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EXTENSION GRANTED TO FEBRUARY 15, 2010

Form 990 Return of Organization Exempt From Income Tax

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

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

Department of the Treasury Internal Revenue Service

OMB No 1545-0047

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning JUL 1, 2008 and ending JUN 30, 2009

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

Please use IRS label or print or type. See Specific Instructions

C Name of organization: WASHINGTON STATE CHILD CARE RESOURCE & REFERRAL NETWORK

Doing Business As:

Number and street (or P.O. box if mail is not delivered to street address): 1551 BROADWAY — Room/suite: 300

City or town, state or country, and ZIP + 4: TACOMA, WA 98402

D Employer identification number: 91-1427991

E Telephone number: (253)383-1735

G Gross receipts $: 6,260,782.

F Name and address of principal officer: ELIZABETH B. THOMPSON, 1551 BROADWAY, SUITE 300, TACOMA, WA 98402

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

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

J Website: ▶ WWW.CHILDCARENET.ORG

H(c) Group exemption number ▶

K Type of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1989 M State of legal domicile: WA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: STATEWIDE CHILD CARE RESOURCE AND REFERRAL ASSOCIATION

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its assets

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Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	11
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	11
	5 Total number of employees (Part V, line 2a)	5	16
	6 Total number of volunteers (estimate if necessary)	6	6
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.

		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	5,326,950.	6,237,052.
	9 Program service revenue (Part VIII, line 2g)	2,479.	5,965.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	39,026.	17,765.
	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)	5,368,455.	6,260,782.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	482,985.	495,469.
	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)	626,754.	830,983.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,770.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	3,753,892.	4,405,788.
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	4,863,631.	5,732,240.
	19 Revenue less expenses Subtract line 18 from line 12	504,824.	528,542.

		Beginning of Year	End of Year
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	2,424,576.	2,920,689.
	21 Total liabilities (Part X, line 26)	706,960.	674,531.
	22 Net assets or fund balances. Subtract line 21 from line 20	1,717,616.	2,246,158.

Part II Signature Block

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

Sign Here

▶ Signature of officer: Elizabeth B. Thompson — Date: 2/2/10

▶ ELIZABETH B. THOMPSON, EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ — Date 1/29/10 — Check if self-employed ▶ ☐ — Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ SMITH BUNDAY BERMAN BRITTON, P.S.
11808 NORTHUP WAY, SUITE 240
BELLEVUE, WA 98005-1959

EIN ▶

Phone no. ▶ (425)827-8255

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

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission.

TO SUPPORT FAMILIES AND CAREGIVERS, SHAPE POLICY, AND BUILD COMMUNITIES THAT PROMOTE THE LEARNING AND DEVELOPMENT OF CHILDREN AND YOUTH THROUGHOUT WASHINGTON STATE THROUGH A STRONG STATEWIDE NETWORK OF LOCAL CHILD CARE RESOURCE AND REFERRAL PROGRAMS.

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 ☒ 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 ☒ 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 expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code:) (Expenses $ 4,728,165. including grants of $) (Revenue $ 2,610.)

THE WASHINGTON STATE CHILD CARE RESOURCE & REFERRAL NETWORK IS AN ASSOCIATION OF 11 LOCAL MEMBER CHILD CARE RESOURCE AND REFERRAL (R&R) PROGRAMS HOUSED IN A VARIETY OF TYPES OF HOST ORGANIZATIONS. THE R&R NETWORK SUBCONTRACTS WITH THESE ORGANIZATIONS FOR PROVISION OF LOCAL R&R CORE SERVICES, WHICH INCLUDE BUT ARE NOT LIMITED TO, CHILD CARE CONSUMER EDUCATION AND REFERRALS, CAREGIVER TRAINING AND TECHNICAL ASSISTANCE, AND COMMUINITY CAPACITY-BUILDING. THE R&R NETWORK SERVES AS AN INFORMATION HUB FOR THE CHILD CARE AND EARLY LEARNING FIELD, LEADS AND CONTRIBUTES TO STATEWIDE POLICY AND ADVOCACY EFFORTS, HOSTS A CONSUMER EDUCATION HOTLINE FOR FAMILIES LOOKING FOR CHILD CARE, AND COLLECTS, COMPILES, ANALYZES AND DISSEMINATES CHILD CARE SUPPLY AND DEMAND DATA.

4b (Code:) (Expenses $ 722,701. including grants of $ 495,469.) (Revenue $ 3,355.)

WASHINGTON STATE CHILD CARE RESOURCE & REFERRAL NETWORK ("CCR&R) IS A STATEWIDE LEADER IN PROESSIONAL DEVELOPMENT FOR THE EARLY LEARNING AND AFTERSCHOOL WORKFORCE. IN OUR EFFORTS TO BUILD A PROFESSIONAL DEVELOPMENT CONTINUUM FOR LICENSED AND LICENSED-EXEMPT CAREGIVERS, THE CCR&R NETWORK PROVIDES VARIOUS TYPES OF SUPPORT FOR LOCAL CHILD CARE RESOURCE & REFERRAL STAFF, TRAINERS, COACHES, COMMUNITY-BASED TRAINING AND CREDIT-BEARING COURSEWORK. ONE OF OUR LARGEST PROGRAMS IS THE WASHINGTON SCHOLARSHIPS FOR CHILD CARE PROFESSIONALS PROGRAM WHICH IS A PROGRAM THAT HELPS EARLY CHILDHOOD PROFESSIONALS PAY FOR A COLLEGE EDUCATION IN EARLY CHILDHOOD EDUCATION THROUGH COMMUNITY AND TECHNICAL COLLEGES AND 4-YEAR COLLEGES AND UNIVERSITIES. THE PROGRAM ALSO HELPS PAY FOR CHILD DEVELOPMENT ASSOCIATES (C.D.A.) CREDENTIAL APPLICATION

