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Form 990-EZ

Department of the Treasurv 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 of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1.250,000 at the end of the year may use trus form

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

OMB No 1545-1150

2009

Open to Public Inspection

ΑI	or the	he 2009 calendar year, or tax year beginning 01/01/2009 , 2009, and ending			12/31	/2009	20 09				
В	Cneck it a				D Employ	loyer identification number					
	Address	use IRS label or Solid Waste Association of North America, Inc					42-1	1314569			
=	Name ch	change print or Number and street (or P O box, if mail is not delivered to street address) Room/suite E Te					E Telepho	ne num	ber		
=	Initial reti Terminat		type. See	PO Box 563					563-	381-1300	
=	Amended		Specific	City or town, state or country, ar	nd ZIP + 4			F Group	Exem	otion	
=		on pending	Instruc- tions	Buffalo, IA 52728				Numbe	•		
=	-		organia	zations and 4947(a)(1) nonex	emot charitable trusts	must attach	G Accou	intina Meth	od F	✓ Cash	Accrual
	- 000			mpleted Schedule A (Form 9			1	(specify)			
		•	_	<u></u>	-					anization is	not
. 1	Website: ▶ www.isoswo.org required to a								_		
				<u>-</u>	(insert no )	(1) or 52	— 1	Z, or 990-		•	•
	Check			zation is not a section 509(a)(3	_,,		receipts are r	normally no	t more	than \$25.0	000 A
			_	turn is not required, but if the		-		-			
				e 9 to determine gross receipts,					<u> </u>		118,578
_	art I			enses, and Changes in					ons f	for Part I.	)
	1			ts, grants, and similar amo					1		1,624
	2		-	revenue including governm		s		. $ ag{}$	2		
	3	_		s and assessments				. $\vdash$	3		4,904
	4	Investmen	•					.	4		265
	5a			m sale of assets other that	n inventory .	5a			$\neg \vdash$		
	b			er basis and sales expense	•	. 5b	-				
	c			n sale of assets other than		ne 5b from li	ne 5a) .		5c		0
e	6							▶□□			
en Je	a								Į		
Revenue		reported o	•		<del> </del>	. ¦6a¦		111,785	-		
_	Ь	Less direc	ct expe	nses other than fundraising	expenses	. 6b		58,407			
	C		•	ss) from special events and	•	ne 6b from I	ıne 6a)	(	Sc		53,378
	7a		Gross sales of inventory, less returns and allowances								
	Ь	b Less: cost of goods sold									
	С	Gross pro	fit or (lo	ss) from sales of inventory	(Subtract line 7tp from	line 7a)		[ :	7c		0
	8	Other reve				RECE	NED	<u> </u>	8		0
	9	Total reve	enue. A	dd lines 1, 2, 3, 4, 5c, 6c, 7	7c, and 8	- VE UE	ACD .	. ▶	9		60,171
	10	Grants and	d sımıla	r amounts paid (attach sch	nedule)			: .  . L	10		0
	11	Benefits p	aid to c	or for members	nedule)	APR 15	2010 1	:.  . L	11		1250
es	12	Salaries, c	ther co	empensation, and employe	e benefits . L			~1 ⊢	12		3500
Š	13	Salaries, other compensation, and employee benefits  Professional fees and other payments to independent contractors of the con						s  .   <u>'</u>	13		0
Expenses	14	Occupano	y, rent,	utilities, and maintenance		JONE IV	1, U [	1 L	14		0
Û	15			ions, postage, and shipping				IJ <u> </u>	15		9,910
	16								16		8,230
	17			Add lines 10 through 16 .		<u> </u>	<u>.</u>	. •	17		22,890
ts	18			) for the year (Subtract line					18	···	37,280
Se	19			nd balances at beginning	•	,	-		_		
Ř		-	-	e reported on prior year's r				<u> </u>	19		36,014
Net Assets	20		•	net assets or fund balance		•			20		
	121			d balances at end of year					21	. <del> </del>	73,294
L	art II	Balanc	e Sne	ets. If Total assets on line		,250,000 or i					
_				(See the instructions for	Part II.)		(A) De	ginning of ye		(B) End o	<u> </u>
2		_		nvestments			-	30,	013 2	+	73,293
2		and and buil	-	<b>.</b>			`,		2:	<del>-</del>	
2		ther assets	-	· · · · · · · · · · · · · · · · · · ·			-	36	013 2		73,293
2		otal assets				• • •	`,	30,	20		13,233
2		otal liabilitie		cribe ► balances (line 27 of colum	n (R) must agree with	line 21\	_' <del> </del>	36	013 2	<del>-</del>	73,293
<u>2</u>				rk Reduction Act Notice, see		-	Cat No 10				- <b>EZ</b> (2009)
ΓŪ	riva	vy not aliu Pi	ahei MO	in negacion Act Notice, Set	, rue sebarare monacu		Ja: 140 11				(E003)

