nurches, or association of ch					(A)(i).						
2	, _	•		tion 170(b)(1)(A)(ii). (Atta				., ((,)(,)	(,,,(,,,						
3	, -						tion 170/F	N(1)(A)(iii) (Δttac	h Schadu	H مار	`			
4	<u>'</u>	A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H) 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										_111.6	i tile				
5 An organization operated for the benefit of a college or university owned or op									ernmental	unit desc	rıbe	d ın			
	·	_	•	(Complete Part II)		•	•	, ,							
6	Г			overnment or governmental	unıt desci	ıbed ın Se	ection 170	(b)(1)(A)	(v).						
7	Ē	•	-	ally receives a substantial p						n the aen	eral	public			
	,	=		o)(1)(A)(vi) (Complete Par						J					
8	Г		-	ped in Section 170(b)(1)(A)	•	plete Par	tII)								
9	Ī		•	ally receives (1) more than		•	•	ntributio	ns, membe	rship fee	s, ar	nd gro	ss		
	•			lated to its exempt functions											
		•		estment income and unrelate	-		·	, ,	•						
			-	on after June 30, 1975 See			•			,					
10	Г		-	and operated exclusively to			•		•	e instruc	tion	s)			
11		An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of													
				-				•) See Section 509(a)(3). Check					
		_		type of supporting organiza					_			0.11			
_	_	a T		Type II c rtify that the organization is			nally Integ		d ana ar mar	Type Type					
е	'	•		agers and other than one or			•			•		•			
		section 50		J.	•	, , , , ,	,					` /\	,		
f				d a written determination fro	m the IRS	that it is	a Type I,	Type II o	r Type III	supporti	ng o	rganız	ation,		
		check this		as the organization accepted	d any gift	or contrib	ution from	any of the					ı		
g		following pe		as the organization accepted	u any gni	or continb	ution nom	any or the	=						
				r indirectly controls, either a	alone or to	gether wi	th persons	describe	d ın (ıı)			Yes	No		
		and (III) below, the governing body of the the supported organization?									J(i)				
		(ii) a family member of a person described in (i) above?													
		(iii) a 35%	controlled enti	ty of a person described in ((i) or (ii) a	bove?				11g	(iii)				
h		Provide the	following infori	mation about the organizatio	ns the org	janization	supports								
	/** h:	. 1	(**) ETN	/···> =							Τ,				
		ame of orted	(ii) EIN	(iii) Type of organization (described on lines 1-9		s the		ou notify	(VI) I		(v	Supp	ount of		
		ported (described on lines 1-9 organization in the organization nization above or IRC section col (i) listed in lin col (i) of you										зирр	OIL.		
	•			(See Instructions))	, ,	verning	supp		ın the						
						ment?				Г	4				
					Yes	No	Yes	No	Yes	No	-				
											_				
											-				
				I	I		1	I	1	I	1				

Total

Part II	Support Schedule for Organizations Described in IRC 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.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf The value of services or facilities					 		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts from line 4							
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties and income from similar							
_	sources							
9	Net income from unrelated business							
	activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss							
10	from the sale of capital assets (Explain in							
	Part IV)							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns)		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and stop here		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	▶ □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and stop here. The organization qualifies a				,			▶ □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				▶ □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							► □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	Private Foundation. If the organization did	not check the b	oux on line 13, 1	oa, 100, 1/a or	1/D, check this	oox an	u see	▶ □
	ınstructions							F-1

Support Schedule for Organizations Described in IRC 509(a)(2)