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

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

4e Total program service expenses ▶ $ 5,450,866. *(Must equal Part IX, Line 25, column (B).)*

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	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 II*	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		X
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		X
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		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? *If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	X	
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	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? *If "Yes," complete Schedule F, Part I*	14b		X
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		X
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		X
17	Did the organization report more than $15,000 on Part IX, column (A), line 11e? *If "Yes," complete Schedule G, Part I*	17		X
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
19	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 1? *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 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? *If "Yes," complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b-24d and complete Schedule K. If "No", go to question 25*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? *If "Yes," complete Schedule L, Part I*	25b		X
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		X

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		X
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		X
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 sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
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		X
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

Part V Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S. Information Returns Enter -0- if not applicable	1a	15		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	X	
2a	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	16		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return. (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		3b		
4a	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		X
b	If "Yes," enter the name of the foreign country. ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		5c		
6a	Did the organization solicit any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than $75?		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g	X	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		7h	X	
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		
9	**Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter: N/A				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter: N/A				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b			

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

Section A. Governing Body and Management

			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O See instructions.			
1a	Enter the number of voting members of the governing body	1a 11		
b	Enter the number of voting members that are independent	1b 11		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	11		X

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
a	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization? Describe the process in Schedule O (see instructions)	15b		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ WA

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply

[X] Own website [ ] Another's website [X] Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

ELIZABETH B. THOMPSON - 253-383-1735
1551 BROADWAY #300, TACOMA, WA 98402

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

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

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

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

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

☐ Check this box if the organization did not compensate any officer, director, trustee, or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CATERINA TASSARA-VAUBEL BOARD MEMBER	2.00	X						0.	0.	0.
CHRISTINE ROSENQUIST BOARD SECRETARY	4.00	X						0.	0.	0.
ROBIN BOEHLER BOARD MEMBER	4.00	X						0.	0.	0.
MELINDA DE LANOY BOARD PRESIDENT	6.00	X						0.	0.	0.
JEAN F. KELLY BOARD MEMBER	2.00	X						0.	0.	0.
ELAINE B. VONROSENSTIEL BOARD MEMBER	4.00	X						0.	0.	0.
KATHY THAMM BOARD MEMBER	2.00	X						0.	0.	0.
WILANNE OLLILA-PERRY BOARD MEMBER	3.00	X						0.	0.	0.
LAYNE BARNDT BOARD MEMBER	2.00	X						0.	0.	0.
DEEANN PUFFERT BOARD VICE PRESIDENT	2.00	X						0.	0.	0.
JOHN THIELBAHR BOARD TREASURER	6.00	X						0.	0.	0.
TOM KELLY BOARD MEMBER	2.00	X						0.	0.	0.
DAN BAUMGARTEN BOARD MEMBER	2.00	X						0.	0.	0.
DEBBIE HAM BOARD MEMBER	2.00	X						0.	0.	0.
ELIZABETH B. THOMPSON EXECUTIVE DIRECTOR	40.00			X				94,868.	0.	6,000.
WAYNE GLENN FINANCE DIRECTOR	40.00			X				68,589.	0.	6,000.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Total ▶								163,457.	0.	12,000.

2 Total number of individuals (including those in 1a) who received more than $100,000 in reportable compensation from the organization ▶ 0

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
CHILD CARE RESOURCES, 1225 SOUTH WELLER, SUITE 300, SEATTLE, WA 98144	SUBCONTRACT FOR LOCAL CHILD CARE RES	816,933.
TACOMA/PIERCE COUNTY CHILD CARE RESOURCE & 1551 BROADWAY, STE 301, TACOMA, WA 98402	SUBCONTRACT FOR LOCAL CHILD CARE RES	332,693.
VOLUNTEERS OF AMERICA CCR&R PO BOX 839, EVERETT, WA 98206	SUBCONTRACT FOR LOCAL CHILD CARE RES	330,346.
COMMUNITY-MINDED ENTERPRISES 25 MAIN. SUITE 310, SPOKANE, WA 99201	SUBCONTRACT FOR LOCAL CHILD CARE RES	305,148.
EDUCATIONAL SERVICE DISTRICT #112 2500 NE 65TH AVE, VANCOUVER, WA 98661	SUBCONTRACT FOR LOCAL CHILD CARE RES	220,738.

2 Total number of independent contractors (including those in 1) who received more than $100,000 in compensation from the organization ▶ 12

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns 1a				
	b Membership dues 1b				
	c Fundraising events 1c				
	d Related organizations 1d				
	e Government grants (contributions) 1e 5190626.				
	f All other contributions, gifts, grants, and similar amounts not included above 1f 1046426.				
	g Noncash contributions included in lines 1a-1f $				
	h Total. Add lines 1a-1f ▶	6,237,052.			
Program Service Revenue		Business Code			
	2a EMPLOYER CONTRACTS	900099 5,965.	5,965.		
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f ▶	5,965.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶	17,765.			17,765.
	4 Income from investment of tax-exempt bond proceeds ▶				
	5 Royalties ▶				
		(i) Real / (ii) Personal			
	6a Gross Rents				
	b Less rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss) ▶				
		(i) Securities / (ii) Other			
	7a Gross amount from sales of assets other than inventory				
	b Less cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss) ▶				
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18 a				
	b Less direct expenses b				
	c Net income or (loss) from fundraising events ▶				
	9a Gross income from gaming activities. See Part IV, line 19 a				
	b Less direct expenses b				
	c Net income or (loss) from gaming activities ▶				
	10a Gross sales of inventory, less returns and allowances a				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory ▶				
	Miscellaneous Revenue	Business Code			
	11a				
	b				
	c				
	d All other revenue				
	e Total. Add lines 11a-11d ▶				
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e ▶	6,260,782.	5,965.	0.	17,765.