						i age =	
Part	Statement of Program Service Accom	<b>plishments</b> (See the instru	uctions for Part II	l.) _		Expenses	
What	_	(Required for section 501(c)(3) and 501(c)(4)					
	Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise						
	nanner, describe the services provided, the number of persons benefited, and other relevant information for						
each	program title.			_	for oti	a)(1) trusts, optional ners)	
28	<b>Environmental Education: Spring Conference that ed</b>	lucates members and individ	uals interested in s	afe			
	sanitary disposal methods (90 individuals)						
	(Grants \$ ) If this amount	includes foreign grants, che	eck here .	. ▶ □	28a	2,789	
29	<b>Environmental Education: Fall Conference to educat</b>			nitary			
	disposal and recycling methods (200 individuals)		•••••				
	(Grants \$ ) If this amount	includes foreign grants, che	eck here	▶ □	29a	55,619	
	Waste Management: Provides updates on environme						
	solid waste through meetings, newsletters and webs						
	(Grants \$ ) If this amount	includes foreign grants, che	eck here	▶ □	30a	22,890	
	Other program services (attach schedule)	morados foroign granto, one	dok nord i i	<u> </u>	1000		
	· · ·	includes foreign grants, che	ck here		31a		
	Total program service expenses (add lines 28a t		ECK HEIE .	· •	32	81,298	
Pari			en if not compense	ted. (See the			
		(b) Title and average	(c) Compensation	(d) Contribution		(e) Expense	
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benefit deferred compe		account and other allowances	
Hal N	Morton	devoted to position	enter-o,	deterred compe	risation	other allowances	
	W Burlington Ave - Burlington, IA 52601	President - 2 hrs/wk	,		0		
			0			0	
	Wittry	Past President - 2 hrs/wk	_				
	1 Kittyhawk Ave - Carroll, IA 51401		0		0		
	Smith	Vice President - 2 hrs/wk					
	Grand Ave, Ste100 - Des Moines, IA 50312		0		0	0	
	Vogt	Secretary - 2 hrs/wk	_		_	_	
	Kerper Court - Dubuque, IA 52001		0		0	0	
	N Krambeck	Treasurer - 2 hrs/wk	_			_	
	Box 563 - Buffalo, IA 52728		0		0	0	
	Dworek	Chapter Director - 2 hrs/wk					
1218	1 NE 12th Ave - Mitchelville, IA 50169	•	0		0	0	
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		-	1			1	