	(Complete only if you check						
	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	158,895	257,567	260,195	152,000	119,487	948,144
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	11,973,981	12,696,613	12,017,596	12,698,745	12,634,420	62,021,355
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						
	Total Add lines 1-5 A mounts included on lines 1, 2, and 3 received from disqualified persons	12,132,876	12,954,180	12,277,791	12,850,745	12,753,907	62,969,499
_	A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						62,969,499
	line 6)						
T	tal Support			•			
	otal Support	() 2004	(1) 2005	() 2006	(N 2007	() 2000	(6) T + 1
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
Cale 9	ndar year (or fiscal year beginning in) A mounts from line 6	(a) 2004 12,132,876	(b) 2005 12,954,180	(c) 2006 12,277,791	(d) 2007 12,850,745	(e) 2008 12,753,907	(f) Total 62,969,499
Cale	ndar year (or fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
Cale 9	ndar year (or fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	12,132,876 8,736	12,954,180 7,360	12,277,791	12,850,745 8,910	12,753,907 6,613	62,969,499 49,890
Cale 9 LOa	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b	12,132,876	12,954,180	12,277,791	12,850,745	12,753,907	62,969,499
Cale 9 LOa b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly	12,132,876 8,736	12,954,180 7,360	12,277,791	12,850,745 8,910	12,753,907 6,613	62,969,499 49,890
Cale 9 lOa b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	12,132,876 8,736	12,954,180 7,360	12,277,791	12,850,745 8,910	12,753,907 6,613	62,969,499 49,890
Cale 9 100a b c 111	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12)	12,132,876 8,736 8,736	7,360 7,360 59,288	12,277,791 18,271 18,271 134,095	8,910 8,910 -12,465	12,753,907 6,613 6,613 50,019	62,969,499 49,890 49,890 246,093 63,265,482
Cale 9 10a b c 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here	12,132,876 8,736 8,736 15,156 rganization's fire	7,360 7,360 59,288	12,277,791 18,271 18,271 134,095	8,910 8,910 -12,465	12,753,907 6,613 6,613 50,019	62,969,499 49,890 49,890 246,093 63,265,482
Cale 9 10a b c 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here	12,132,876 8,736 8,736 15,156 rganization's fire	12,954,180 7,360 7,360 59,288 st, second, third	12,277,791 18,271 18,271 134,095 , fourth, or fifth t	8,910 8,910 -12,465	12,753,907 6,613 6,613 50,019	62,969,499 49,890 49,890 246,093 63,265,482
Cale 9 10a b c 11 12 13	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here	12,132,876 8,736 8,736 15,156 rganization's fire	12,954,180 7,360 7,360 59,288 st, second, third	12,277,791 18,271 18,271 134,095 , fourth, or fifth t	8,910 8,910 -12,465	12,753,907 6,613 6,613 50,019	62,969,499 49,890 49,890 246,093 63,265,482
Cale 9 1.00a b c 111 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here	12,132,876 8,736 8,736 15,156 rganization's fire	12,954,180 7,360 7,360 59,288 st, second, third	12,277,791 18,271 18,271 134,095 , fourth, or fifth t	8,910 8,910 -12,465	12,753,907 6,613 6,613 50,019	62,969,499 49,890 49,890 246,093 63,265,482
Cale 9 10a b c 11 12 13 14 Cc 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here	12,132,876 8,736 8,736 15,156 rganization's fire entage column (f) dividule A , Part IV - A	12,954,180 7,360 7,360 59,288 st, second, third	12,277,791 18,271 18,271 134,095 , fourth, or fifth t	8,910 8,910 -12,465	12,753,907 6,613 6,613 50,019	62,969,499 49,890 49,890 246,093 63,265,482 ation,
Cale 9 10a b c 11 12 13 14 Cc 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here Imputation of Public Support Perceivaled on 2007 Schedies Public Support Percentage for 2008 (line 8)	12,132,876 8,736 8,736 15,156 rganization's fire entage column (f) dividule A , Part IV - A Percentage	12,954,180 7,360 7,360 59,288 st, second, third ed by line 13 co	12,277,791 18,271 18,271 134,095 , fourth, or fifth t	8,910 8,910 -12,465	12,753,907 6,613 6,613 50,019	62,969,499 49,890 49,890 246,093 63,265,482 ation,

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% Tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

▶▽

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

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

Schedule A (Form 990 or 990-EZ) 2008

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As Filed Data

DLN: 93493133045400

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Supplemental Financial Statements

Name of the organization **Employer identification number** PROGRESS INDUSTRIES 42-1122161 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 Total number at end of year Aggregate Contributions to (during year) 3 Aggregate Grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-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 Year 2a Total number of conservation easements h 2b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 🕨 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 🕨 \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section

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.

