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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 2008

Department of the Treasury

Inter	nal Revenue S	Service		► The or	rganizatio	n may have to use	e a copy of this retu	irn to satisty	state reportir	ig requireme	nts	pen to Fublic in	ispection
	For the 20	08 calend	lar year,	or tax yea	ır begin	ning Jul	1	, 2008, a	and ending			, 2009	
В	Check if appli	ıcable	Di	C Name	of organiz	ation				1	Employer Ide	ntification Number	
	Address	change	Please use IRS label	HUMAN F	RESOUR	RCE DEVELOP	MENT COUNCI	L OF DIS	TRICT IX	, INC.	81-035	0886	
	Name ch	nange	or print or type.	Numbe	er and stre	et (or PO box if i	mail is not delivered	to street add	r) Room/sui	te E	Telephone nu	mber	
	Initial ret	turn	See specific	32 SO	UTH 1	TRACY					(406)	587-4486	
	=== Terminat	tion	Instruc- tions.	City, to	own or co	untry		State	ZIP code + 4				
	Amended			BOZEM	AN			MT	59715		Gross receipts	s \$ 9,913,11	8.
		on pending	F Name	and address		al officer					group return for a		
						uth Tracy	, Bozeman	мт	59715		filiates included?	∏ _{Ye}	
1	Tayleyer	mpt status				(insert no)	4947(a)		527	If 'No,' at	tach a list (see i	nstructions) —	_
.	Website			rdc.o		(mserrio)	[] +3+7 (a)	(1) 011_		Ve) Group ov	emption number	>	
- -			X Corpor		rust	1	Other •	11 ٧-	ar of Formatio			f legal domicile M'	—————— П
	Type of org			ation 1	rust _	Association	Other	L TE	ar or Formatio	n 1973	I W State of	legal domicile 11	<u> </u>
Га		Summa			's missi	an ar most cu	mufusant activiti	oc UDF	C 10 2 7		i t commun	. t.: . ation	
	1	-	_			7	nificant activition						
ce							nutrition,						
nar	, – – -						nsportation, e						
Ver							d its operations					Ournaintely deve	ropmene.
Activities & Governance						ning body (Pa		oi uisposi	eu oi illore	11111 23 /0	3	14	
3 &							ing body (Part	VI. line 1b))		4	14	
Itle	l		•	yees (Pari		-	9 2 2 2 7 (,	,		5	174	-
Ĭ.			•			necessary)					6	750	
Ă	7a Total	l gross un	related b	usiness re	evenue	from Part VIII	, line 12, colum	n (C)			7a		0.
	b Net u	unrelated	business	taxable ii	ncome	from Form 99	RECENE	n			7 b		•
							(EOEIVE			Pric	or Year	Current \	Year
	8 Cont	tributions	and gran	ts (Part V	III, line	1h) -		က္ကြ			835,538.	8,554	1,984.
Revenue				ue (Part V		29) 8	MAY 1 8 20	10 01			464,284.	+	602.
Š	10 Inves	stment ind	come (Pa	rt VIII, col	lumn (A	(), lines 3 <u>, 4,</u> a	and 7d)	(3)			48,394.		5,532.
ď	11 Othe	r revenue	(Part VI	II, column	(A), lir	es 5, 6d, 8ç,	ca 10c=and 1.T						
	11 Other revenue (Part VIII, column (A), lines 5 6d, 8c, 9c, 10c, and 11e). 12 Total revenue — add lines 8 through 11 (must equal Part VIII column (A), line 12)								12)	7,	348,216.	9,913	3,118.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)									2,	064,754.	14	1,782.
	14 Benefits paid to or for members (Part IX, column (A), line 4)												
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)								10)	2.	508,446.	2,622	2,563.
ses	16a Professional fundraising fees (Part IX, column (A), line 11e)								,				<u></u>
Expenses	b Total fundraising expenses (Part IX, column (A), line 25) > 9,239.										-		
Ä				-			· —	9	,239.			5 0 1 5	
		·-	-			nes 11a-11d, 1	•				714,159.		7,951.
						· ·	column (A), lıne	e 25)		7,	<u> 287,359.</u>		<u>,296.</u>
	19 Reve	enue less	expenses	s Subtrac	t line 18	3 from line 12					60,857.	1,427	7,822.
Not Assats or Fund Balancos										Beginn	ing of Year	End of Y	ear
a a	20 Total	l assets (f	Part X, III	ne 16)							296,509.	10,710),411.
\$ <u>@</u>	21 Total	lliabilities	(Part X,	line 26)						1,	699,856.	1,685	936.
2.5	22 Net a	assets or	tund hala	inces SAP	Maract III	ne 21 from line	<u> 20</u>			7.	596,653.	9.024	1,475.
Pā	rt II	Signatu	re Bloc	k /	1 200 111	/				.,,	330,000.		.,
			- \ T	$\overline{}$	11 021/2 0	rampad this cature	- including accomp	anyona schad	ulac and state	ments and to	the best of my k	nowledge and helie	fitis
	true	e, correct ar	rd ငတ်က ြုပြု	Declaration	of prepar	er other than offic	n, including accompa er) is based on all ii	nformation of	which prepare	er has any kr	wiedge	nowledge and bench	, 10 15
Sig	.n		. XIVA	IXX	LW					ΛM	lean . 17	2010	
He	re	Signature of	of officer	 	<u>-₽4</u> 11	 				Date	14	7010	
,	·		<i>V II</i>	////		(150	m V D		\supset	resident	~ 0		
		Type or org	nt name and	title		۱۳۹۰	LING F. V	100	1	resident			
		- 17PC 01 PIII						Dat			. In	Prenarer's identifying	number
Da:			=		. 0 4	Q (maa	NPA	Dai	.e	Chec self-	k if (Preparer's identifying see instructions)	,
Preparer's Over 10 1) artiste 57													
	er's	nature				ALL, CPA		[05	01/10				
Usi	_ Firr	m's name (or	CPR	ACCOU	NTING	, PLLP							
On	ly em	rs if self- ployed),	▶ <u>P.O</u>	. BOX	4325					EIN	>		
	- auu	ress, and	MIS	SOULA			МТ	59806		Phon	e no ► (40	6) 728-55	39
Иay	the IRS di	scuss this	return w	ith the pre	eparer :	shown above?	(see instruction	ns)				X Yes	No
_							e the separate i		ns.	Т	EEA0101 04/23	3/09 Form 9 9	90 (2008)

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

		035081	50		Page 2
Par					
7	Briefly describe the organization's mission				
	HRDC is a non-profit community action agency				
	dedicated to serving communities and people's needs by developing resources that p	roviđe	oppo:	rtuni	ties
	See Form 990, Page 2, Part III, Line 1 (continued)	. 			- - -
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
	If 'Yes,' describe these new services on Schedule O			_	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		Yes	X.	No
	If 'Yes,' describe these changes on Schedule O				
4	Describe the exempt purpose achievements for each of the organization's three largest program services by exper and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocatio expenses, and revenue, if any, for each program service reported	ises Sec ns to othe	tion 50 ers, the	11(c)(3 e total)
4-	(Code) (Expenses \$ 3,002,761. including grants of \$ 0.) (Revenue		2.2	0 77	27 \
48	(Code) (Expenses \$ 3,002,761. including grants of \$ 0.) (Revenue HEALTH, NUTRITION AND SENIOR CITIZENS - SEE SCHEDULE O FOR COMPLETE D			8,72	<u>. / •</u>)
	HEALTH, NUTRITION AND SENIOR CITIZENS - SEE SCHEDULE O FOR COMPLETE D	FOCKTE	. T TOI	<u>'</u>	
					 -
4b	(Code) (Expenses \$1,267,964. Including grants of \$14,782.) (Revenue TRANSPORTATION - SEE SCHEDULE O FOR COMPLETE DESCRIPTION.				00.)
				-	-
				- - -	 -
			-		
		- -	-		
			-		
4c	(Code) (Expenses \$ 1,252,431. including grants of \$ 0.) (Revenue EARLY CHILDHOOD DEVELOPMENT - SEE SCHEDULE O FOR COMPLETE DESCRIPTION				
				- - -	
				-	
				-	
			-		
4 d	Other program services (Describe in Schedule O.) (Expenses \$ 2,324,765. including grants of \$ 0.) (Revenue \$	727,	546.)	
4e	Total program service expenses ► \$ 7,847,921. (Must equal Part IX, Line 25, column (B))		-		

	m 990 (2008) HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC. 81-03508	386		Page
<u> Pa</u>	rt 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part	4	X	
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		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		x
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		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	ļ	Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	х	
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	х	
13	Is the organization a school described in section $170(b)(1)(A)(ii)^{9}$ If 'Yes,' complete Schedule E	13	ļ	X
14	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a	l	X
ı	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		х
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? If 'Yes,' complete Schedule F, Part II	15		х
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? If 'Yes,' complete Schedule F, Part III	16		Χ_
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		Х
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		X
	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 17 If 'Yes,' complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III	22	<u> </u>	X
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		х
24 8	a 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K If 'No, 'go to question 25	24a		Х
Ł	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	
(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		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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		Х
ŀ	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		Х
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		х

Form 990 (2008) HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC.

