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Form 990-EZ

Department of the Treasury
Internal Revenue Service

Short Form

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)

► Sponsoring organizations and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

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

OMB No 1545-1150

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 12-01-2008, and ending 11-30-2009

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

Transportation Education Fund Inc

Number and street (or P O box, if mail is not delivered to street address)Room/suite

1 S Pinckney St No 300

City or town, state or country, and ZIP + 4

Madison, WI 537032887

D Employer identification number

39-1417418

E Telephone number

(608) 256-6891

F Group Exemption Number

► Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method

☐ Cash

☒ Accrual

Other (specify) ►

I Website:► N/A

H Check ► ☐ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

J Organization type (check only one)—☒ 501(c) (6) ☐ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check ☐ if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than \$25,000 A return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ

► \$ 324,102

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	323,306
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	796
	5a	Gross amount from sale of assets other than inventory	5c	
	b	Less cost or other basis and sales expenses		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)		
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming , check here ☐	6c	
	a	Gross revenue (not including \$_____of contributions reported on line 1)		
	b	Less direct expenses other than fundraising expenses		
Expenses	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	7c	
	7a	Gross sales of inventory, less returns and allowances	7c	
	b	Less cost of goods sold		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		
	8	Other revenue (describe ►_____)	8	
	9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	324,102
	10	Grants and similar amounts paid (attach schedule) 	10	305,251
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	3,500
Net Assets	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe ► )	16	1,610
	17	Total expenses (add lines 10 through 16)	17	310,361
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	13,741
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	238,017
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year (combine lines 18 through 20)	21	251,758

Part II Balance Sheets—If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)

(A) Beginning of year

(B) End of year

22 Cash, savings, and investments

23 Land and buildings

24 Other assets (describe ►_____)

25 Total assets

26 Total liabilities (describe ►)

27 Net assets or fund balances (line 27 of column (B) must agree with line 21) .

238,017

22

254,858

23

24

238,017

25

254,858

0

26

3,100

238,017

27

251,758

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

Cat No 10642I

Form 990-EZ (2008)

Part III Statement of Program Service Accomplishments (See the instructions for Part III)		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)	
What is the organization's primary exempt purpose? PROMOTE, RESEARCH, STUDY, AND TABULATE AND DISSEMINATE INFORMATION TO BETTER THE UNDERSTANDING AND ENHANCEMENT OF THE TRANSPORTATION SYSTEM AND THE TRANSPORTATION INDUSTRY			
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title			
28 Transportation Education Fund accepts contributions from Wisconsin road construction contractors to support the Transportation Development Association, an exempt organization involved in the promotion of sound transportation policies throughout the state (Grants \$ 0) If this amount includes foreign grants, check here . . . ☐		28a	0
29 Transportation Education Fund accepts contributions from Wisconsin road construction contractors to provide scholarships for post-secondary education and to support projects of students enrolled at the University of Wisconsin-Madison College of Engineering. Transportation Education Fund provided scholarships to twelve students this fiscal year (Grants \$ 0) If this amount includes foreign grants, check here . . . ☐		29a	0
30 (Grants \$) If this amount includes foreign grants, check here . . . ☐		30a	
31 Other program services (attach schedule) (Grants \$) If this amount includes foreign grants, check here . . . ☐		31a	
32 Total program service expenses (add lines 28a through 31a)		32	

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)				
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
See Additional Data Table				