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 not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	495,469.	495,469.		
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	186,785.	77,968.	105,543.	3,274.
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	496,095.	448,164.	47,751.	180.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	18,323.	14,088.	4,175.	60.
9 Other employee benefits	65,174.	50,114.	14,846.	214.
10 Payroll taxes	64,606.	50,073.	14,237.	296.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	14,019.	9,254.	4,765.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	6,288.	6,288.		
12 Advertising and promotion				
13 Office expenses	66,189.	44,938.	21,169.	82.
14 Information technology	23,724.	4,165.	19,559.	
15 Royalties				
16 Occupancy	94,089.	65,956.	27,692.	441.
17 Travel	51,729.	43,698.	7,907.	124.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	19,807.	18,493.	1,314.	
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a CONTRACT/SUBCONTRACT SE	4,095,234.	4,095,234.		
b EMPLOYEE TRAINING/PROFE	23,694.	19,765.	3,929.	
c EVALUATION SERVICES	4,482.	4,482.		
d MEMBERSHIP DUES AND LIC	3,363.	585.	2,679.	99.
e OTHER MISCELLANEOUS	3,170.	2,132.	1,038.	
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	5,732,240.	5,450,866.	276,604.	4,770.
26 Joint Costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		100.	1	100.
	2	Savings and temporary cash investments		1,270,185.	2	1,539,117.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		1,112,649.	4	1,112,767.
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		15,973.	9	16,130.
	10a	Land, buildings, and equipment: cost basis	10a 268,966.			
	b	Less: accumulated depreciation. Complete Part VI of Schedule D	10b 258,983.	25,669.	10c	9,983.
	11	Investments - publicly traded securities			11	
	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		0.	15	242,592.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		2,424,576.	16	2,920,689.
Liabilities	17	Accounts payable and accrued expenses		662,482.	17	635,058.
	18	Grants payable			18	
	19	Deferred revenue			19	
	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, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable			24	
	25	Other liabilities. Complete Part X of Schedule D		44,478.	25	39,473.
	26	**Total liabilities.** Add lines 17 through 25		706,960.	26	674,531.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		1,147,052.	27	1,097,509.
	28	Temporarily restricted net assets		570,564.	28	1,148,649.
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		1,717,616.	33	2,246,158.
	34	Total liabilities and net assets/fund balances		2,424,576.	34	2,920,689.

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990: [ ] Cash [X] Accrual [ ] Other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X	
b	If "Yes," did the organization undergo the required audit or audits?	3b	X	

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

Name of the organization	Employer identification number
WASHINGTON STATE CHILD CARE RESOURCE & REFERRAL NETWORK	91-1427991

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 a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).** (Attach Schedule H)

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete the 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 to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		
	11g(i)		
(ii)	A family member of a person described in (i) above?		
	11g(ii)		
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?		
	11g(iii)		

h Provide the following information about the organizations the organization supports

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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 beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1528429.	1430660.	1335306.	5326950.	6237052.	15858397.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 - 3	1528429.	1430660.	1335306.	5326950.	6237052.	15858397.
5 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)						980,849.
6 **Public Support.** Subtract line 5 from line 4						14877548.

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	1528429.	1430660.	1335306.	5326950.	6237052.	15858397.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	11,823.	29,805.	50,522.	39,026.	17,765.	148,941.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support.** Add lines 7 through 10						16007338.

12 Gross receipts from related activities, etc. (see instructions)	12	24,676.

13 **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 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	92.94 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	80.84 %

16a **33 1/3% support test - 2008.** If the organization did not check the box on line 13, and 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 ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or $5,000						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2008** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2007** Schedule A, Part IV-A, line 27h	18	%

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

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

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

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

2008

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-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III

Name of organization	Employer identification number
WASHINGTON STATE CHILD CARE RESOURCE & REFERRAL NETWORK	91-1427991

Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.

See the instructions for Schedule C for details

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
2 Political expenditures . . . . . ▶ $ _____
3 Volunteer hours . . . . . _____

Part I-B To be completed by all organizations exempt under section 501(c)(3).

See the instructions for Schedule C for details.

1 Enter the amount of any excise tax incurred by the organization under section 4955 . . ▶ $ _____
2 Enter the amount of any excise 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
4a Was a correction made? . . . . . ☐ Yes ☐ No
b If "Yes," describe in Part IV

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).

See the instructions for Schedule C for details.

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $ _____
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ▶ $ _____
3 Total of direct and indirect exempt function expenditures Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b . . . . . ▶ $ _____
4 Did the filing organization file **Form 1120-POL** for this year? . . . . . ☐ Yes ☐ No
5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's 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-

Part II-A **To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)).** See the instructions for Schedule C for details.

A Check ▶ ☐ if the filing organization belongs to an affiliated group.

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)	12,602.	
c Total lobbying expenditures (add lines 1a and 1b)	12,602.	
d Other exempt purpose expenditures	5,719,638.	
e Total exempt purpose expenditures (add lines 1c and 1d)	5,732,240.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	436,612.	
g Grassroots nontaxable amount (enter 25% of line 1f)	109,153.	
h Subtract line 1g from line 1a. Enter -0- if line g is more than line a	0.	
i Subtract line 1f from line 1c Enter -0- if line f is more than line c	0.	
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	☐ Yes ☐ No	

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not 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 over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount	217,857.	216,431.	393,182.	436,612.	1,264,082.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,896,123.
c Total lobbying expenditures	8,854.	12,774.	4,909.	12,602.	39,139.
d Grassroots non-taxable amount	54,464.	54,108.	98,296.	109,153.	316,021.
e Grassroots ceiling amount (150% of line 2d, column (e))					474,032.
f Grassroots lobbying expenditures					

Part II-B **To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)).** See the instructions for Schedule C for details.