Part IV Checklist of Required Schedules (continued)

	•		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee.			
	a 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		X
	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		Х
	c 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		х_
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	_X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization self, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		X
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	X	
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	X	
36	Section 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		<u> </u>
37	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? If 'Yes,' complete Schedule R, Part VI	37		X

BAA

Form 990 (2008)

Page 5

	•		Yes	No			
1:	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 54						
1	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable]					
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			ļ			
	(gambling) winnings to prize winners?	1 c	<u> X</u>				
	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 174						
21	olf at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)						
3 8	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		х			
ŀ	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь					
4 8	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х			
ŀ	olf 'Yes,' enter the name of the foreign country	1					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			 			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х			
t	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х			
(: If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5 c					
6 a	Did the organization solicit any contributions that were not tax deductible?	6a		X			
t	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).						
á	a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?						
Ŀ	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?						
¢	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?						
c	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d						
6	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X			
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g					
ŀ	For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7 h					
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have						
•	excess business holdings at any time during the year?	8		_X_			
	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.						
	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>			
	Did the organization make any distribution to a donor, donor advisor, or related person?	9 b		_X			
	Section 501(c)(7) organizations. Enter	1		ļ			
	Initiation fees and capital contributions included on Part VIII, line 12 Cores Receipts and ladded on Form 200 Part VIII line 12 for mithigains of club feedback.		ļ				
	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]		1	1			
	Section 501(c)(12) organizations. Enter Gross income from other members or shareholders 11 a	- 1	}				
	Gross income from other sources (Do not net amounts due or paid to other sources against			Ì			
	amounts due or received from them)	12a					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in fieu of Form 1041? If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	148					
BAA	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	Form	990 /	20081			
-, -, -, -,		. 5	2-0 (

Form 990 (2008) HUMAN RESOURCÉ DEVELOPMENT COUNCIL OF DISTRICT IX, INC.

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

Sec	ction A.	Governing Body and Management						
	For each ' processes	Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, de , or changes in Schedule O See instructions	escribe the circumstances,	[Yes	No		
1	a Enter the i	number of voting members of the governing body	1a 14	_				
	b Enter the i	number of voting members that are independent	1b 14	_		1		
2	Did any of officer, dire	ficer, director, trustee, or key employee have a family relationship or a business related or the sector, trustee or key employee?	ationship with any other	2		<u>x</u> _		
3	Did the orgof of officers,	ganization delegate control over management duties customarily performed by or un , directors or trustees, or key employees to a management company or other person	der the direct supervision	3		Х		
4	-	ganization make any significant changes to its organizational documents prior Form 990 was filed?		4		X		
5		ganization become aware during the year of a material diversion of the organization'	s assets?	5		Х		
6								
7	a Does the o	organization have members, stockholders, or other persons who may elect one or mo body?	ore members of the	7a		x		
	b Are any de	ecisions of the governing body subject to approval by members, stockholders, or other	er persons?	7b		Χ		
8	Did the org	ganization contemporaneously document the meetings held or written actions underting:	aken during the year by					
	a The goverr	ning body?		8a	Х			
- 1	b Each comr	mittee with authority to act on behalf of the governing body?		8b	X			
9	Does the o	organization have local chapters, branches, or affiliates?		9a		X		
ı	olf 'Yes,' do and branch	es the organization have written policies and procedures governing the activities of the organization?	such chapters, affiliates,	9 b				
10	Was a cop describe in	y of the Form 990 provided to the organization's governing body before it was filed? Schedule O the process, if any, the organization uses to review the Form 990	All organizations must	10	Х			
11	ls there an organization	ly officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be smalling address? If 'Yes,' provide the names and addresses in Schedule O	not be reached at the	11		X		
Sec	tion B.	Policies						
					Yes	No		
		organization have a written conflict of interest policy? If 'No,' go to line 13		12a	X			
ı	Are officers to conflicts	s, directors or trustees, and key employees required to disclose annually interests the	nat could give rise	12b	х			
•	Does the o Schedule (organization regularly and consistently monitor and enforce compliance with the polic O how this is done	cy? If 'Yes,' describe in	12c	_x			
13		organization have a written whistleblower policy?		13	Х			
14		organization have a written document retention and destruction policy?		14	X			
		ocess for determining compensation of the following persons include a review and ap omparability data, and contemporaneous substantiation of the deliberation and decis	oproval by independent sion					
	_	zation's CEO, Executive Director, or top management official?		15a	<u>X</u> _			
ı		ers of key employees of the organization?		15b	_ <u>X</u>			
		ne process in Schedule O (see instructions)				1		
16	Did the org entity durin	panization invest in, contribute assets to, or participate in a joint venture or similar and the year?	rrangement with a taxable	16a		X		
ł	in joint ver	s the organization adopted a written policy or procedure requiring the organization to iture arrangements under applicable federal tax law, and taken steps to safeguard the respect to such arrangements?	o evaluate its participation he organization's exempt	16b				
Sec		Disclosures		,				
		ates with which a copy of this Form 990 is required to be filed ▶						
	Section 61		1000 7 (501 () (0)	 aldelie	for pu	blic		
	inspection	04 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and Indicate how you make these available. Check all that apply	d 990-1 (501(c)(3)s only) ava	anabic				
	X Own w	Indicate how you make these available Check all that apply	1 990-1 (501(c)(3)s only) ava	anabic				
19	X Own w	Indicate how you make these available Check all that apply			financ	ıal		
20	X Own w Describe in statements	Indicate how you make these available. Check all that apply rebsite. Another's website. X Upon request a Schedule O whether (and if so, how) the organization makes its governing docume is available to the public name, physical address, and telephone number of the person who possesses the book	ents, conflict of interest policy	y, and				

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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 Gomplete 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), 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) or 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

Column C
Double D
Description
PRES/CEO 60.00 X 78,639. 0. 5,623. MARY A. MARTIN 3 63,935. 0. 14,695. DONNA WEST 0. 0. 0. 0. CHAIR 1.00 X 0. 0. 0. VICE CHAIR 1.00 X 0. 0. 0. CHRIS BUDESKI 0. 0. 0. 0. MEMBER 1.00 X 0. 0. 0. CYNTHIA CHENEY 0. 0. 0. 0. MEMBER 1.00 X 0. 0. 0. JOE MENICUCCI 0. 0. 0. 0. MEMBER 1.00 X 0. 0. 0. KATIE MOBERG 0. 0. 0. 0. MEMBER 1.00 X 0. 0. 0.
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SECRETARY
DONNA WEST
CHAIR
DAVID_KACK VICE CHAIR 1.00 X 0.<
VICE CHAIR 1.00 X 0. 0. 0. CHRIS BUDESKI 0. 0. 0. 0. MEMBER 1.00 X 0. 0. 0. CYNTHIA CHENEY 0. 0. 0. 0. AL MAURILLO 0. 0. 0. 0. MEMBER 1.00 X 0. 0. 0. JOE MENICUCCI 0. 0. 0. 0. KATIE MOBERG 0. 0. 0. 0. MEMBER 1.00 X 0. 0. 0. KRIS MOOS 0. 0. 0. 0.
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AL MAURILLO MEMBER 1.00 X 0. 0. 0. JOE MENICUCCI 0. 0. 0. 0. 0. MEMBER 1.00 X 0. 0. 0. KATIE MOBERG 0. 0. 0. 0. 0. 0. KRIS MOOS 0. 0. 0. 0. 0. 0. 0. 0.
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KRIS MOOS
MEMBER 1.00 X 0. 0. 0.
CHERYL RIDGELY
MEMBER 1.00 X 0. 00.
RAMONA STOUT
MEMBER 1.00 X 0. 0. 0.
KATHRYN TANNER
MEMBER 1.00 X 0. 0. 0. 0.
WHITT HAMPTON
FISCAL OFFICER 40.00 X 62,078. 0. 14,580.
CRYSTAL TURNER
MEMBER 1.00 X 0. 0. 0.
GENE TOWNSEND
MEMBER 1.00 X 0. 0. 0.
BILLIE WARFORD
MEMBER 1.00 X 0. 0. 0.

Part VII Section A. Officers, Directors, Trust	,	(ey	<u>En</u>			es,	an	(D)		nploye	es (F)	
· (A) Name and Title	(B) (c) Average Position (check all that apply)					that a	pply)		(E) Reportable	, .		•
	hours per week		Institutional trustee	Officer	_	Highest compensated employee	_	compensation from the organization (W 2/1099 MISC)	compensation from related organization (W-2/1099-MISC)	ns	Estima mount of compen from organizand re organiza	of other sation the ation lated
										-		
									-	-		
										-		
										-		
			_									
											_	
1 b Total						<u>' '</u>	>	204,652.	(1.	34	,898.
2 Total number of individuals (including those in 1a) wh	no recei	ved	mor	e th	an S	\$100	,000	0 in reportable con	npensation from	the		
organization •									- -		Ye	s No
3 Did the organization list any former officer, director or	r trustee	e, ke	y er	nplo	yee	e, or	higi	hest compensated	employee			
on line 1a? If 'Yes,' complete Schedule J for such ind 4 For any individual listed on line 1a, is the sum of repo	ividual		-		-				-	3	+-	X
the organization and related organizations greater that individual	an \$150	,000	? If	'Yes	s' co	ompl	lete	Schedule J for suc	ch	4		X
5 Did any person listed on line 1a receive or accrue cor rendered to the organization? If 'Yes,' complete Schei	mpensa dule J fo	tion or su	fron uch	n an pers	y ui on	nrela	ated	organization for s	ervices			X_
Section B. Independent Contractors								-				
Complete this table for your five highest compensated compensation from the organization	indepe	nde	nt c	ontr	acto	ors ti	hat	received more thai	n \$100,000 of			
(A) Name and business address								(B) Description o	f Services	Com	(C) pensa	tion
FIRST STUDENT, INC 24179 NETWORK PLACE CHI			_	ΙL		-	-	PUBLIC TRAN				,292.
VALLEY INSULATION 425 SOUTH F STREET LIV				MT			$\overline{}$	WEATHERIZATION				<u>,079.</u>
JESSE GRUEL 108 E DOOLEY BEI	LGRAD	E		MT	5	97	ւ 4	WEATHERIZATION A	IND HOME REHAB		112	,265.
							_					
2 Total number of independent contractors (including the compensation from the organization ► 3	ose in 1	I) wl	ho r	ecei	ved	moi	re th	nan \$100,000 in				