In Part XIV, 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

- If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, 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

170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

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 relating to these items

Revenues included in Form 990, Part VIII, line 1

► \$

Assets included in Form 990, Part X

For Paperwork Reduction Act Notice, see the Intructions for Form 990 Cat No 52283D

Schedule D (Form 990) 2008

3	Organizations Maintaining Collections of Art,								
	Using the organization's accession and other records, check any items (check all that apply)	of th	e foll	owing that are	a sıgnıfıcant	use of its co	ollection		
а	Public exhibition	d	Γ	Loan or exch	ange program	ıs			
b	Scholarly research	e	Γ	Other					
С	Preservation for future generations								
4	Provide a description of the organization's collections and explain Part XIV	n how	v the	further the or	ganızatıon's	exempt purp	ose in		
5	During the year, did the organization solicit or receive donations assets to be sold to raise funds rather than to be maintained as p					mılar	Γ γ.	es	┌ No
Par	Trust, Escrow and Custodial Arrangements. (Part IV, line 9, or reported an amount on Form 990				nization ans	wered "Yes	s" to For	m 99	90,
1a	Is the organization an agent, trustee, custodian or other intermed included on Form 990, Part X?	diary	for c	ontributions oi	r other assets	not	Γ γ.	es	┌ No
b	If "Yes," explain why in Part XIV and complete the following table	9				_			
							A mount	<u> </u>	
с	Beginning balance				1c				
d	Additions during the year				1d				
e	Distributions during the year				1e				
f	Ending balance				1f				
2a	Did the organization include an amount on Form 990, Part X, line	21?					Γ γ ₀	es	│ No
	If "Yes," explain the arrangement in Part XIV								
Pa	rt V Endowment Funds. Complete if the organization							V.a	ara Da ak
1-	Beginning of year balance	(B)	Prior \	real (C)IWO	Years Back (I)Three Years I	back (e)F	our re	ars back
1a L	Contributions								
b									
C C	Investment earnings or losses								
d	Other expenditures for facilities								
e	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the year end balance held as	S							
а									
	Board designated or quasi-endowment 🕨								
_	Board designated or quasi-endowment Permanent endowment								
b	Permanent endowment 🕨								
b c	Permanent endowment F		:hat a	ire held and ac	lministered fo	rthe			
b	Permanent endowment 🕨		:hat a	ire held and ac	Iministered fo	rthe		Yes	No
b c	Permanent endowment Term endowment Are there endowment funds not in the possession of the organization.		:hat a	ire held and ac	lmınıstered fo	rthe 	3a(i)	Yes	No
b c 3a	Permanent endowment Term endowment Are there endowment funds not in the possession of the organization by (i) unrelated organizations	tion t			Iministered fo	r the 	3a(i) 3a(ii)	Yes	No
b c 3a b	Permanent endowment Term endowment Are there endowment funds not in the possession of the organization by (i) unrelated organizations	tion t	ched	 ule R?	Iministered fo	r the 	3a(i)	Yes	No
b c 3a b	Permanent endowment Term endowment Are there endowment funds not in the possession of the organization by (i) unrelated organizations	tion t on S	ched ent fu	 ule R?			3a(i) 3a(ii)	Yes	No
b c 3a b	Permanent endowment Term endowment Are there endowment funds not in the possession of the organization by (i) unrelated organizations	tion t on S	ched ent fu	 ule R? nds orm 990, Pa	rt X, line 10	· · · ·	3a(i) 3a(ii)	Yes	No
b c 3a b	Permanent endowment Term endowment Are there endowment funds not in the possession of the organization by (i) unrelated organizations	tion t on S	ched ent fu	 ule R?		· · · ·	3a(i) 3a(ii) 3b		No
b c 3a b 4 Par	Permanent endowment Term endowment Are there endowment funds not in the possession of the organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organizations listed as required Describe in Part XIV the intended uses of the organization's endott VI Investments—Land, Buildings, and Equipment Description of investment	tion t on S	ched ent fu	ule R? nds orm 990, Pa	rt X, line 10		3a(i) 3a(ii) 3b		
b c 3a b 4 Par	Permanent endowment Term endowment Are there endowment funds not in the possession of the organization organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organizations listed as required Describe in Part XIV the intended uses of the organization's endoted to the intended uses of the organization's end	tion t on S	ched ent fu	ule R? nds orm 990, Pa orm 990, Pa orm sis (investment)	rt X, line 10 (b)Cost or other)		3a(i) 3a(ii) 3b		
b c 3a b 4 Par	Permanent endowment Term endowment Are there endowment funds not in the possession of the organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organizations listed as required Describe in Part XIV the intended uses of the organization's endott VI Investments—Land, Buildings, and Equipment Description of investment	tion t on S	ched ent fu	ule R? nds orm 990, Pa	rt X, line 10 (b)Cost or other)		3a(i) 3a(ii) 3b		ok value
b c 3a b 4 Par	Permanent endowment Term endowment Are there endowment funds not in the possession of the organization organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organizations listed as required Describe in Part XIV the intended uses of the organization's endoted to the intended uses of the organization's end	tion t on S	ched ent fu	ule R? nds orm 990, Pa orm 990, Pa orm sis (investment)	rt X, line 10 (b)Cost or other basis (other)		3a(i) 3a(ii) 3b		ok value
b c 3a b 4 Par	Permanent endowment Term endowment Are there endowment funds not in the possession of the organization by (i) unrelated organizations	on Sowme	chedent fu	ule R? nds orm 990, Pa o) Cost or other sis (investment) 12,332 432,951	rt X, line 10 (b)Cost or othe basis (other)		3a(i) 3a(ii) 3b ciation (12,268		