Part	Other Information (Note the statement requirements in the instructions for Part V.)	_		
•			Yes	<u>No</u>
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		<b>✓</b>
34	were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		$\overline{}$
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
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 <b>or</b> were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	_	<b>✓</b>
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations Enter			
а	Initiation fees and capital contributions included on line 9			Ì
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit			
	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		✓
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on	400		
·	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization	_		_
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		<b>\</b>
41	List the states with which a copy of this return is filed. ▶			
42a	The organization's books are in care of ▶ Telephone no. ▶			
	Located at ► ZIP + 4 ►			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		V	NI -
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	401	Yes	
	account)?	42b		<b>V</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.	40-		
С	At any time during the calendar year, did the organization maintain an office outside of the U.S?	42c		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year	•	•	
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			<u> </u>
	Form 990-EZ	44	<u> </u>	<b>1</b>
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	45		1
		000	\ E 7	

Form 990-	EZ (2009)	_				E	age 4
Part V	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 and	section 4947(a)(1) none 17(a)(1) nonexempt char id 51.	xempt charital itable trusts mu	ole trusts only. A st answer question	II sec ons 46	tion 5–491	b
46	Did the organization engage in direct or indirect	political campaign activiti	es on behalf of o	r in opposition to		Yes	No
c	candidates for public office? If "Yes," complete	Schedule C, Part I			46		1
47 [	Did the organization engage in lobbying activities	s? If "Yes," complete Sche	dule C, Part II .		47	✓	
48 I	s the organization a school as described in section	on 170(b)(1)(A)(ii)? If "Yes," o	omplete Schedule	eΕ	48		<b>7</b>
	Did the organization make any transfers to an ex		ed organization?		49a		<b>✓</b>
	f "Yes," was the related organization a section 5				49b		
50 (	Complete this table for the organization's five hi	ghest compensated emplo	yees (other than	officers, directors, t	truste	es an	d key
	employees) who each received more than \$100,	(b) Title and average	(c) Compensation				
	(a) Name and address of each employee paid more than \$100,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	ac	Exper count a allowa	and
			_				
f	Total number of other employees paid over \$100	0.000			L		
	\$100,000 of compensation from the organizatio  (a) Name and address of each independent contractor		<del></del>	ype of service	(c) Co	mpens	ation
d -	Total number of other independent contractors of Under penalties of perjury, I declare that I have examinand belief, it is true, correct, and complete Declaration	ed this return, including accompa	nying schedules and si	tatements, and to the beson of which preparer has	st of my	/ know	ledge
Sign Here	Signature of officer  Keith Krambeck, Treasurer  Type or print name and title			4/12_	110	<u> </u>	
Paid	Preparer's	Date	Check if self-	Preparer's identifying nui	mber (Se	e instru	ctions)
Prepare	r's signature		employed ▶ L				
Use Onl	v yours if self-employed).	<del>_</del>		<u>IN</u> ▶			
May the	address, and ZiP + 4 Per land land land land land land land land	n above? See instructions		Phone no	7 <b>v</b>		Als
iviay tile	5 in Consocios una return with the preparer show	ii above: See instructions	····	· · · · <u>·                              </u>	<u> </u>		No (2009)

#### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

### **Public Charity Status and Public Support**

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

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

OMB No 1545-0047 Open to Public

Inspection Internal Revenue Service Name of the organization Employer identification number Solid Waste Association of North America, Inc. 1314569 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is. (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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.) ☐ 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.) An organization that normally receives: (1) more than 33\% 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\% % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 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. **b** Type II c Type III-Functionally integrated **d** ☐ Type III–Other a Type I 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) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting 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) 11g(i) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? . . . (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (III) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of in col (i) listed in your organization (described on lines 1-9 the organization in support above or IRC section (i) organized in the governing document? col (i) of your (see instructions)) support? HS? Yes Nο Yes Yes