<u> Pa</u>	rt V	III Statement of Re	evenue	_ 	· · · · · · · · · · · · · · · · · · ·	·	T	·
	•	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ς.s	1 a	Federated campaigns	1 a					-
ZAN1	b	Membership dues	16					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	С	Fundraising events	10					
	d	Related organizations	1 c					
S,G	е	Government grants (contributi	ons) 1 e	4,717,659.				ļ
NER SI	f	All other contributions, gifts, q	grants, and above 1 f	3,837,325.				
E C		Noncash contribns included in	<u></u>					
S S	_	Total. Add lines 1a-1f	11115 14 11 4	<u> </u>	8,554,984.			
	- ''	Total / lad liftes 1a 11		Business Code	0,001,3011			
PROGRAM SERVICE REVENUE	2a	FAMILY DEVELOP	MENT	624100	83,729.	83,729.	0.	0.
REV		HOUSING		624200	584,936.	584,936.	0.	0.
/ICE		HEALTH, NUTRITION	, SENIOR SVS		228,727.	228,727.	0.	0.
ER\		ENERGY		624200	142,610.	142,610.	0.	0.
AM S		TRANSPORTATION		485110	271,600.	271,600.	0.	0.
GR/		All other program service				·	, , , , , , , , , , , ,	
PRC	g	Total. Add lines 2a-2f		•	1,311,602.			
	3	Investment income (included other similar amounts)	luding dividend	s, interest and	46,532.	0.	0.	46,532.
	4	Income from investment	t of tax-exemp	bond proceeds				-
	5	Royalties		>				
			(ı) Real	(ii) Personal		*		
	6a	Gross Rents						
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (lo	ss)	•				
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
	<i>,</i> a	assets other than inventory			:			
	b	Less cost or other basis	•					
	_	and sales expenses Gain or (loss)						}
		Net gain or (loss)						
ш		Gross income from fund	Iraising events					
OTHER REVENUE		(not including \$ of contributions reported	t on line 1c)					
RE		See Part IV, line 18	d on line 1c)	a				
HER	h	Less direct expenses		h				į
O		Net income or (loss) fro	m fundraising i	events >				
		, ,	_	Sverius				
	Уa	Gross income from gam See Part IV, line 19	ing activities	a				
	b	Less direct expenses		ь				i i
		Net income or (loss) from	m gaming activ	/ities ►				
		Gross sales of inventory	-					
	L	and allowances		a				1
l		Less: cost of goods sold		nton.				
	<u>c</u>	Net income or (loss) from Miscellaneous Reven		Business Code				
	11 2							
	b							
	c							
	d	All other revenue						
		Total. Add lines 11a-11d	i i			-		
	12	Total Revenue. Add line		5 6d 7d 8c 9c				
	. 4	10c, and 11e	, ey, J, 4,	<u> </u>	9,913,118.	1,311,602.	0.	46,532.

Page 10

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) but are not required to complete columns (B), (C), and (D).

Do 6h	not include amounts reported on lines 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	14,782.	14,782.	general expenses	CAPCHISCS
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	253,861.	0.	253,861.	0.
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	1,808,072.	1,759,731.	48,341.	0.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	68,641.	68,641.	0.	_ 0.
9	Other employee benefits	346,897.	314,114.	32,783.	0.
10	· · · · -	145,092.	126,737.	18,355.	0.
11	Fees for services (non-employees)				
â	n Management				
ŀ	Legal	468.	468.	0.	0.
	Accounting	24,808.	0.	24,808.	0.
	Lobbying	5.	0.	5.	0.
	Prof fundraising svcs See Part IV, In 17				
	Investment management fees Other	1,241,598.	1,188,449.	53,149.	0.
_	Advertising and promotion	68,924.	65,685.	3,239.	0.
13		76,369.	48,020.	28,349.	0.
14	Information technology	70,303.	10,020.	20,015.	
15	Royalties				
16	Occupancy	358,652.	297,614.	61,038.	0.
	Travel	171,963.	168,312.	3,651.	0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	130,319.	110,404.	19,915.	0.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	463,118.	450,473.	12,645.	0.
23 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)	120,650.	109,027.	11,623.	0.
	REPAIRS AND MAINTENANCE	182,240.	165,159.	17,081.	0.
	DIRECT_CLIENT_SERVICES	497,973.	497,973.	0.	0.
	FOOD	2,156,758.	2,156,758.	0.	0.
	SUPPLIES	158,357.	122,232.	26,886.	9,239.
	TRAINING	34,947. 160,802.	28,719. 154,623.	6,228. 6,179.	0.
	All other expenses Total functional expenses. Add lines 1 through 24f	8,485,296.	7,847,921.	628,136.	9,239.
	Joint Costs. Check here If following	0,403,230.	1,041,321.	020,130.	3,233.
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2008)

		•		(A) Beginning of year		(B) End of year		
-	1	Cash - non-interest-bearing	-	1,929.	1	180,236.		
	2	Savings and temporary cash investments		1,598,774.	2	1,519,888.		
	3	Pledges and grants receivable, net		714,458.	3	1,770,186.		
	4	Accounts receivable, net		284,865.	4	203,434.		
	5	Receivables from current and former officers, directors, or other related parties. Complete Part II of Schedule L.	trustees, key employees,		5			
	6	Receivables from other disqualified persons (as defined	under section 4958(f)(1))					
	_	and persons described in section 4958(c)(3)(B) Comple			6			
A S	7	Notes and loans receivable, net	1,701,469.	7	2,109,633.			
A S E T S	8	Inventories for sale or use		78,471.	8	107,526.		
T S	9	Prepaid expenses and deferred charges		11,716.	9	4,784.		
	10 a	- 1	10a 6,714,614.			<u> </u>		
	ı	Less accumulated depreciation Complete Part VI of						
		· · · · · · · · · · · · · · · · · · ·	10b 1,899,890.	4,904,827.	10 c	4,814,724.		
	11	Investments — publicly-traded securities						
	12	Investments – other securities See Part IV, line 11			12			
	13	Investments – program-related See Part IV, line 11			13			
	14	Intangible assets			14			
	15	Other assets See Part IV, line 11	İ		15			
	16	Total assets Add lines 1 through 15 (must equal line 34)	9,296,509.	16	10,710,411.		
	17	Accounts payable and accrued expenses	/ -:	513,499.	17	568,278.		
	18	Grants payable	Ì		18	<u> </u>		
	19	Deferred revenue	108,362.	19	58,674.			
LIABILIT	20	Tax-exempt bond liabilities		20				
	21	Escrow account liability Complete Part IV of Schedule D	,		21			
	22	Payables to current and former officers, directors, truste						
		highest compensated employees, and disqualified person	ns Complete Part II		-			
- 1		of Schedule L		22				
E S	23	Secured mortgages and notes payable to unrelated third	1,077,995.	23	1,058,984.			
	24	Unsecured notes and loans payable			24			
	25	Other liabilities Complete Part X of Schedule D			25			
	26	Total liabilities. Add lines 17 through 25		1,699,856.	26	1,685,936.		
N E T		Organizations that follow SFAS 117, check here ▶ [2]	and complete lines					
Ť		27 through 29 and lines 33 and 34.				i		
ASSE	27	Unrestricted net assets		<u>7,523,152.</u>	27	8,124,669.		
Ĕ	28	Temporarily restricted net assets		73,501:	28	899 <u>,</u> 806.		
\$	29	Permanently restricted net assets			29			
R		Organizations that do not follow SFAS 117, check here	► and complete			,		
F		lines 30 through 34.						
FUND D	30	Capital stock or trust principal, or current funds			30			
B	31	Paid-in or capital surplus, or land, building, and equipme	ent fund		31			
BALAZCES	32	Retained earnings, endowment, accumulated income, or	other funds		32			
Ç	33	Total net assets or fund balances.		7,596,653.	33	9,024,475.		
	34	Total liabilities and net assets/fund balances		9,296,509.	34	10,710,411.		
Pa	rt X	Financial Statements and Reporting						
	a We	counting method used to prepare the Form 990 Carre the organization's financial statements compiled or rev	riewed by an independent ac	Other ecountant?		Yes No		
		re the organization's financial statements audited by an i				2b X		
	c If '	(es' to 2a or 2b, does the organization have a committee	that assumes responsibility	for oversight of the aud	lit,	2c X		
3		iew, or compilation of its financial statements and selection is result of a federal award, was the organization required that Act and OMB Circular A-133?			ngle	3a X		
		/es,' did the organization undergo the required audit or au				3b X		
BA		co, and the organization andorgo the required dutit of the		·-····		Form 990 (2008)		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545 0047 2008

Open to Public Inspection

Employer identification number

Name of the organization HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC. 81-0350886 Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's Δ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 X in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 9 An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). (see instructions) 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type III- Other d | Type III - Functionally integrated b 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 If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No Yes a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization? 11 g (i) 11 g (ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the organizations the organization supports h (v) Did you notify the organization in col (i) of (III) Type of organization (described on lines 1-9 above or IRC section (vii) Amount of Support (i) Name of Supported Organization (ii) EIN (iv) Is the (vi) Is the rganization in col (i) listed in your organization in col (i) organized in the your support? (see instructions)) governing document? Yes No Yes Yes Total