		(a) Yes	(a) No	(b) Amount
1	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)?			
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 501(c)(5), or section 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 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 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	2c	
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 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 Part II-B, line 1i. Also, complete this part for any additional information

Schedule D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: WASHINGTON STATE CHILD CARE RESOURCE & REFERRAL NETWORK

Employer identification number: 91-1427991

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ☐ Yes ☐ No

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

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

☐ Preservation of land for public use (e g., recreation or pleasure)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of certified historic structure

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

		Held at the End of the Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

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

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

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

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

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

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

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

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

b If "Yes," explain the arrangement in Part XIV

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

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

2 Provide the estimated percentage of the year end balance held as.

a Board designated or quasi-endowment ▶ _____%
b Permanent endowment ▶ _____%
c Term endowment ▶ _____%

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

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

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

Part VI Investments - Land, Buildings, and Equipment. See 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 value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		230,603.	224,628.	5,975.
e Other		38,363.	34,355.	4,008.
Total. Add lines 1a-1e. *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				9,983.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total (Col (b) should equal Form 990, Part X, col (B) line 12.) ▶		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.) ▶		

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

(a) Description	(b) Book value
NONCURRENT UNCONDITIONAL PROMISE TO PAY	242,592.
Total. *(Column (b) should equal Form 990, Part X, col (B) line 15.)* ▶	242,592.

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

(a) Description of liability	(b) Amount
Federal income taxes	
ACCRUED VACATION	19,067.
ACCRUED PAYROLL EXPENSES	17,233.
ACCRUED SUBLEASE DEPOSIT	3,173.
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25.)* ▶	39,473.

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,260,782.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,732,240.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	528,542.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4-8	9	0.
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	528,542.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	6,260,782.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	6,260,782.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)			5	6,260,782.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	5,732,240.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	5,732,240.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)			5	5,732,240.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4, Part X; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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.**

▶ **Attach to Form 990.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization WASHINGTON STATE CHILD CARE RESOURCE & REFERRAL NETWORK

Employer identification number 91-1427991

Part I General Information on Grants and Assistance

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? [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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 I-1 (Form 990) if additional space is needed ▶ [X]

1 (a) Name and address of organization or government	(b) 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

2 Enter total number of section 501(c)(3) and government organizations ▶ _____

3 Enter total number of other organizations ▶

LHA **For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule I (Form 990) 2008**

832101 12-18-08

Part III **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.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
EDUCATION SCHOLARSHIPS FOR CHILD CARE PROFESSIONALS - INCLUDING TUITION, FEES, BOOKS, TRAVEL FOR SCHOOL AND RELATED EXPENSES	650	495,469.	0.		

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

INDIVIDUALS WHO RECEIVE SCHOLARSHIP GRANTS FROM THE WASHINGTON SCHOLARSHIPS FOR CHILD CARE PROFESSIONALS PROGRAM EXECUTE AN ANNUAL CONTRACT. INDIVIDUALS ARE REQUIED TO COMPLETE 12 TO 20 COLLEGE CREDITS EACH YEAR AND PAY FOR A PORTION OF THEIR TUITION, FEES, AND BOOKS. INDIVIDUALS SUBMIT GRADES AND FORMS TO ACCESS PAYMENT FOR THEIR TUITION AND RELEASE TIME AS OUTLINED IN THEIR CONTRACT. FOR THOSE RECIPIENTS ACCESSING CHILD DEVELOPMENT ASSOCIATES ("CDA") CREDENTIAL SCHOLARSHIPS, INDIVIDUALS SIGN A CONTRACT AND ALSO PAY FOR A PORTION OF THE ASSESSMENT FEE UP FRONT AND RECEIVE A BONUS UPON SUBMISSION OF

Part IV Supplemental Information

RECEIPT OF THEIR CDA CREDENTIAL TO OUR STAFF. THE STAFF REGULARLY MONITOR INDIVIDUALS TO ENSURE THAT THAY ARE PROGERESSING TOWARDS THEIR EDUCATIONAL GOALS RELATED TO THEIR CONTRACTS.

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: WASHINGTON STATE CHILD CARE RESOURCE & REFERRAL NETWORK

Employer identification number: 91-1427991

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

CREATED BY STATUTE IN 1986, THE R&R NETWORK IS THE ONLY ASSOCIATION OF CHILD CARE RESOURCE AND REFERRAL AGENCIES IN THE STATE OF WASHINGTON.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS

FEES. DURING THE FISCAL YEAR ENDED 6/30/09 THE PROGRAM PROVIDED SCHOLARSHIP GRANTS TO MORE THAN 650 INDIVIDUALS WORKING IN 346 CHILDCARE FACILITIES.

FORM 990, PART VI, SECTION A, LINE 4: THE NETWORK'S PREVIOUS BYLAWS OUTLINED A SYSTEM OF GEOGRAPHIC REPRESENTATION OF MEMBER AGENCIES TO THE BOARD AND A LENGTHY NOMINATION PROCESS TO SELECT THOSE REGIONAL REPRESENTATIVES. THE BYLAWS WERE AMENDED TO UPDATE HOW MEMBER AGENCIES ARE REPRESENTED TO THE BOARD. MEMBER AGENCIES NOW SELECT THREE REPRESENTATIVES FROM THE WHOLE, TWO OF WHICH ARE ELECTED FOR 3-YEAR TERMS AND ONE OF WHICH IS ELECTED TO A 1-YEAR TERM. THE REVISION ALSO STREAMLINED HOW MEMBERS OF THE NOMINATING AND PUBLIC POLICY COMMITTEES ARE NOMINATED AND SELECTED.