Total

$\overline{}$	(Complete only if you chec	red the box	on line 5, 7,	or o or Part i	<u>·)                                    </u>	<del></del> -	
	tion A. Public Support	(-) 0005	(h.) 0000	(-) 0007	(4) 0000	(1) 0000	1 (0 7
Ca	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d</b> ) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				<del></del>		
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3			and the state of t			
5 6	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) Public support. Subtract line 5 from line 4.						
	tion B. Total Support			CONTRACTOR OF THE PARTY OF THE	n to program to the control of the second of		
	lendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4					(-,	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10 .	4 7	174, a	ķ '		4	
12	Gross receipts from related activities, etc.	(see instructi	ons)			12	
13	First five years. If the Form 990 is for organization, check this box and stop he	re	<u></u>		h, or fifth tax y		
Sec	tion C. Computation of Public Su					т т	
14	Public support percentage for 2009 (line		•	1, column (f))		14	%
15	Public support percentage from 2008 Sc	-	•			15	%
16a	33%% support test – 2009. If the organiand stop here. The organization qualifies				line 14 is 331/3	% or more, che	eck this box
b	33% % support test—2008. If the organic box and stop here. The organization qua						
17a	10%-facts-and-circumstances test—20 more, and if the organization meets the "forganization meets the "facts-and-circumstances" in the content of the content	acts-and-circu	mstances" test,	check this box	and stop here	. Explain in Par	t IV how the
b	10%-facts-and-circumstances test—2008 more, and if the organization meets the "facts-and-circumsta Private foundation. If the organization did	acts-and-circur ances" test. The	nstances" test, organization qu	check this box alifies as a publi	and <b>stop here</b> .	Explain in Part	IV how the ▶ □

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.)

0	(Complete only if you checke	d the box on	ille 9 01 Fai	11.)			<del></del>	
	tion A. Public Support	( ) 0005			( 1) 0000	( ) 0000	(O. T. ) . I	
Ça	lendar year (or fiscal year beginning in)⁻ ▶ │	(a) 2005	-( <b>b</b> ) 2006	(c) 2007	- <b>(d)</b> 2008	(e) 2009	(f) Total-	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	3,596	3,441	30,188	15,551	6,528	59,304	
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	21,986	22,102	15,594	17,948	111,785	189,415	
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0	
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0	
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0	
6	Total. Add lines 1 through 5	25,582	25,543	45,782	33,499	118,313	248,719	
-	Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0	
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the	o	0	0	0	0	0	
	amount on line 13 for the year	0	0	0	0	0		
с 8	Add lines 7a and 7b			-	-		248,719	
202	line 6)			L.,			240,7.10	
	elendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
		25.582	25 543	45,782	33.499	118.313	248.719	
9 10a	Amounts for the 6		146	1,755	462	265	4,224	
ь	Sources	1,596	140	1,733	402	203	7,227	
	section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0	
С	Add lines 10a and 10b	1,596	146	1,755	462	265	4,224	
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0	
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	0	
13	Total support. (Add lines 9, 10c, 11, and 12.)	27,178	25,689	47,537	33,961	118,578	252,943	
14	First five years. If the Form 990 is for toganization, check this box and stop	here	<u> </u>	nd, third, fourth			<b>►</b> [ ]	
Sec	tion C. Computation of Public Su							
15	Public support percentage for 2009 (lin			ne 13, column	(f))	15	98.33 %_	
16								
Sec	tion D. Computation of Investmer	nt Income Pe	ercentage				<del></del>	
17	Investment income percentage for 2009	<b>9</b> (line 10c, col	umn (f) divide	d by line 13, co	olumn (f)) .	17	1.67 %	
18	Investment income percentage from 20					18	2.57 %	
19a	17 is not more than 331/3 %, check this b	ox and stop he	ere. The organi	ization qualifies	s as a publicly s	supported orga	anization 🕨 🗹	
b	33%% support tests – 2008. If the organ line 18 is not more than 33%%, check this	nization did not sop	check a box or <b>here.</b> The orga	n line 14 or line nization qualifie	19a, and line 1 s as a publicly	6 is more than supported orga	33⅓ %, and nization ▶ ☑	
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)

#### **Political Campaign and Lobbying Activities**

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

Complete if the organization is described below.