Schedule A (Form 990 or 990-EZ) 2008 HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC. Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total beginning in) Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ') 370,588. 4,451,784. 5,511,247. 5,835,538. 8,554,984. 28,724,141. Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge 4,370,588. 4,451,784. 5,511,247. 5,835,538. 8,554,984. 28,724,141. Total. Add lines 1-3 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) 800,000. Public support. Subtract line 5 27,924,141. from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ► (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 7 Amounts from line 4 4,370,588. 4,451,784. 5,511,247. 5,835,538. 8,554,984. 28,724,141. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 48,394 46,532 210,543. similar sources 51,769 33,836. 30,012. Net income form unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV) Total support. Add lines 7 28,934,684. through 10 6,891,713. 12 Gross receipts from related activities, etc (see instructions) 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 14 96.51% 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 99.35% 15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f 15 16a 33-1/3 support test - 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box **►** 🗓 and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support test - 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts and circumstances' test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10%

or more, and if the organization meets the 'facts-and circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts and circumstances' test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Sche	edule A (Form 990 or 990-EZ) 2008	L , HUMVN DE20	URCE DEVELOPMEN	T COUNCIL OF DI	STRICT IX. INC	81-0350886	Page :
	t III Support Schedule fo					01 0300000	
1 4	· (Complete only if you chec	_			(-/(-/		
Sec	tion A. Public Support						
Cale	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	membership fees received (Do not include 'unusual grants')		_	·			
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5						
7 a	Amounts included on lines 1, 2, 3 received from disqualified persons						
ŀ	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						
•	: Add lines 7a and 7b						
8	Public support (Subtract line						
	7c from line 6)				<u> </u>		
	tion B. Total Support					,	.
	ndar year (or fiscal yr beginning in) 🟲	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Amounts from line 6					_	_
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (add Ins 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is organization, check this box and	for the organization here	ation's first, second	d, third, fourth, or	fifth tax year as a	a section 501(c)(3)	▶ [
Sec	tion C. Computation of Pub	lic Support f	Percentage				
15	Public support percentage for 200	8 (line 8, column	(f) divided by line	e 13, column (f))		15	%_
	Public support percentage from 2					16	%
Sec	tion D. Computation of Inve						
17	Investment income percentage fo				nn (f))	17	<u>%</u>
18	Investment income percentage from					18	<u>%</u>
19 a	33-1/3 support tests - 2008. If the	e organization di	d not check the bo The organization	x on line 14, and qualifies as a pub	i line 15 is more th	nan 33-1/3%, and lir nanization	ne i / is not ▶ 🗍

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

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

Part IV	 Suppl Part∥	l emen t I, line	t al Inf o 17a oi	ormation 17b; o	on. Co or Par	mplet t III, III	e this ne 12.	part to Provid	provide any	le the other	explan addıtıcı	ation re nal info	equired ormatio	by Pari n. (see	t II, line instructio	10; ons)
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Schedule A (Form 990 or 990-EZ) 2008 HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC. 81-0350886

Page 4

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► To be completed by organizations described below.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545 0047

Open to Public Inspection

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations complete Part I-A only

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-B

	If the organization answer	ed 'Yes.'	to Form 990.	Part IV.	line 5 (Proxy	Tax), t	her
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• 5	Section 501(c)(4), (5), or (6) o	organizations Complete Part III			
Name	of organization	-		Employer identific	ation number
HUN	MAN RESOURCE DEVELO	OPMENT COUNCIL OF DISTRICT	IX, INC.	81-035088	
Pai	rt I-A To be completed	by all organizations exempt under ons for Schedule C for details.	er section 501(c) a	and section 527 or	ganizations.
1	Provide a description of the	organization's direct and indirect political ca	ampaign activities in F	Part IV	
2	Political expenditures			▶ \$	S
3	Volunteer hours				
Pai	rt I-B To be completed See the instruction	by all organizations exempt underns for Schedule C for details.	r section 501(c)(3	3).	
1	Enter the amount of any exc	ise tax incurred by the organization under s	section 4955	▶ \$	}
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	► \$	
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a correction made?				Yes No
k	If 'Yes,' describe in Part IV				
Par	t I-C To be completed See the instructio	by all organizations exempt under ns for Schedule C for details.	r section 501(c),	except section 501	(c)(3).
1	Enter the amount directly ex	pended by the filing organization for section	1 527 exempt function	activities ►\$	
2		g organization's funds contributed to other o			
3	Total of direct and indirect ex Form 1120-POL, line 17b	xempt function expenditures Add lines 1 ar	nd 2 and enter here ar	nd on ► \$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	made Enter the amount paid received and promptly and d	and employer identification number (EIN) of and indicate if the amount was paid from irectly delivered to a separate political orga al space is needed, provide information in f	the filing organization inization, such as a se	's funds or were politica	l contributions
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's own internal funds If none, enter 0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule C (Form 990 or 990-EZ) 2008

Schedule C (Form 990 or 990-EZ) 20	08 HÚMAN RÉSOURCE	DEVELOPMENT COU	NCIL OF DISTRICT	IX, INC. 81-0350)886 Page 2
Part II-A To be comp	leted by organizat	ions exempt under	r section 501(c)(3) chedule C for detail	that filed Form 5768	(election
	ng organization belongs				
—	ng organization checked		itrol' provisions apply		
	Limits on Lobbying E 'expenditures' means	Expenditures –		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditi	ures to influence public	opinion (grass roots lob	bying)	5.	
b Total lobbying expendition	ures to influence a legis	lative body (direct lobby	/ing)	0.	
c Total lobbying expenditu	ures (add lines 1a and 1	lb)		5.	
d Other exempt purpose e	expenditures			8,485,291.	
e Total exempt purpose e	xpenditures (add lines 1	lc and ld)	ı	8,485,296.	
f Lobbying nontaxable an both columns	nount Enter the amoun	t from the following tabl	e ın	574,265.	
If the amount on line 1e, col	umn (a) or (b) is The	lobbying nontaxable a	mount is:		
Nat over \$500,000	20%	of the amount on line 1e			
Over \$500,000 but not over \$1	,000,000 \$100,	,000 plus 15% of the excess o	over \$500,000		
Over \$1,000,000 but not over \$	\$1,500,000 \$175,	,000 plus 10% of the excess o	over \$1,000,000		
Over \$1,500,000 but not over \$	\$17,000,000 \$225,	,000 plus 5% of the excess ov	rer \$1,500,000		
Over \$17,000,000	\$1,00	00,000			
g Grassroots nontaxable a	amount (enter 25% of li	ne 1f)		143,566.	
h Subtract line 1g from lin	e 1a Enter -0- if line g	is more than line a		0.	
i Subtract line 1f from line	e 1c Enter -0- if line fi	s more than line c		0.	
j If there is an amount other section 4911 tax for this		line 1h or line 1i, did the	e organization file Form	4720 reporting	Yes No
(Son	ne organizations that m	ear Averaging Period L nade a section 501(h) el nelow. See the instruction	Inder Section 501(h) ection do not have to co ons for lines 2a through	omplete all of the five 2f.)	
	Lobbyin	g Expenditures During	4-Year Averaging Perio	od	
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount	410,459.	457,333.	514,368.	574,265.	1,956,425.
b Lobbying ceiling amount (150% of line 2a, column (e))					2,934,638.
c Total lobbying expenditures	4.	57.	5.	5.	71.
d Grassroots non-taxable amount	102,615.	114,333.	128,592.	143,566.	489,106.

BAA

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

<u>71.</u> Schedule **C** (Form 990 or 990-EZ) 2008

733,659.

57.

5.

4.

Part II-B	To be completed by org	anizations exemp	t under section	501(c)(3)	that have NOT	filed Form 5768
	(election under section	501(h)). See the ii	nstructions for S	Schedule (C for details.	

(election under section 501(h)). See the instructions for Schedule C for detail	г—	a)		(b)	
· ·					
	Yes	No	An	ount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a Volunteers?					. !
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					i
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?					
i Other activities? If 'Yes,' describe in Part IV					
j Total lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If 'Yes,' enter the amount of any tax incurred under section 4912					
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A To be completed by all organizations exempt under section 501(c)(4), section	n 50	1(c)(o), or sec	tion	
501(c)(6). See the instructions for Schedule C for details.					
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Part III-B To be completed by all organizations exempt under section 501(c)(4), section	n 50	1(c)(), or sec	tion	
501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part II	II-A, d	quest	ion 3 is		
answered 'Yes.' See Schedule C Instructions for details.					
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year		2a			
b Carryover from last year		2b			
c Total		2 c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	əl				
expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)		5			
Part IV Supplemental Information					
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, and Also, complete this part for any additional information	Part II 	·B, line 	e 1ı 	. – – -	. ·
				· – – –	
				. – – <i>–</i>	
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Schedule C ((Form 990 or 990-EZ) 2008 HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC. 81-0350886 Supplemental Information (continued)	Page 4
Part IV	Supplemental Information (continued)	
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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Schedule **D** (Form 990) 2008