FORM 990, PART VI, SECTION A, LINE 6: THERE ARE 11 MEMBER AGENCIES, EACH OF WHICH PROVIDES LOCAL CHILD CARE RESOURCE AND REFERRAL SERVICES WITHIN A SPECIFIC, DEFINED GEOGRAPHIC AREA UNDER CONTRACT WITH THE CCR&R NETWORK. SELECTION OF MEMBERS IS THROUGH A COMPETITIVE REQUEST FOR PROPOSALS ("RFP") PROCESS. MEMBER AGENCIES MUST BE APPROVED FOR MEMBERSHIP BY A VOTE OF THE BOARD OF TRUSTEES, PAY ANNUAL DUES, AND DESIGNATE AN APPROPRIATE

REPRESENTATIVE WHO ATTENDS MEMBER COUNCIL MEETINGS.

MEMBER AGENCIES HAVE THE RIGHT TO VOTE FOR THE ELECTION OF ALL TRUSTEES ON THE BOARD OF TRUSTEES AND THE RIGHT TO APPROVE AN ANNUAL PUBLIC POLICY AGENDA. EACH MEMBER AGENCY IS ENTITLED TO ONE VOTE FOR ANY MATTER PUT TO A VOTE AT ANY MEETING OF THE MEMBER COUNCIL. THE MEMBER COUNCIL AS THE REPRESENTATIVE BODY OF MEMBER AGENCIES IS ENTITLED TO REPRESENTATION ON THE BOARD OF TRUSTEES NOMINATING COMMITTEE AND PUBLIC POLICY COMMITTEE.

FORM 990, PART VI, SECTION A, LINE 7A: EACH MEMBER AGENCY DESIGNATES A REPRESENTATIVE TO THE MEMBER COUNCIL. THE DESIGNATED REPRESENTATIVE FROM EACH MEMBER AGENCY IS AN ADMINISTRATOR OR PROGRAM DIRECTOR IN THE AGENCY WITH THE OVERARCHING RESPONSIBILITY FOR THE MANAGEMENT OF CHILD CARE RESOURCE AND REFERRAL PROGRAMS IN THE AGENCY. THE MEMBER COUNCIL FOCUSES ON CHILD CARE RESOURCE AND REFERRAL PROGRAM ISSUES, RECOMMENDS POLICIES TO THE BOARD OF TRUSTEES FOR DISCUSSION AND ADOPTION, REVIEWS CONTRACT LANGUAGE RELATED TO CHILD CARE RESOURCE AND REFERRAL OBLIGATIONS, SHARES BEST PRACTICES FOR LOCAL PROGRAMMING AND MANAGEMENT, MAKES RECOMMENDATIONS ON PROCEDURAL ISSUES RELATED TO SATEWIDE RESOURCE AND REFERRAL PROGRAMS, AND ELECTS ALL MEMBERS OF THE BOARD OF TRUSTEES OF THE CORPORATION.

FORM 990, PART VI, SECTION A, LINE 10: AT THE END OF EACH FISCAL YEAR, THE NETWORK'S AUDITORS WILL SUBMIT THE ANNUAL IRS FORM 990 REPORT TO THE BOARD OF TRUSTEES FOR APPROVAL. FORM 990 IS TO BE FILED AS SOON AS POSSIBLE AFTER THE ANNUAL FINANCIAL AUDIT IS COMPLETED BUT NO LATER THAN 45 DAYS PRIOR TO THE DEADLINE FOR FILING THE REPORT. IF THE BOARD OF TRUSTEES CANNOT

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: WASHINGTON STATE CHILD CARE RESOURCE & REFERRAL NETWORK

Employer identification number: 91-1427991

APPROVE THE FILING OF THIS REPORT AT A REGULARLY SCHEDULED BOARD OF TRUSTEES MEETING, THEN THE AUDITORS WILL SUBMIT THIS REPORT TO THE PRESIDENT OF THE BOARD OF TRUSTEES WHO WILL CONVENE A SPECIAL EXECUTIVE COMMITTEE MEETING TO REVIEW AND APPROVE THE REPORT FOR FILING. UPON APPROVAL BY THE EXECUTIVE COMMITTEE, THE PRESIDENT OF THE BOARD OF TRUSTEES WILL SUBMIT THE IRS FORM 990 REPORT TO ALL MEMBERS OF THE BOARD OF TRUSTEES VIA EMAIL FOR APPROVAL TO BE FILED. A MAJORITY VOTE OF THE BOARD OF TRUSTEES IS REQUIRED FOR APPROVAL. AFTER APPROVAL BY THE BOARD OF TRUSTEES, THE NETWORK'S FINANCE OFFICER WILL PROCESS THE FILING OF THE IRS FORM 990 REPORT AS REQURIED.