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.	
(a) Description of security or cateory (including name of security)	(b) Book value		d of valuation year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) ▶			
Part VIII Investments—Program Related. Se	e Form 990, Part X, line		
(a) Description of investment type	(b) Book value		d of valuation year market value
			7
Table (California (b) should a real Forms 000, Book V, and (B) for 42.)			
Part IX Other Assets. See Form 990, Part X, col (B) line 13) Part IX	l ne 15		
(a) Descri			(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line.	15.)		
Part X Other Liabilities. See Form 990, Part X			
(a) Description of Liability	(b) A mount		
Federal Income Taxes			
investment in related party	40,449		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	40,449		

_	Total revenue (Form 990, Part VIII, column (A), line 12)	1 1	12,010,55
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	12,679,529
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	131,010
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	131,010
	XII Reconciliation of Revenue per Audited Financial Statements With Revenue		
1	Total revenue, gains, and other support per audited financial	Jer Reta	12,810,539
	statements	1	
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	(
3	Subtract line 2e from line 1	3	12,810,539
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
C	Add lines 4a and 4b	4c	(
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	12,810,539
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Re	turn
1	Total expenses and losses per audited financial statements	1	12,679,529
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV) 2d		
е	Add lines 2a through 2d	2e	(
3	Subtract line 2e from line 1	3	12,679,529
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	(
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	12,679,529

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Ident if ier	Return Reference	Explanation
Part X	Description of Uncertain Tax Positions Under FIN 48	The Organization has elected to defer the implementation of FASB Interpretation No 48 Accounting for Uncertainty in Income Taxes as allowed in FASB Staff Position FIN 48-3. The Organization has not evaluated uncertain tax positions, therefore there could be additional liabilities for income taxes, penalties and interest which are not recorded in these financial statements. It is the policy of the Organization to include interest paid on taxes in interest expense and penalties are included in operating expenses.