Employer Identification number

HUN	IAN RESOURCE DEVELOPMENT COUNC	CIL OF DISTRICT IX	, INC.	81-0350886
Par		Advised Funds or Oth	er Similar Fund	ds or Accounts Complete if
	the organization answered 'Yes' to	o 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 funds are the organization's property, subject to	or advisors in writing that the a organization's exclusive	assets held in donc legal control?	or advised Yes No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for the impermissible private benefit??			may be
Par	t II Conservation Easements Comple	ete if the organization ar	swered 'Yes' to	
	Purpose(s) of conservation easements held by			0 1 01111 330, 1 dic 17, 11110 71
•	Preservation of land for public use (e.g., re			an historically important land area
	Protection of natural habitat	ereation or picasare)	Ħ	certified historic structure
	Preservation of open space			contined historic sudotars
2	Complete lines 2a-2d if the organization held a	qualified conservation contrib	ution in the form of	f a conservation easement on the last day
_	of the tax year			
				Held at the End of the Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easem	nents		2b
_	Number of conservation easements on a certification	ed historic structure included i	n (a)	2c
	Number of conservation easements included in	(c) acquired after 8/17/06		
	Number of conservation easements included in Number of conservation easements modified, to	` ' '	hed, or terminated	
d		` ' '	hed, or terminated	
d	Number of conservation easements modified, to	ransferred, released, extinguis		
d	Number of conservation easements modified, to year ▶	ransferred, released, extinguis servation easement is located arding the periodic monitoring	·	by the organization during the taxable
3 4	Number of conservation easements modified, to year Number of states where property subject to contract the organization have a written policy required.	ransferred, released, extinguis reservation easement is located arding the periodic monitoring olds?	, inspection, violati	by the organization during the taxable ions, and Yes No
3 4 5	Number of conservation easements modified, to year Number of states where property subject to corpose the organization have a written policy regenforcement of the conservation easement it has	ransferred, released, extinguisus isservation easement is located arding the periodic monitoring olds?	, inspection, violati	by the organization during the taxable ions, and Yes No year
3 4 5 6 7	Number of conservation easements modified, to year Number of states where property subject to conduct the organization have a written policy regenforcement of the conservation easement it has Staff or volunteer hours devoted to monitoring,	ransferred, released, extinguis iservation easement is located arding the periodic monitoring olds? inspecting, and enforcing easem specting, and enforcing easem	, inspection, violati ements during the ents during the year	by the organization during the taxable ions, and Yes No year ar \$
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3 4 5 6 7 8 9	Number of conservation easements modified, to year Number of states where property subject to compose the organization have a written policy regenforcement of the conservation easement it has staff or volunteer hours devoted to monitoring, Amount of expenses incurred in monitoring, instance to the conservation easement reported on 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reported, if applicable, the text of the footnote to conservation easements If the organization elected, as permitted under treasures, or other similar assets held for public	ransferred, released, extinguistics is a servation easement is located arding the periodic monitoring olds? Inspecting, and enforcing easements in the organization's financial stocking of Art, Historical wered 'Yes' to Form 990 SFAS 116, not to report in its c exhibition, education, or resets that describes these items SFAS 116, not to report in its	, inspection, violative ments during the tents during the year in its revenue and eatements that description. Part IV, line 8 revenue statement furtherance revenue statement	by the organization during the taxable from Yes No year ar S On Yes No expense statement, and balance sheet, and cribes the organization's accounting for Other Similar Assets and balance sheet works of art, historical e of public service, provide, in Part XIV, and balance sheet works of art, historical
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3 4 5 6 7 8 9	Number of conservation easements modified, to year Number of states where property subject to compose the organization have a written policy regenforcement of the conservation easement it has Staff or volunteer hours devoted to monitoring, Amount of expenses incurred in monitoring, instance of the conservation easement reported on 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reported on include, if applicable, the text of the footnote to conservation easements If the organizations Maintaining Collections or other similar assets held for public the text of the footnote to its financial statement of the organization elected, as permitted under treasures, or other similar assets held for public amounts relating to these items:	ransferred, released, extinguistics is a servation easement is located arding the periodic monitoring olds? Inspecting, and enforcing easements in the organization's financial stocking of Art, Historical wered 'Yes' to Form 990 SFAS 116, not to report in its c exhibition, education, or resets that describes these items SFAS 116, not to report in its c exhibition, education, or resets that describes these items	, inspection, violative ments during the tents during the year in its revenue and eatements that description. Part IV, line 8 revenue statement furtherance revenue statement	by the organization during the taxable from Yes No year ar S On Yes No expense statement, and balance sheet, and cribes the organization's accounting for Other Similar Assets and balance sheet works of art, historical e of public service, provide, in Part XIV, and balance sheet works of art, historical
3 4 5 6 7 8 9	Number of conservation easements modified, to year Number of states where property subject to conduct the organization have a written policy regenforcement of the conservation easement it he Staff or volunteer hours devoted to monitoring, Amount of expenses incurred in monitoring, insuppose each conservation easement reported on 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reported include, if applicable, the text of the footnote to conservation easements It III Organizations Maintaining Collections or other similar assets held for public the text of the footnote to its financial statement of the organization elected, as permitted under treasures, or other similar assets held for public the text of the footnote to its financial statement of the organization elected, as permitted under treasures, or other similar assets held for public amounts relating to these items: (i) Revenues included in Form 990, Part VIII, I	ransferred, released, extinguistics is a servation easement is located arding the periodic monitoring olds? Inspecting, and enforcing easements in the conservation easements in the organization's financial stocking of Art, Historical wered 'Yes' to Form 990 SFAS 116, not to report in its cexhibition, education, or resets that describes these items SFAS 116, not to report in its cexhibition, education, or resets that describes these items of the sexhibition, education, or reset in the sexhibition, education, or other the sexhibition is the sexhibition, education, or reset in the sexhibition is the sexhibition, education, or reset in the sexhibition in the	, inspection, violative ments during the tents during the year quirements of section its revenue and eatements that description. Part IV, line 8 revenue statement earch in furtherance revenue statement earch in furtherance revenue statement earch in furtherance.	by the organization during the taxable from Yes No year ar Yes No Yes No year Ar On Yes No expense statement, and balance sheet, and cribes the organization's accounting for Other Similar Assets 3. and balance sheet works of art, historical e of public service, provide, in Part XIV, and balance sheet works of art, historical e of public service, provide the following \$\frac{\sigma}{\sigma}\$ \$\frac
3 4 5 6 7 8 9 Par	Number of conservation easements modified, to year Number of states where property subject to compose the organization have a written policy regenforcement of the conservation easement it has Staff or volunteer hours devoted to monitoring, Amount of expenses incurred in monitoring, inspection of the conservation easement reported on 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reported on include, if applicable, the text of the footnote to conservation easements. If the organizations Maintaining Collection Complete if the organization answer treasures, or other similar assets held for public the text of the footnote to its financial statement of the organization elected, as permitted under treasures, or other similar assets held for public amounts relating to these items: (i) Revenues included in Form 990, Part VIII, I (ii) Assets included in Form 990, Part X If the organization received or held works of articles.	ransferred, released, extinguistic is a servation easement is located arding the periodic monitoring olds? Inspecting, and enforcing easements in the organization's financial state of the companion of the property of the region of the companion of the organization o	, inspection, violative ments during the tents during the year quirements of section its revenue and eatements that description. Part IV, line 8 revenue statement earch in furtherance revenue statement earch in furtherance revenue statement earch in furtherance.	by the organization during the taxable from Yes No expense statement, and balance sheet, and cribes the organization's accounting for Other Similar Assets 3. and balance sheet works of art, historical e of public service, provide, in Part XIV, and balance sheet works of art, historical e of public service, provide the following \$ \circ \frac{1}{5} = \frac{1}

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2008 HUMAN	RESOURCE DE	VELOPMENT COUNCIL (OF DISTRICT IX, INC.	81-035	0886	Page 2
Part III Organizations Mainta	ining Colle	ctions of Art, Hist	orical Treasures, c	or Other Similar Ass	sets (contin	ued)
3 Using the organization's accession that apply)	on and other re			gnificant use of its collec	ction items (ch	eck all
a. Public exhibition		d Loan	or exchange programs			
b Scholarly research		e 📙 Other	<u> </u>			
c Preservation for future gener	rations					
4 Provide a description of the orga Part XIV		,	,		: in	
5 During the year, did the organiza assets to be sold to raise funds r	ition solicit or reather than to b	eceive donations of art e maintained as part o	, historical treasures, o if the organization's coll	r other similar ection?	Yes	No
Part IV Trust, Escrow and Cu IV, line 9, or reported	ustodial Arr an amount	angements Comp on Form 990, Par	lete if organization t X, line 21.	answered 'Yes' to	Form 990, F	² art
1a Is the organization an agent, trus included on Form 990, Part X?	stee, custodian	, or other intermediary	for contributions or other	er assets not	Yes	No
b If 'Yes,' explain the arrangement	ın Part XIV an	d complete the following	ng table [.]			
					Amount	
c Beginning balance				1 c		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance				1 f		
2a Did the organization include an a	mount on Forn	n 990, Part X, line 21?			Yes	No
b If 'Yes,' explain the arrangement	ın Part XIV				_	
Part V Endowment Funds Co	mplete if or	ganızatıon answer	ed 'Yes' to Form 9	90, Part IV, line 10.		
	(a) Current y	rear (b) Prior yea	r (c) Two years bad	ck (d) Three years back	(e) Four yea	rs back
1 a Beginning of year balance	, , , , , , ,					
b Contributions						
c Investment earnings or losses					1	
d Grants or scholarships						
Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage	of the year er	nd balance held as:				
a Board designated or quasi-endow	-	8				
b Permanent endowment ►						
c Term endowment						
3a Are there endowment funds not in organization by:	n the possession	on of the organization t	hat are held and admın	istered for the	Yes	No
(i) unrelated organizations					3a(i)	<u></u>
(ii) related organizations					3a(iı)	
b If 'Yes' to 3a(II), are the related o	rganizations lis	sted as required on Sch	nedule R?		3b	
4 Describe in Part XIV the intended	uses of the or	ganization's endowmei	nt funds			
Part VI Investments—Land, B	uildings, ar	nd Equipment. See	e Form 990, Part X	(, line 10.		
Description of investment		(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book V	alue
1 a Land			1,204,194.		1,204	,194.
b Buildings			3,660,107.	1,080,601.	2,579	,506.
c Leasehold improvements						
d Equipment	Γ		1,850,313.	819,289.	1,031	,024.
e Other						
otal. Add lines 1a-1e (Column (d) sho	ould equal Form	990, Part X, column (B), line 10(c))	•	4,814	,724.
BAA				Scher	dule D (Form 99	