Part V Other Information (Note the statement requirements in the instructions for Part VI.)		Yes	No								
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	No								
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34	No								
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T										
a	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a	No								
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b									
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	36	No								
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ <table><tr><td>37a</td><td>0</td></tr></table>	37a	0								
37a	0										
b	Did the organization file Form 1120-POL for this year?	37b									
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a	No								
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b									
39	501(c)(7) organizations. Enter										
a	Initiation fees and capital contributions included on line 9	39a									
b	Gross receipts, included on line 9, for public use of club facilities	39b									
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____										
b	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I.	40b									
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____ 0										
d	Enter amount of tax on line 40c reimbursed by the organization ▶ _____ 0										
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	40e	No								
41	List the states with which a copy of this return is filed ▶ _____										
42a	The books are in care of ▶ Pam Fugina Telephone no ▶ (608) 256-6891 1 S Pinckney St Ste 300 Located at ▶ Madison, WI ZIP + 4 ▶ 537032887										
b	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)? 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 .	<table><tr><td></td><td>Yes</td><td>No</td></tr><tr><td>42b</td><td></td><td>No</td></tr><tr><td></td><td></td><td></td></tr></table>		Yes	No	42b		No			
	Yes	No									
42b		No									
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country ▶ _____	42c	No								
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ ☒ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ <table><tr><td>43</td></tr></table>	43									
43											
44	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of Form 990-EZ.	<table><tr><td></td><td>Yes</td><td>No</td></tr><tr><td>44</td><td></td><td>No</td></tr><tr><td></td><td></td><td></td></tr></table>		Yes	No	44		No			
	Yes	No									
44		No									
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes", Form 990 must be completed instead of Form 990-EZ.	<table><tr><td></td><td>Yes</td><td>No</td></tr><tr><td>45</td><td></td><td>No</td></tr></table>		Yes	No	45		No			
	Yes	No									
45		No									

complete the tables for lines 50 and 51.

		Yes	No
46	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	46	
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	
48	Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "yes," complete Schedule E	48	
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b	If "Yes," was the related organization(s) a section 527 organization?	49b	
50	Complete this table for the five highest compensated employees (other than officers, directors, trustees, and key employees) who received more than \$100,000 of compensation from the organization. If there are none, enter "None."		

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Total number of other employees paid over \$100,000 				

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there are none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
Total number of other independent contractors receiving over \$100,000		

Please Sign Here	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.				
	*****		2010-04-02		
	Signature of officer		Date		
	Pat Goss Secretary/Treasurer Type or print name and title				
Paid Preparer's Use Only	Preparer's signature  Glenn Miller CPA		Date	Check if self-employed 	Preparer's PTIN (See Gen Inst X)
	Firm's name (or yours if self-employed), address, and ZIP + 4  Wegner LLP 2110 Luann Ln Madison, WI 537133098		EIN 		Phone no  (608) 274-4020

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

Additional Data

Software ID:
Software Version:
EIN: 39-1417418
Name: Transportation Education Fund Inc

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
tim peterson 1 S Pinckney St Ste 300 Madison, WI 537032887	President 1 00	0	0	0
bill kennedy 1 S Pinckney St Ste 300 Madison, WI 537032887	Vice President 1 00	0	0	0
Pat Goss 1 S Pinckney St Ste 300 Madison, WI 537032887	Secretary/Treasurer 1 00	0	0	0
jim hoffman 1 S Pinckney St Ste 300 Madison, WI 537032887	Director 1 00	0	0	0
bill kraemer 1 S Pinckney St Ste 300 Madison, WI 537032887	Director 1 00	0	0	0
jeff paris 1 S Pinckney St Ste 300 Madison, WI 537032887	Director 1 00	0	0	0
Tom Braun 1 S Pinckney St Ste 300 Madison, WI 537032887	Director 1 00	0	0	0
tim michels 1 S Pinckney St Ste 300 Madison, WI 537032887	Director 1 00	0	0	0

TY 2008 Grants and Similar Amounts Paid Schedule**Name:** Transportation Education Fund Inc**EIN:** 39-1417418

Item No.	1
Class of Activity	General Support
Donee's Name	The Road Information Program
Donee's Address	1726 M St NW Ste 401 Washington, DC 200364521
Amount (FMV)	10,000
Purpose of Payment to Affiliate	
Relationship	N/A
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	2
Class of Activity	General Support
Donee's Name	Transportation Development Association of Wisconsin
Donee's Address	10 East Doty Street Suite 201 Madison, WI 53703
Amount (FMV)	277,490
Purpose of Payment to Affiliate	
Relationship	N/A
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

TY 2008 Other Expenses Schedule

Name: Transportation Education Fund Inc

EIN: 39-1417418

Description	Amount
Miscellaneous expenses	1,610

TY 2008 Other Liabilities Schedule

Name: Transportation Education Fund Inc

EIN: 39-1417418

Description	Beginning of Year Amount	End of Year Amount
Deferred revenue	0	3,100