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DLN: 93493133045400

OMB No 1545-0047

2008

2008

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that answered

"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,

or Form 990-EZ, Part V lines 38b or 40b.

Transactions with Interested Persons

Open to Public Inspection

PROGRESS INDUSTRIES							E	t ion i	number							
								42	2-112	216	1					
Part I	Excess Benefit Transact To be completed by organization											Par	t V , lıne	40b		
1	(a) Name of disqualifie	d per	erson (b) Description of					on of trans	ection				(c) Corrected			
	(a) mame or all qualifie	<u>. p.</u>				(b) Des	СПРС	on or transe	CLIOII			_	Yes	No		
	er the amount of tax imposed on ion 4958	tne c	-	-		or disqualified pers	ons .	auring the y	earui •••	naer F	\$					
3 Ente	er the amount of tax, if any, on lir	ne 2,	above	, reimburse	d by t	the organization .				•	\$					
Part II	-															
	To be completed by organiza	tions T	s that a	answered "Y	es" (on Form 990, Part	IV , lı T	ne 26, or Fo	orm 9'	90-E	Z, Part (f		<u>ie 38a</u>			
(a) N:	ame of interested person and	1, ,) Loan from tl		(6)	Original principal			(e)		Appr	oved	1	/rıtten		
(a) ive	purpose			anization?		amount		(d) Balance due		ult?	by board committee		1 -	ment?		
		Т	о	From					Yes	No	Yes	No	Yes	No		
		+											+			
		_														
		+										_				
otal .						> \$	<u> </u>			<u> </u>	<u> </u>			1		
art III																
	To be completed by organ	าเzat				<u>"Yes" on Form 9</u> ween interested pe		Part IV, lir T	ie 27	•						
(a	n) Name of interested person		(6)			organization	15011	(c) A m	ount o	f gra	nt or ty	pe of	assista	nce		
Part IV	Business Transactions	Tmv	l	a Intoro	-to d	l Darsons										
Paitiv	To be completed by organ						90, 1	Part IV, lır	ie 28	a, 28	b, or	28c.				
				Relationship									(e) Sha	_		
(a)	Name of interested person			en intereste son and the		(c) A mount of transaction	f	(d) Descr	iption	of tra	ansactı	on	organız reven			
			or	ganızatıon									Yes	No		
ONSUM	ER SUPPORT ADVOCATES			ESIDENT/C GRESS	ЕО	739,		SERVICE F						Νo		
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As Filed Data -

DLN: 93493133045400

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008

Open to Public Inspection

Name of the organization PROGRESS INDUSTRIES

Employer identification number

42-1122161

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		FORM 990 IS DISTRIBUTED TO THE GOVERNING BODY MEMBERS FOR REVIEW

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		VOTING ON BOARD ACTION IS LIMITED TO THOSE WITHOUT CONFLICT OF INTEREST

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		COMPENSATION DETERMINED BY EXECUTIVE COMMITTEE BASED ON COMPARABILITY DATA, JOB PERFORMANCE REVIEW, AND MARKET FACTORS