	D (Form 990) 2008 HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRIC			-03508	86	Page 4
Part X		Financial S	tatements			
	tal-revenue (Form 990, Part VIII,column (A), line 12)				9,91	3,118.
2 To	tal expenses (Form 990, Part IX, column (A), line 25)				8,48	5,296.
3 Ex	cess or (deficit) for the year Subtract line 2 from line 1				1,42	7,822.
4 Ne	t unrealized gains (losses) on investments			L_		
5 Do	nated services and use of facilities					
6 In	estment expenses					
7 Pr	or period adjustments					
8 Ot	ner (Describe in Part XIV)					
9 To	al adjustments (net) Add lines 4-8					
	cess or (deficit) for the year per financial statements. Combine lines 3 and 9				1,42	7,822.
	Reconciliation of Revenue per Audited Financial Statemer	nts With Re	venue per Re	eturn		
	al revenue, gains, and other support per audited financial statements			1	10,464	1,153.
	iounts included on line 1 but not on Form 990, Part VIII, line 12					
	t unrealized gains on investments	2 a				
	nated services and use of facilities	2b				
	coveries of prior year grants	2c		.]		
	ner (Describe in Part XIV)	2d	551,035.			
	d lines 2a through 2d	[2 e	551	1,035.
	otract line 2e from line 1			3		
		1 1		3	9,913	3,118.
	ounts included on Form 990, Part VIII, line 12, but not on line 1:] 4-				
	estments expenses not included on Form 990, Part VIII, line 7b	4a				
	ner (Describe in Part XIV)	4b	·			
	filmes 4a and 4b			4c		
	al revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	VACAL E		5	9,913	3,118.
	II Reconciliation of Expenses per Audited Financial Statement	ents with E	xpenses per		0.004	
	al expenses and losses per audited financial statements			1	8,994	926.
	ounts included on line 1 but not on Form 990, Part IX, line 25.	1 - 1				
	nated services and use of facilities	2a				
	or year adjustments	2 b				
c Lo	ses reported on Form 990, Part IX, line 25	2 c				
	er (Describe in Part XIV)	2 d	509,630.			
e Ad	d lines 2a through 2d			2e	<u>509</u>	<u>,630.</u>
3 Su	otract line 2e from line 1		į	3	8,485	<u>,296.</u>
4 An	ounts included on Form 990, Part IX, line 25, but not on line 1:					
a Inv	estments expenses not included on Form 990, Part VIII, line 7b	4a				
b Oti	er (Describe in Part XIV)	4 b				
c Ad	i lines 4a and 4b			4 c		
5 To	al expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18)			5	8,485	,296.
Part X	V Supplemental Information					
Ine 4, P	e this part to provide the descriptions required for Part II, lines 3, 5, and 9, Parart X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b I Line 2d SUBSIDIARY ELIMINATION II Line 2d SUBSIDIARY ELIMINATION	t III, lines 1a a	and 4, Part IV, IIr	nes 1b and	d 2b; Part	V,
		· ·				
BAA	TEEA3304 12/23/08			Schedule	D (Form 9	90) 2008

BAA

Schedule D	(Form 990) 2008	HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC. Information (continued)	81-0350886	Page
Part XIV	Supplemental	Information (continued)	· · · · · · · · · · · · · · · · · · ·	
•				
			-	
-				
		·		
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-		·		
_	-			
	-			
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	-			
- -				

TEEA3305 07/24/08

Schedule D (Form 990) 2008

BAA

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S. ► Complete if the organization answered 'Yes,' on Form 990, Part IV, lines 21 or 22.

► Attatch to Form 990.

	∞
	O
	0
	N
l	

OMB No 1545-0047

Open to Public Inspection Employer identification number

81-0350886

% □

X Yes

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? INC HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, General Information on Grants and Assistance Partl

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV, and Schedule 1.1 (Form 990) if additional chare is needed. 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part IV and Schedule I-1 (Form 990) if additional space is needed	Form 990) if add	tional space is r	Schedule I-1 (Form 990) if additional space is needed				
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Montana Independent Livin 34 N LAST CHANCE GULCH #5 HELENA MT 59601	81-0400479	501(c)3	13,444.				Senior Transpo
2 Enter total number of section 501(c)(3) and government organizations3 Enter total number of other organizations	3) and government or ons	ganizations		1.		A A	

Schedule I (Form 990) 2008

TEEA3901 12/19/08

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Page 2 Schedule I (Form 990) 2008 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. (f) Description of non-cash assistance Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. 81-0350886 (e) Method of valuation (book, FMV, appraisal, other) THE AGENCY RECEIVING THE SUB GRANT MUST GIVE DETAILED REPORTS ON THE USE OF FUNDING PROVIDED ON A QUARTERLY OR ANNUAL BASIS. HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC. (d) Amount of non-cash assistance (c) Amount of cash grant (a) Type of grant or assistance Schedule I (Form 990) 2008 Pt_I_Line_2. Pt_I_Line_2 Part III BAA

SCHEDULE M (Form 990)

Non-Cash Contributions

► To be completed by organizations that answered 'Yes' on Form 990, Part IV, lines 29 or 30.

Open to Public Inspection

Department of the Treasury Internat Revenue Service Name of the organization

► Attach to Form 990. Inspe

HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC.

81-0350886

OMB No 1545 0047

2008

Part I Types of Property								
		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Met	hod of a	d) determir nues	ning
1	Art—Works of art							,
2	Art—Historical treasures							
3	Art-Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles						 -	
7	Boats and planes			·				_
8	Intellectual property		<u></u> .					
9	Securities—Publicly traded							
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests							
12								
13								
14								
15	Real estate-Residential							
16	Real estate—Commercial							
17								
18	Collectibles							
19	Food inventory X 750,000 2,021,274.							
20								
21								
22	· · · · · · · · · · · · · · · · · · ·							
23								
24	Archeological artifacts							
25	Other ▶ ()							
26	Other ► ()							
27	Other ► ()					-		-
28	Other ► (
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the							
	organization completed Form 8283, Part IV, Donee Acknowledgement						 _	
							Yes	<u>No</u>
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must								{
hold for at least three years from the date of the initial contribution, and which is not required to be used for ex					xempt			J
	purposes for the entire holding period?					30 a		X
	b If 'Yes,' describe the arrangement in Part II							
31	Does the organization have a gift acceptance police	y that require	s the review of any nor	n-standard contributions	5 ⁷	31	X	
32 a	2a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?					32a		X
b	If 'Yes,' describe in Part II							1
33	3 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II							ļ

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2008

Schedule M (Form 990) 2008 HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC. 81-035	0886 Page 2
Part II Supplemental Information. Complete this part to provide the information required by Part I and 33. Also complete this part for any additional information	, lines 30b, 32b,
and 33. Also complete this part for any additional information	
	

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► 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.

Name of the organization	Employer identification number					
HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC. 81-0350886						
Pt_VI-A, Line 10 A DRAFT COPY OF THE FORM 990 IS PROVIDED TO THE MEMBERS OF						
THE BOARD OF DIRECTORS FOR REVIEW A	AND COMMENT. THE FISCAL					
OFFICER AND FINANCE COMMITTEE REVIE	EWS THE FORM 990 IN DEPTH					
PRIOR TO FINALIZING THE FORM 990 TA	AX_RETURN.					
Pt_VI-B, Line 12c ANNUALLY THE AGENCY REVIEWS ITS CONFLICT OF INTEREST POLICY						
WITH THE BOARD OF DIRECTORS. BOARD	D_MEMBERS_ARE_REQUIRED					
TO DISCLOSE IN WRITING ANY KNOWN CO	ONFLICTS. SHOULD AN					
EVENT_OCCUR_IN_WHICH_A_BOARD_MEMBER	R_BECOMES_AWARE_OF_A_CONFLICT					
OF INTEREST, THE MEMBER IS REQUIRED	O_TO_DISCLOSE_IT_IMMEDIATELY					
AND NO LONGER PARTICIPATE IN FURTHE	ER_DISCUSSION_ON_THE_MATTER					
CREATING THE CONFLICT.						
Pt_VI-B, Line 15 THE BOARD OF DIRECTORS ANNUALLY EVA	ALUATES THE CHIEF EXECTIVE					
OFFICER. BASED ON PERFORMANCE AND	COMPARISON OF WAGE RATES					
FOR SIMILAR POSITIONS IN THE GEOGRA	APHIC_AREA, A RECOMMENDATION					
IS MADE REGARDING COMPENSATION ANNU	JALLY.					
Pt_VI-C, Line 19 THE AGENCY'S ANNUAL AUDIT REPORT IS	S_AVAILABLE ON THE AGENCY'S					
WEBSITE. POLICIES AND CONFLICT OF INTEREST POLICIES ARE AVAILABLE UPON REQUEST AT THE AGENCY.						
				Pt_XI, Line_2cTHE_BOARD_OF_DIRECTORS_ELECTS_AN_AU	UDIT_COMMITTEE_ANNUALLY	
TO SELECT, OVERSEE AND COMMUICATE W	WITH THE AUDITORS AND AUDIT PROCESS.					
Part III Line 4 Housing:						
HRDC Housing programs work to ensur	re that every member of					
our community can afford to have a	place_to_call_home,					
whether it is a rental or a first t	ime home ownership.					