FORM 990, PART VI, SECTION B, LINE 12C: UPON APPOINTMENT OR HIRE AND EVERY YEAR THEREAFTER AT THE ANNUAL BOARD OF TRUSTEES MEETING, EACH BOARD OF TRUSTEES MEMBER, BOARD COMMITTE MEMBERS, EXECUTIVE DIRECTOR, OR DIRECTOR LEVEL STAFF IS REQUIRED TO COMPLETE AND SIGN THE ORGANIZATION'S CONFLICT OF INTEREST DISCLOSURE QUESTIONAIRE AND THE RELATED CONFLICT OF INTEREST STATEMENT. THE CCR&R NETWORK REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES THIS POLICY BY TRACKING THE ITEMS DISCLOSED IN EACH INDIVIDUAL'S QUESTIONAIRE AND ENSURING THAT A CONFLICTED INDIVIDUAL HAS NO ROLE IN POLICY OR FISCAL DECISION-MAKING THAT IN ANY WAY RELATES TO OR IMPACTS THEIR CONFLICT ISSUE. THE MOST COMMON MONITORING AND ENFOREMENT METHOD INVOLVES EXCLUDING ALL LOCAL CCR&R DIRECTORS FROM PARTICIPATING IN THE DISCUSSION AND ALL DECISIONS AND VOTES AFFECTING LOCAL CCR&R PROGRAM CONTRACTS AND FUNDING ALLOCATIONS. IN ALL CASES, THE CONFLICTED INDIVIDUALS MUST RECUSE THEMSELVES FROM THE DISCUSSION AND VOTE.

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: WASHINGTON STATE CHILD CARE RESOURCE & REFERRAL NETWORK

Employer identification number: 91-1427991

FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES CONDUCTS A THOROUGH PERFORMANCE EVALUATION OF THE EXECUTIVE DIRECTOR EACH YEAR. EVERY OTHER YEAR THIS IS A 360 DEGREE PERFORMANCE EVALUATION INCLUDING INPUT FROM EVERY BOARD MEMBER, EVERY STAFF MEMBER, ALL OF THE LOCAL CCR&R PROGRAM DIRECTORS, AND A REPRESENTATIVE SAMPLING OF STATEWIDE COMMUNITY PHILANTHROPIC AND GOVERNMENTAL PARTNERS.

THIS PROCESS INCLUDES AN ASSESSMENT OF THE EXECUTIVE DIRECTOR'S HISTORICAL COMPENSATION PACKAGE AS WELL AS HER CURRENT COMPENSATION PACKAGE WHICH IS THEN COMPARED WITH COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED NONPROFIT ORGANIZATIONS IN THE PUGET SOUND REGION AND LIKE-SIZED STATEWIDE CHILD CARE RESOURCE & REFERRAL NETWORK OFFICES IN OTHER STATES ACROSS THE NATION. THE EXECUTIVE COMMITTEE REQUESTS INPUT FROM ALL MEMBERS OF THE BOARD.

FORM 990, PART VI, SECTION C, LINE 19: WASHINGTON STATE CHILD CARE RESOURCE AND REFERRAL NETWORK ("CCR&R") APPLICABLE TAX FORMS - FORM 1023, 990 ARE AVAILABLE FOR REVIEW UPON REQUEST IN OUR OFFICES DURING NORMAL BUSINESS HOURS. IN ADDITION, CCR&R'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE ALSO AVAILABLE FOR REVIEW UPON REQUEST IN OUR OFFICES DURING NORMAL BUSINESS HOURS. SOME OR ALL OF THESE DOCUMENTS MAY ALSO BE AVAILABLE ON OUR WEBSITE AT CHILDCARENET.ORG.

FORM 990, PART XI, QUESTION 2C

THE FINANCE COMMITTEE OF THE BOARD OF TRUSTEES IS RESPONSIBLE FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization: WASHINGTON STATE CHILD CARE RESOURCE & REFERRAL NETWORK

Employer identification number: 91-1427991

INDEPENDENT ACCOUNTANT. THERE HAVE BEEN NO CHANGES IN THIS PROCEDURE FROM THE PRIOR YEAR.

FORM 4562 - DEPRECIATION AND AMORTIZATION

THE TAXPAYER HEREBY ELECTS, PURSUANT TO IRC SECTION 168(K)(2)(D)(III), NOT TO CLAIM THE ADDITIONAL 50% DEPRECIATION ALLOWABLE UNDER IRC SECTION 168(K) FOR THE FOLLOWING QUALIFYING PROPERTY PLACED IN SERVICE DURING THE TAX YEAR ENDING 06/30/09.

ALL PROPERTY IN THE 3 YEAR CLASS

ALL PROPERTY IN THE 5 YEAR CLASS

ALL PROPERTY IN THE 7 YEAR CLASS

ALL PROPERTY IN THE 10 YEAR CLASS

ALL PROPERTY IN THE 15 YEAR CLASS

ALL PROPERTY IN THE 20 YEAR CLASS

ALL PROPERTY IN THE 25 YEAR CLASS

COMPUTER SOFTWARE AS DEFINED BY IRC SECTION 167(F)(1)(B)