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		AVAILABLE UPON REQUEST

ldentifier	Return Reference	Explanation
Form 990, Part VII	Contact Addresses for Officers, Directors, Etc	BRIAN I BUCH - 112 W 2ND ST S Newton, IA 50208 GERI A DOYLE - 1802 S 12TH AVE W Newton, IA 50208 ALAN L WELLS - 403 W 4TH ST N Newton, IA 50208 MARK B PARRIOTT - 2318 N 7th Ave E Newton, IA 50208 RITA A BAKER - 405 W 11TH ST S Newton, IA 50208 NOREEN F OTTO - EAST 12TH AND GRAND DES MOINES, IA 50319 TOD B HOCKENSON - 1801 OSCEOLA AVE CHARITON, IA 50049 WILLIAM T MCKENNA - 5325 N E 14TH ST DES MOINES, IA 50316 JODY L EATON - 115 N 2ND AVE E Newton, IA 50208

ldentifier	Return Reference	Explanation
FORM 990, PART XI, LINE 3(C)		THE ORGANIZATION'S JOINT EXECUTIVE AND FINANCE COMMITTEE OVERSEES THE AUDIT AND RECOMMENDS THE AUDIT FIRM TO THE FULL BOARD

OMB No 1545-0047 2008

Open to Public

Related Organizations and Unrelated Partnerships

Department of the Treasury

(Form 990)

SCHEDULE R

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

Inspection Internal Revenue Service Name of the organization **Employer identification number** PROGRESS INDUSTRIES 42-1122161 Part I Identification of Disregarded Entities (D) (B) (C) Name, address, and EIN of disregarded entity Legal domicile (state Total income End-of-year assets Direct controlling Primary activity or foreign country) entity Part II Identification of Related Tax-Exempt Organizations (B) Name, address, and EIN of related organization Legal domicile (state Exempt Code section Public charity status Direct controlling Primary activity or foreign country) (if section 501(c)(3)) entity

(A) Name, address, and EIN of related organization	Prim	(B) nary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related, investment, unrelated)		(F) Share of total income		(G) Share of end-of- year assets	(H) Disproprtionate allocations?		(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organ		(B) Primary activity		(C) Legal domicile (state or foreign country)		(D) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership		

Part V Transactions with Related Organi	zations
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	Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No			
1 D	uring the tax year, did the orgranization engage in any of the following transactior	ns with one or more related organizations listed in Parts II	-IV3						
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled ent	tity		1a					
b	b Gift, grant, or capital contribution to other organization(s)								
c	c Gıft, grant, or capital contribution from other organization(s)								
d	Loans or loan guarantees to or for other organization(s)			1d					
e	Loans or loan guarantees by other organization(s)			1e					
f	Sale of assets to other organization(s)			1f					
g	Purchase of assets from other organization(s)			1g					
h	Exchange of assets			1h					
i	Lease of facilities, equipment, or other assets to other organization(s)			1i					
j	Lease of facilities, equipment, or other assets from other organization(s)			1j					
k	Performance of services or membership or fundraising solicitations for other org	ganization(s)		1k					
I	Performance of services or membership or fundraising solicitations by other organizations	anızatıon(s)		11					
m	m Sharing of facilities, equipment, mailing lists, or other assets								
n Sharing of paid employees									
0	Reimbursement paid to other organization for expenses			10					
р	Reimbursement paid by other organization for expenses			1р					
q	O ther transfer of cash or property to other organization(s)			1q					
r	O ther transfer of cash or property from other organization(s)			1r					
2	If the answer to any of the above is "Yes," see the instructions for information o	n who must complete this line, including covered relations	hips and transaction thresholds						
	(A)	(B)	(c)						
	Name of other organization(s)	Transaction type(a-r)	Amount Involved						
(1)									
(2)									
(3)									
(4)									
(5)									
/e\									
(6)									

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

Prima	(B)	(C) Legal domicile (state or foreign country)	(C Are parti	all ners	(E) Share of end-of-year	(F Disprop	ortionate	(G) Code V—UBI amount on Box	Gene mana	H) eral or aging
of entity	Timely desirely	country)	sect 501(d organiz Yes	:)(3) zations?	end-of-year assets	Yes	No	amount on Box 20 of K-1	part	ner?
RT ADVOCATES AMES, IA50010	CARE FOR INDIVIDUALS WITH DISABILITIES	IA	Yes		138,047		No	0		No
			_							
			_							
								Schedule P (Forn		