Management provides access to guality, affordable single

Helena bringing comfortable housing within reach of people

who are low-income, elderly, or disabled. Resource Property

family units (3), transitional housing units (2), mentally

Schedule O (Form 990)	2008		Page :
Name of the organization HUMAN RESOURCE	DEVELOPMENT COUNCIL OF DISTRICT IX, INC.	Employer identification number 81-0350886	
	families realize the American Dream of owning	their own home	
	The Road to Home down-payment assistance progr	am_provides_up	
	up to \$20,000 in down-payment assistance to el	igible	. - -
	households for the purchase of their first hom	e. The	. – – –
-	Program also offers a matched savings account	program_for	. -
-	first_time_homebuyers,_and_has_made_homeowners	hip_financing	
	possible_for_80_households_since_its_inception	<u>in_2003.</u>	.
	Homebuyer loans disbursed to date total \$1,551	,358. <u>Funding</u>	. – – – –
	for the Road to Home Program is provided by th	e Montana Dept	. -
	of Commerce, Gallatin County, the City of Boze	man, and the	
	U.S. Department of Housing and Urban Developme	nt	
			. – – –
	Energy Assistance:		· -
	HRDC offers several programs to help low-incom	e_individuals	
	and families combat the high cost of heating t	heir homes	
	during Montana's cold winters. LIEAP and Energ	y_Share	
	provide eligible households with financial ass	istance_to	
	help_with_heating_costs.		
	·		
	LIEAP (Expenses \$502,999 including Grants of \$	0)	
	(Revenues \$502,999)	. -	-
	LIEAP (Low Income Energy Assistance Program) i	s_a_federally	-
	funded program that helps by supplementing a f	amilies' cost	- -
	to heat their home during the cold Montana win	ter_months.	- -
	LIEAP also provides emergency funds to replace	and repair	- -
	furnaces and hot water heaters. The amount of	funding	- -
-	assistance_each_LIEAP_household_receives_is_de	termined by	

Name of the organization

Rehabilitation Program worked with 18 households to retrofit

their homes, ensuring that some of our elderly and disabled

Schedule O (Form 990) 2008	<u> </u>		age :
Name of the organization HUMAN RESOURCE DE	VELOPMENT COUNCIL OF DISTRICT IX, INC.	Employer identification number 81-0350886	
	receiving assistance are an average age of 73	years_with_a	
	monthly income of less than \$1,000. An estima	ted_additional	
	500 seniors are eligible for the program withi	n_our_service	
	area. The Food Bank is pursuing alternative f	unding sources	
	in order to expand the program to reach this m	ost_vulnerable	
	population.		
	Summer Lunch Program (Expenses \$17,695 includi	ng Grants of	
	\$0) (Revenues \$19,738)		
	The Gallatin Valley Food Bank's Summer Lunch P	rogram	
	provides free, nutritionally balanced lunch time	me_meals_to	
	area children throughout the summer months at	five locations	- -
	During the summer of 2009 an average of 120 ch	ildren per day	
	received meals with a total of 6,732 meals being	ng_provided.	
	The Program helps families with limited income	s_adjust_to	
	the loss of the Free and Reduced Meal Programs	in_school	
	during the summer months, while maintaining a	nutritional	
	balance for the child. Funding for this progra	am_is_provided	
	by the State Office of Public Instruction Summe	er_Food	
	Service Program and a small local grant.		- -
			- -
	Healthy KidsPack Program (Expenses \$21,121 inc.	luding Grants	- -
	of \$0)(Revenues \$21,121)		- -
	The Gallatin Valley Food Bank's Healthy KidsPac	ck_Program	- -
	provides free, nutritionally balanced weekend I	meals and	- -
	snacks to area children for weekends and breaks	s_throughout	- -
	the school year. In 2009, seven elementary sch	hools in	
	Bozeman, Belgrade, Three Forks, Manhattan, West	t_Yellowstone,	

Schedule O (Form 990) 2008	Page :
Name of the organization	Employer identification number 81-0350886
HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC.	101-0330000
and Willow Creek were served through this pr	cogram.
At present, approximately 435 kids are being	g_provided_with
access to sufficient nutritious foods each v	week in the form
of snack packs they can take home and prepare	ce_themselves
over the weekend. The Program is designed t	o assist in
addressing the occurrence and affects of hur	nger_and
malnutrition in our area school systems.	
Emergency Food Satellite (Expenses \$119,404	including Grants
of \$0) (Revenues \$140,480)	
The Headwaters Area Food Bank offers the sam	ne Emergency Food
Food Assistance Program as the Gallatin Vall	ey Food Bank,
serving the west end of the valley. Open si	nce March 2004,
the Headwaters Area Food Bank provides emerg	ency_food
assistance to more than 191 households annua	<u>lly,</u>
distributing 998 emergency food boxes during	_2009. <u>The</u>
Headwaters Area Food Bank operates as a sate	llite of the
Gallatin_Valley_Food_Bank	
Emergency Food Satellite (Expenses & Revenue	s_absorbed_in
Emergency Food Services through Gallatin Val	ley Food Bank)
Satellite emergency food services are also o	ffered_weekly
at the Living Waters United Methodist Church	_in_Belgrade,
providing greater access to Belgrade residen	ts. Perishable
food items and canned goods area available.	This service
has provided more than 364 households with e	mergency food
supplies and an average of 53 households wee	klv with

Schedule 0 (Form 990) 2008		Page
Name of the organization HIIMAN RESOURCE DEVELOPMENT	F COUNCIL OF DISTRICT IX, INC.	Employer identification number 81-0350886
suppleme	ental_groceries_in_the_form_of_rescued_	perishable
foods_si	nce its startup in July 2008.	
Transpor	tation:	
		: 60)
	(Expenses \$359,537 including Grants of	- 301
(Revenue	<u>s_\$342,696)</u>	
Galavan,	HRDC's senior transportation program	performed its
first_ri	de in 1973 with the goal of providing	safe,
affordab	le door-to-door shuttle service. Thei	r mission was,
and rema	ins today, that the lack of affordable	
	tation not become a barrier to individ	
independ	ence. Galavan helps people get everyw	here from the
doctor's	office to the Supermarket, and safely	back home.
Services	are available 6 days per week for are	a seniors and
, disabled	_persons and the route has expanded to	include
Belgrade	, Manhattan, and Three Forks on a week	lv basis.
	provided 22,154 rides in 2009, with 45	
receiving	g_regular_transportationGalavan_is_	currently
funded by	y_the_City_of_Bozeman,_Gallatin_County	, United Way,
Area_IV	Agency on Aging, the City of Belgrade,	rider and
private	donations.	
	ne (Expenses \$792,464 including Grants	
(Revenue	s_\$800,455)	
On Augus	t 21, 2006 Bozeman's new transit syste	m, Streamline,
hit the	road with 4 routes. Streamline is a y	ear_round
public t	ransportation system providing fare fr	ee_service
througho	ut the Gallatin Valley. This service	is a result of

Schedule 0 (Form 990) 2008	<u>2</u>
Name of the organization HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC. Employer identification number 81-0350886	
a collaboration of Montana State University's student	_
association (ASMSU), United Way, The City of Bozeman, The	
City of Belgrade and Gallatin County. Now customers of the	_
HRDC, both elderly and low income, have transportation	_
options in our community. Streamline currently operates a	_
Livingston Service, Late Night Service, Bridger Bowl Service	_
Reach Service, and Public Transportation Service.	_
Streamline is funded by the Federal Transit Administration,	_
HRDC, ASMSU, MSU, MDT, City & County funds, United Way,	-
Reach, Inc., Area IV Agency on Aging, and DUI Task Force.	-
Streamline is currently averaging 835 rides per day.	-
Streamline is proud to announce an estimated carbon savings	_
of 200 tons, or 400,000 pounds per year (stemming from high	-
ridership and long distance routes). "Every ride Streamline	_
provides benefits the community by reducing congestion,	_
improving_air_quality, and providing_safe_and affordable	_
transportation." - Jim Lynch, MDT Director.	_
	_
Early Childhood Development:	-
Head Start (Expenses \$1,262,811 including Grants of \$0)	-
(Revenues \$1,259,361 and In Kind of \$296,008)	-
The HRDC Head Start Program provides for the healthy	-
development of children and the strengthening of families	-
through education, health, nutrition, mental health, and	. .
disability services. 168 families with children between the	-
ages of 3 and 5 participate in Head Start each year. This	-

early childhood program is of no charge to gualified

Schedule O (Form 990) 2	008	Page 2
Name of the organization HUMAN, RESOURCE	DEVELOPMENT COUNCIL OF DISTRICT IX, INC.	Employer identification number 81-0350886
	families_and_offers_the_children_a_multitude_o	f_screening
	and_educational_opportunities_including_family	services,
	parenting information, family wellness, and ot	her
	preventative-based educational services. The P	rogram offers
	classroom style experiences for kids with a wi	de_range_of
	developmental needs and strives to empower bot	h children and
	parents with the ability to enrich their own l	ives_as
	individuals and families, and in turn to enric	h_our
	community_now_and_in_the_future. Head_Start_c	lassrooms are
	in_Bozeman, Belgrade, Livingston, and Gallatin	Gateway.
	Funding for the Head Start Program is provided	primarily_by
	federal_dollars	
	Youth Development:	
	Youth Development (Expenses \$141,145 including	<u>Grants_of_\$0</u>)
	(Revenues \$141,065)	
	HRDC's Youth Development Program provides oppos	rtunities,
	focused_direction, and inspiration_for_achiever	ment to
	_prepare youth to live up to their full potention	al_and_drive
	their own path to success. The following serv	ices are
	available_throughout_Gallatin,_Park,_and_Meaghe	er_counties:
	career_exploration, academic_or_GED_completion	,_Basic
	_ Employment Skills Training, employment placement	nt
	_opportunities, interview techniques, computer :	skills, work
	experience_programs,_goal_setting,_personal_fin	nances_and
	budgeting, guidance and advocacy, and a support	base to
	empower youth to meet the challenges of the tra	ensition from