QUALIFIED LEASEHOLD IMPROVEMENT PROPERTY

Asset Number	Description of property	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	FURNITURE & FIXTURES								
5	CANON COPIER	04 28 00	ADS	5.00	17	12,515.		12,515.	0.
22	DESK-SPECIAL NEEDS	12 06 00	ADS	3.00	17	803.		803.	0.
23	DESK-INFANT CARE	12 06 00	ADS	3.00	17	787.		787.	0.
25	CORNERSTONE DESK - DASA	04 02 01	ADS	3.00	17	506.		506.	0.
27	PENINSULA DESK & CREDENZA	04 17 01	ADS	3.00	17	1,031.		1,031.	0.
59	DESK - TEACH	09 17 02	ADS	5.00	17	445.		445.	0.
60	RECEPTION DESK/BOOKKEEPR WORKSTATION	09 24 02	ADS	5.00	17	1,656.		1,656.	0.
61	ROLLING FILE CABINET - TEACH	09 26 02	ADS	5.00	17	134.		134.	0.
	* 990 PAGE 10 TOTAL FURNITURE & FIXTURES					17,877.	0.	17,877.	0.
	MACHINERY & EQUIPMENT								
4	COMPUTER NETWORK	04 28 00	ADS	5.00	17	15,718.		15,718.	0.
8	DESKS (2)	10 19 00	ADS	3.00	17	1,195.		1,195.	0.
9	DELL COMPUTERS (2)	10 22 00	ADS	3.00	17	2,302.		2,302.	0.
11	COMPUTER	04 30 01	ADS	3.00	17	1,188.		1,188.	0.
12	CANON FAX 2060	05 11 01	ADS	3.00	17	2,027.		2,027.	0.
14	COMPUTER	07 01 00	ADS	3.00	17	954.		954.	0.
15	COMPUTER	07 01 00	ADS	3.00	17	954.		954.	0.
17	IBI MASTER 500 BINDING SYSTEM	10 02 00	ADS	3.00	17	787.		787.	0.
18	DELL COMPUTER GX100	10 22 00	ADS	3.00	17	1,257.		1,257.	0.
19	DELL COMPUTER	10 22 00	ADS	3.00	17	1,151.		1,151.	0.
24	COMPUTER	12 18 00	ADS	3.00	17	1,228.		1,228.	0.
26	18 BUTTON PHONES	04 16 01	ADS	3.00	17	504.		504.	0.
28	COMPUTER	04 30 01	ADS	3.00	17	1,188.		1,188.	0.
30	RICHOCH 4727 COPIER	11 21 94	ADS	5.00	17	7,384.		7,384.	0.
31	TOSHIBA LAPTOP COMPUTER/CARRY CASE	11 29 94	ADS	5.00	17	3,957.		3,957.	0.
32	PC MEMORY UPGRADE	11 29 94	ADS	5.00	17	200.		200.	0.

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- Current year section 179 (D) - Asset disposed

Asset Number	Description of property	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
33	LAPTOP COMPUTER	03/15/99	ADS	5.00	17	3,170.		3,170.	0.
34	733MHZ 128 MB (CPU ONLY)	07/30/01	ADS	3.00	17	921.		921.	0.
35	LINUX SERVER	10/31/01	ADS	3.00	17	1,326.		1,326.	0.
36	RED TAPE BACK UP SYSTEM	11/12/01	ADS	3.00	17	669.		669.	0.
37	REBUILD COMPUTER	01/31/02	ADS	3.00	17	383.		383.	0.
38	NACCRRAWARE SERVER	03/25/02	ADS	3.00	17	4,891.		4,891.	0.
39	NPS PRO SYSTEM 3-USER LIC	05/03/02	ADS	3.00	17	18,562.		18,562.	0.
40	DELL LAPTOP COMPUTER	05/01/02	ADS	3.00	17	3,330.		3,330.	0.
41	SVRP4RNOS SERVER	06/01/02	ADS	3.00	17	4,265.		4,265.	0.
42	TAPE BACK UP SYSTEM	06/01/02	ADS	3.00	17	520.		520.	0.
43	3 DELL PRECISION 340 COMPUTERS	06/20/02	ADS	3.00	17	8,883.		8,883.	0.
44	SBSDP32K DUAL PILL SERVER SYSTEM	06/18/02	ADS	3.00	17	7,670.		7,670.	0.
45	NETWORK BACKUP SYSTEM	06/18/02	ADS	3.00	17	1,082.		1,082.	0.
46	NETWORK EQUIPMENT	06/18/02	ADS	3.00	17	1,213.		1,213.	0.
47	SHA ULTRA-PORTABLE TABLET	06/18/02	ADS	3.00	17	3,634.		3,634.	0.
48	2 DELL PRECISION 340 COMPUTERS	06/19/02	ADS	3.00	17	4,880.		4,880.	0.
49	5 DELL PRECISION 340 COMPUTERS	06/19/02	ADS	3.00	17	12,076.		12,076.	0.
50	SHREDDER	06/21/02	ADS	5.00	17	2,001.		2,001.	0.
51	AVAYA IP TELEPHONE SYSTEM	06/21/02	ADS	5.00	17	17,360.		17,360.	0.
52	DELL LAPTOP COMPUTER	06/21/02	ADS	3.00	17	2,211.		2,211.	0.
53	RICOH AFICIO AP3800 PRINTER/COPIER	06/28/02	ADS	5.00	17	12,366.		12,366.	0.
54	2 LAZER JET 4100 PRINTERS	06/21/02	ADS	5.00	17	6,462.		6,462.	0.
55	MS SBS SERVER, INCLUDING SET UP	06/28/02	ADS	3.00	17	7,844.		7,844.	0.
56	DIGITAL SEAKERPHONE	07/17/02	ADS	3.00	17	446.		446.	0.
58	DELL COMPUTERS (2)	08/22/02	ADS	3.00	17	4,337.		4,337.	0.
62	TEACH DATABASE SERVER	07/31/03	ADS	3.00	17	6,424.		6,424.	0.
63	EBT LAPTOP COMPUTER WITH DOCKING PORT	11/08/05	ADS	3.00	17	2,167.		1,926.	241.