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

OMB No 1545-0047
2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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 Solid Waste Assiciation of North America, Inc. 42 1314569 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. Volunteer hours . . Complete if the organization is exempt under section 501(c)(3). Part I-B 1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . . Enter the amount of any excise tax incurred by organization managers under section 4955. If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . . Yes ∐ Yes **b** If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were 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 (e) Amount of political filing organization's contributions received and promptly and directly funds If none, enter -0delivered to a separate political organization If none, enter -0-

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-	Idle C (1 0111 330 01 330-LZ) 2003					rege 4
Par	t II-A Complete if the organi under section 501(h)).	zation is exemp	t under sectio	n 501(c)(3) and	filed Form 5768	(election
	Check ► ☐ if the filing organizat Check ► ☐ if the filing organizat				ons apply.	
	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)			(a) Filing organization's totals	(b) Affiliated group totals	
	d Other exempt purpose expenditures					
-	If the amount on line 1e, column (a) or (b Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,00 Over \$1,500,000 but not over \$17,000,00 Over \$17,000,000	20% of the am \$100,000 plus 0 \$175,000 plus	nontaxable amou lount on line 1e 15% of the excess 10% of the excess 5% of the excess	s over \$500,000. s over \$1,000,000		
g h i j	Grassroots nontaxable amount (ent Subtract line 1g from line 1a. If zer Subtract line 1f from line 1c. If zer If there is an amount other than zero section 4911 tax for this year?	er 25% of line 1f) o or less, enter -0- o or less, enter -0-	or line 1, did the	<u> </u>		☐ Yes ☐ No
	(Some organizations that columns below	made a section to made a section to made a section to made a section to make a section to make a section to made a section to make a secti	501(h) election octions for lines	do not have to co 2a through 2f or	n page 4.)	five
	Calendar year (or fiscal year beginning in)	ying Expenditures (a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))	4 4	ا به ا این ا پرس می ا			
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))		TO THE STATE OF	Property &		
f	Grassroots lobbying expenditures					

	(election under section 501(h)).	(a	a)		(b)	
	Ÿ	es	No		mount	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:			Words .		Ť
	volunteers:	_				-
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		<u> </u>	100.4	. 1	
	Media advertisements?		<u> </u>	_		
	Mailings to members, legislators, or the public?		<b>√</b>			
	Publications, or published or broadcast statements?	$\dashv$	<b>√</b>			
	Grants to other organizations for lobbying purposes?		<b>V</b>			
	bliect contact with legislators, their stairs, government officials, or a legislative body:		1		3	3,500
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<u> </u>			
	Other activities? If "Yes." describe in Part IV	-				3,500
-	Total. Add lines 1c through 1i	ا من	en'air	14		,,500
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  If "Yes," enter the amount of any tax incurred under section 4912		· · · · ·	<u> </u>		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.	7.7	12			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	一	1			
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(	c)(	5), o	r sect	ion	
	501(c)(6).					
					Yes	No
	Were substantially all (90% or more) dues received nondeductible by members?			1		
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		<u> </u>
	Did the organization agree to carryover lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(			3		
_	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A "Yes."					ed ——
	Dues, assessments and similar amounts from members	.				
	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	aı	0-			
	Current year		2a			
	Carryover from last year		2b			
	Total		2c 3			
	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
	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?	19	4			
	Taxable amount of lobbying and political expenditures (see instructions)		5			
Par						
Also, Jame legis	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line complete this part for any additional information. es Obradovich was paid \$3,500 to provide information to the organization regarding pending Station. Mr. Obradovich was not directed to influence or to persuade lowa State legislators but mation that was provided to the organization membership. Also, annually ISOSWO conducts are State of Iowa Statehouse to meet State Representatives and Senators. Volunteers staff the a	to a le	e of only	owa gather	eeting	

Schedule C (Form 9	990 or 990-EZ) 2009	Page 4
Part IV S	Supplemental Information (continued)	
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