Schedule O (Form 990) 2008		Page 2
Name of the organization HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTR	ICT IX, INC.	Employer identification number 81-0350886
adolescence into young adu	lthood for a lifetime	e_of
opportunities. Of the 51	youth (Workforce Inve	estment Act
served 31, ARRA Workforce	served 5, Homeless Yo	outh Program
served 11, Youth Probation	_served 4) provided w	with services,
64% were placed into emplo	yment or education; 6	0%_attained
a_degree_or_certificate; 5	0% improved their lit	eracy_and
numeracy; 95% of enrolled	youth completed the E	Basic
Employment Skills Training	; 90% of homeless yo	outh secured
permanent_housing; 88%_wer	<u>e placed into subsid</u> i	.zed
employment and trained		
Volunteer_Opportunities:		
	cluding Grants_of_\$0)	
(Revenues_\$148,572)		
RSVP, the Retired and Seni	or Volunteer Program	provides
meaningful_volunteer_oppor	tunities for individu	als age 55
and older to meet communit	y needs. Libraries,	hospitals,
schools, and numerous oth	<u>er vital institutions</u>	benefit from
the experience, expertise,	and passion that eac	h_volunteer
provides to tutor youth, d	eliver prepared meals	to homebound
individuals, build homes f	or those in need, and	so very much
more; and volunteers find	great satisfaction in	knowing that
they are making a positive	impact on their comm	unity. Last
year, 724 RSVP volunteers	contributed over 90,2	77 hours to
130 non-profit, government	and healthcare organ	izations in
Gallatin_and_Park_Counties	. RSVP is funded by	the
Corporation for National S	ervice United Way G	allatin

Schedule O (Form 990) 2008	Page Page
Name of the organization HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC.	Employer identification number 81-0350886
County, Park County, Area IV Agency on Agi	ing, and private
contributions.	
In Home Services/Home Health:	
Homemaker Services (Expenses \$76,197 inclu	iding Grants of \$0)
(Revenues_\$78,243)	
HRDC's Homemaker Program coordinates in-ho	ome_care_for_our
community's elderly and disabled. Not onl	y_does_the_program
ensure that the services patients receive	are appropriate
and high-quality, it also encourages them	to_have_an_active
voice in their own care. The Program assi	sts limited-income
seniors_with_household_chores,_errands,_sh	nopping, bathing,
and other personal care needs in order to	improve and
maintain their quality of life. Program p	participants must
be age 60 or older, with preference given	to_those_age_75
and older, enabling the individual to live	e at home with
dignity. The program allows for early int	ervention and
preventing complications that would otherw	rise lead to either
hospitalization or loss of independence th	nrough nursing home
placement. Current funding levels allow f	for in home care
services to only 29 seniors, area demograp	phics show that
more than 700 seniors are eligible for the	service in
Gallatin County. The Homemaker Program is	funded_in_part_by
Area IV Agency on Aging, United Way, and t	he Gilhousen
Family Foundation.	
Community Development:	
Community First Fund (Expenses \$11,801 inc	cluding Grants of

Schedule O (Form 990) 2008			Page
Name of the organization HUMAN RESOURCE DEVELOPMENT COUNCIL OF DIST	RICT IX, INC.	Employer identification number 81–0350886	
\$0) (Revenues \$5,669)			
HRDC's Community First F	and_works_to_create_job	s, promote	· -
business, and build affo	rdable housing designed	to support	
individuals and families	as they work to see th	eir own	
personal goals come to f	ruition. The fund prov	ides	
financial assistance to l	ooth individuals and fa	milies_in	
providing opportunities	for personal and profes	sional	
development. The current	Community First Fund	loan balances	
total \$90,700; provided :	n the form of financia	l assistance	
to local establishments.			
Community Development (E:	penses \$258,288 includ	ing Grants of	
\$1,338)(Revenues \$258,288	3)		
HRDC's Community Developm		ration with	
area residents and commun			
physical and social asset		 	
sustain healthy communit:			
affordable housing, the o			
and the development of so			
support families and ind:			
projects during 2009 inc			
Bozeman's affordable hous			
partnership with the comm			
assess the community's at			
development needs.			
Note: The above expenses			
of the HRDC wholly owned			

Schedule O (Form 990) 2008	Page 2
Name of the organization	Employer identification number
HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC.	81-0350886
. eliminated for totals for the Form 990 tax retu	ırns.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

and essential services such as health and nutrition, emergency services, affordable housing, Head Start, youth development, volunteer opportunities, transportation, energy assistance and conservation and community devel

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)

		ose achievements for each of the organization's other program
services	. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to
		ts and allocations to others, the total expenses, and revenue, if any, for
•	ogram service repo	· · · · · · · · · · · · · · · · · · ·
•	•	
Code:	Description:	ENERGY PROGRAMS - SEE SCHEDULE O FOR COMPLETE DESCRIPTION.
Expenses	1,162,007.	
Grants Of	0.	
Revenue	142,610.	
Code:	Description.	HOUSING - SEE SCHEDULE O FOR COMPLETE DESCRIPTION.
Expenses	991,783.	
Grants Of	0.	
Revenue	584,936.	
Code	Description:	YOUTH DEVELOPMENT - SEE SCHEDULE O FOR COMPLETE DESCRIPTION.
Expenses	170,975.	
Grants Of	0.	
Revenue	0.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2008

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC.

Part I Identification of Disregarded Entities

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

Employer identification number 81-0350886

(A) Name, address, and ElN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling rentity
Part II Identification of Related Tax-Exempt Organizations	ons				
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(f) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
RLINTON APARTMENTS, II	LOW INCOME	E			
THE HOME CORPORATION 81-0511380	LOW THOOME	T.W	50103	T 741. TT	N/A
TRACY, BOZE	HOUSING	MT	501C2		N/A
ERWOOD INN APARTMENTS, IN	LOW INCOME				
32 SOUTH TRACY, BOZEMAN MT 59/15 MILES RHITDING INC 81-0524709	HOUSING LOW INCOME	MT	501C3	11	N/A
32 SOUTH TRACY, BOZEMAN MT 59715	HOUSING	M	501C3	r-i r-i	A/N
SUMMIT APARTMENTS, INC. 81-0542899	LOW INCOME				
MT 59715	HOUSING	TM	50103	11	N/A
BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	structions for Form 990.	3L	TEEA5001 12/23/08	Schedu	Schedule R (Form 990) (2008)

Schedule R (Form 990) 2008 HUMAN RESOURCE DEVELOPMENT COUNCIL OF DISTRICT IX, INC. Part III Identification of Related Organizations Taxable as a Partnership

p @c 1		
(J) General or managing partner?		
Code V-UBI G amount in Box n 20 of Schedule F Fr. K-1065)	<u> </u>	
20 30 7		
(H) Disproportionate allocations?		
(G) Share of end-of-year assets	312,949.	
(F) (G) Share of total income Share of end-of-year assets	. 7 -	
(E) Predominant income (related, investment, unrelated)	INCRELATED	
(C) (D) Legal domicile controlling entity (state or foreign country)	MILES BLDG INC	
(C) Legal domicile (state or foreign	TM	
(B) Primary Activity	LOW INCOME HOUSING TAX CREDIT PROJ MT	
(A) Name, address, and EIN of related organization	MILES LIMITED PARTNERSHIP 81-0538771 32 SOUTH TRACY BOZEMAN, MT TAX CREDIT PROJ	

Trust
ō
orporation
a C
as
Taxable
Organizations 1
f Related (
Identification of
Part IV

(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign	(D) Direct controlling entity	Type of entity (C corp, S corp,	(B) (C) (D) (D) (E) (D) (D) (C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	(G) Share of end-of-year assets	(H) Percentage ownership
		country)		or trust)			-
		-					

Schedule R (Form 990) (2008)

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ganizations	
d Organ	
Related	
With	
Transactions	
Part V	

Note Complete line 1 if any entity is listed in Parts II, III, or IV			Yes	2
1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV				
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		×
b Gift, grant, or capital contribution to other organization(s)		1 b		×
c Gift, grant, or capital contribution from other organization(s)		10		×
d Loans or loan guarantees to or for other organization(s)		1 g		×
e Loans or loan guarantees by other organization(s)		-Je	_	×
				֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֡֓֓֡֓֡
f Sale of assets to other organization(s)		-		×
g Purchase of assets from other organization(s)		19		×
h Exchange of assets		4		×
i Lease of facilities, equipment, or other assets to other organization(s)		: =		×
			-	
j Lease of facilities, equipment, or other assets from other organization(s)		1j		×
k Performance of services or membership or fundraising solicitations for other organization(s)		1		×
l Performance of services or membership or fundraising solicitations by other organization(s)		=	_	×
m Sharing of facilities, equipment, mailing lists, or other assets		E		×
n Sharing of paid employees		ב		\times
			İ	
o Reimbursement paid to other organization for expenses		0		×
p Reimbursement paid by other organization for expenses		d d		×
		-	1	į
q Other transfer of cash or property to other organization(s)		19		×
		1-		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	transaction threshold	ds		
(A) Name of other organization	(B) Transaction type (a-r)	(C) Amount involved) nvolved	_
(1) NONE				6
(2)			ļ	
		i		
(4)				
(5)				
(9)	•			
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81-0350886

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 asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships

(B) (C) (C) (A) Name, address, and EIN of entity (B) Name, address, and EIN of entity (State or Foreign 501(c) (Country) (organiza organiza	(B) Primary activity	(C) Legal Domicile (State or Foreign Country)	Are all partners section 501(c)(3) organizations?	(E) Share of end-of-year assets	(F) Disproportionate allocations?	(G) Code V-UBI amount in Box 20 of Schedule K-1 Form (1065)	(H) General or managing partner?
			Yes No		Yes No	(2001)	Yes No
			-				
					<u></u>		
							-
							-
					_		
			_				
					_		
ВАА		TEEA5004 01/21/09				Schedule R (Form 990) (2008)	m 990) (2008