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Asset Number	Description of property	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
64	SONICWALL APPLIANCE	03/03/06	ADS	3.00	17	504.		392.	112.
65	SONICWALL VPN LICENSES	04/03/06	ADS	3.00	17	286.		215.	71.
66	POWER CONNECT SWITCH	03/05/06	ADS	3.00	17	367.		285.	81.
67	2 DELL SERVERS	03/16/06	ADS	3.00	17	9,987.		7,768.	2,219.
68	MONITOR SWITCH AND CABLES	06/17/06	ADS	3.00	17	554.		432.	122.
69	UPS BACK UP TAPES AND SOFTWARE	06/21/06	ADS	3.00	17	1,719.		1,337.	382.
73	NEW SERVERS SET UP AND CONFIG	05/13/06	ADS	5.00	17	5,861.		2,575.	3,286.
74	2 DELL LAPTOP COMPUTERS	05/10/06	ADS	3.00	17	3,130.		2,260.	870.
75	DELL AXIM PDA	05/05/06	ADS	3.00	17	386.		280.	106.
77	2 DELL ROUTERS	05/16/06	ADS	3.00	17	117.		84.	34.
78	DELL LAPTOP COMPUTER	05/19/06	ADS	3.00	17	1,565.		1,131.	434.
79	DELL DOCKING STATION	05/19/06	ADS	3.00	17	160.		115.	45.
80	CDW-SONY VAIO LAPTOP AND ACCESSORIES	06/23/06	ADS	3.00	17	3,332.		2,314.	1,018.
83	TREO 650 PDA/PHONE	05/25/06	ADS	3.00	17	400.		288.	112.
84	HESHAM ODEH - NEW DATA BASE	06/16/06	ADS	3.00	17	7,670.		5,327.	2,343.
85	4 FLAT SCREEN MONITORS	06/30/06	ADS	3.00	17	976.		650.	326.
86	AXIM WITH ACCESSORIES	06/30/06	ADS	3.00	17	422.		282.	140.
87	DELL OPTIPLEX 745 DESKTOP COMPUTER	06/28/07	ADS	3.00	17	1,286.		429.	428.
88	DELL LATTITUDE D420 LAPTOP COMPUTER	06/30/07	ADS	3.00	17	1,938.		646.	646.
89	(2) DELL OPTIPLEX 745 DESKTOP COMPUTERS	08/23/07	ADS	3.00	17	2,452.		698.	817.
92	WINDOWS TERMINAL SERVER WITH 10 LICENSES	02/01/08	ADS	3.00	17	2,775.		385.	925.
93	DELL OPTIPLEX 755 DESKTOP COMPUTER	06/30/08	ADS	3.00	17	1,122.			374.
94	DELL LATTIDUE D630 LAPTOP COMPUTER	06/30/08	ADS	3.00	17	1,086.			362.
95	DELL LATITUDE D830 LAPTOP COMPUTER	08/31/08	ADS	3.00	20A	1,421.			395.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT					230,603.	0.	208,739.	15,889.
	OTHER								
2	NACCRA SOFTWARE	06/28/00		60M	43	5,000.		5,000.	0.

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- Current year section 179 (D) - Asset disposed

Depreciation and Amortization Detail FORM 990 PAGE 10 990

Asset Number	Description of property	Date placed in service	Method/ IRC sec.	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
57	SPECIAL USER SOFTWARE	07/31/02	ADS	3.00	17	1,162.		1,162.	0.
70	MS EXCHANGE SOFTWARE	06/24/06	ADS	3.00	17	3,821.		2,866.	955.
71	DELL BACKUP EXEC SOFTWARE	04/13/06	ADS	3.00	17	1,188.		891.	297.
72	EXCHANGE SECURITY AND SPAM SOFTWARE	04/17/06	ADS	3.00	17	1,267.		951.	317.
76	SPSS SOFTWARE	05/11/06	ADS	3.00	17	799.		576.	223.
81	TECHSOUP-CRYSTAL REPORTS SOFTWARE	06/16/06	ADS	3.00	17	100.		69.	31.
82	PURPLUS SOFTWARE-2 ADOBE STD SOFTWARE	06/13/06	ADS	3.00	17	258.		179.	79.
90	MIP BUDGET MANAGEMENT MODULE SOFTWARE	11/01/07	ADS	3.00	17	2,618.		582.	873.
91	MIP EFT FOR A/P MODULE SOFTWARE	12/15/07	ADS	3.00	17	1,573.		284.	393.
96	SERVER BACKUP SOFTWARE UPGRADE	08/31/08	ADS	3.00	20A	2,700.			750.
	* 990 PAGE 10 TOTAL OTHER					20,486.	0.	12,560.	3,918.
	* GRAND TOTAL 990 PAGE 10 DEPR & AMORT					268,966.	0.	239,176.	19,807.

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- Current year section 179 (D) - Asset disposed

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization 990
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2008

Attachment Sequence No 67

Name(s) shown on return	Business or activity to which this form relates	Identifying number
WASHINGTON STATE CHILD CARE RESOURCE & REFERRAL NETWORK	FORM 990 PAGE 10	91-1427991

Part I Election To Expense Certain Property Under Section 179 Note: *If you have any listed property, complete Part V before you complete Part I.*

1	Maximum amount See the instructions for a higher limit for certain businesses	1	250,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	800,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2007 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 ▶	13	

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V.*

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

14	Special depreciation for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2008	17	18,662.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B - Assets Placed in Service During 2008 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs		S/L	
h	Residential rental property	/		27 5 yrs.	MM	S/L	
		/		27 5 yrs.	MM	S/L	
i	Nonresidential real property	/		39 yrs	MM	S/L	
		/			MM	S/L	

Section C - Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System

20a	Class life		4,121.	VARIES	HY	S/L	1,145.
b	12-year			12 yrs.		S/L	
c	40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr.	22	19,807.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	0.

Part V **Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete* **only** *24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.*

Section A - Depreciation and Other Information (Caution: *See the instructions for limits for passenger automobiles.*)

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No 24b If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use						25		
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						28		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
30 Total business/investment miles driven during the year (**do not** include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: *If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles*

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2008 tax year.					
43 Amortization of costs that began before your 2008 tax year				43	
44 **Total.** Add amounts in column (f). See the instructions for where to report				44	