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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Inspection

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

Open to Public

A	For the	e 2011 calendar year, or tax year beginning JUL 1, 2011 and ending	JUN 30, 2012						
В	Check if	C Name of organization	D Employer identifi						
	applicab	IOWA ASSOCIATION FOR THE EDUCATION OF							
Г	Addre	SS TOTAL CULT DDDN							
F	Name	David Branch A	₄₂₋₁	135283					
F	chang lnitial		···						
F	return Termii	· 1							
H	Jated Amen	4.4		331-8000					
늗	retum Applic	City or town, state or country, and ZIP + 4	G Gross receipts \$	1,285,507.					
L	tion pendi	DES MOINES, IA 50310	H(a) Is this a group re						
	•	F Name and address of principal officer BARBARA MERRILL	for affiliates?	Yes X No					
		SAME AS C ABOVE	H(b) Are all affiliates inc	luded? Yes No					
			If "No," attach a	list (see instructions)					
		te: WWW.IOWAAEYC.ORG	H(c) Group exemptio						
_			ear of formation: 1980 N	A State of legal domicile; I-A					
Р	art I	Summary							
ø	1	Briefly describe the organization's mission or most significant activities: SERVING							
Governance		EDUCATION FIELD BY PROVIDING PROGRAMMING AND	EDUCATIONAL	SUPPORT TO					
Ĕ	2	Check this box If the organization discontinued its operations or disposed of m	ore than 25% of its net as	ssets					
Š	3	Number of voting members of the governing body (Part VI, line 1a)	3	23					
<u>ن</u> ع	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	23					
Se		Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	12					
ij		Total number of volunteers (estimate if necessary)	6	12					
Activities		Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.					
⋖		Net unrelated business taxable income from Form 990-T, line 34	7b	0.					
		RECEIVED _	Prior Year	Current Year					
_	8	Contributions and grants (Part VIII, line 1h)	52,158.	53,739.					
Revenue		Program service revenue (Port VIII line 2s)	1,159,489.	1,185,519.					
ě			11,861.						
æ				2,080.					
		The revenue (are vin, column (4), lines 3, od, be, 5c, 166,69 lie.)	0.	0.					
		Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,223,508.	1,241,338.					
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.					
		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.					
Ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	407,470.	421,455.					
Expense	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.					
Š	b	Total fundraising expenses (Part IX, column (D), line 25)							
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	804,156.	829,976.					
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,211,626.	1,251,431.					
	19	Revenue less expenses Subtract line 18 from line 12	11,882.	-10,093.					
200			Beginning of Current Year	End of Year					
Set	20	Total assets (Part X, line 16)	346,043.	304,560.					
Net Assets or	21	Total liabilities (Part X, line 26)	213,947.	207,639.					
25	22	Net assets or fund balances. Subtract line 21 from line 20	132,096.	96,921.					
	art II	Signature Block							
Unc	ler pena	lities of perjury, I declare that I have examined this return, including accompanying schedules and stat	ements, and to the best of m	v knowledge and belief, it is					
		t, and complete Declaration of preparer (other than officer) Sbased on all information of which prepare		,, ,, ,, ,,					
		Sarbara 15, Milmel	11-12	12					
Sig	ın	Signature of officer	Date						
He		BARBARA MERRILL, EXECUTIVE DIRECTOR							
		Type or print name and title	-						
		Print/Type preparer's name Preparer's signature	Date Check	PTIN					
Pai	d	JAY A HORN, CPA	11-6-17						
SEI I HOILY, CIA Sei-enipioyea F 0125									
	Only	Firm's name DENMAN & COMPANY, LLP Firm's address 1601 22ND STREET, SUITE 400	Firm's EIN	42-0794029					
USE	Only		DL .	15 225 0400					
_		WEST DES MOINES, IA 50266-1453	Phone no. 5	15-225-8400					
		RS discuss this return with the preparer shown above? (see instructions)		X Yes No					
1320	001 01-2	3-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2011)					

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

IOWA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN 42-1135283 Page 2 Part III | Statement of Program Service Accomplishments Gheck if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission TO SERVE AND ACT ON BEHALF OF THE NEEDS, RIGHTS, AND WELL-BEING OF YOUNG CHILDREN WITH FOCUS ON PROMOTION OF EDUCATIONAL AND DEVELOPMENTAL SERVICES AND RESOURCES FOR CHILDREN, FAMILIES, AND COMMUNITIES. Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measured 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 1,070,147. including grants of \$ 1,185,519.)) (Revenue \$ THE ASSOCIATION PROVIDES MEMBERSHIP, FEE BASED, AND CONTRACT DRIVEN SERVICES FOR THE EARLY CHILDHOOD CARE AND EDUCATION PROFESSIONALS IN WE SUPPORT THEIR PROFESSIONAL DEVELOPMENT GROWTH THROUGH TEACH COLLEGE SCHOLARSHIPS, PROGRAM ACCREDITATION SUPPORT, EDUCATIONAL OUTREACH AND OPPORTUNITIES, AND STATE CONFERENCES. __ including grants of \$ _ Other program services (Describe in Schedule O)) (Revenue \$ including grants of \$ 1,070,147.

132002 02-09-12

4e Total program service expenses

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Form 990 (2011) YOUNG CHILDREN
Part IV Checklist of Required Schedules

	•		Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		163	140
1	- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	_	х	
_	If "Yes," complete Schedule A	1	Λ	v
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, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
Ŭ	Schedule D, Part III	8		х
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			
9		_		х
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			7.7
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable	-		~
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		_X_
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	- , , , ,		
120	Schedule D, Parts XI, XII, and XIII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
b	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		x
12	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			
13	Did the organization maintain an office, employees, or agents outside of the United States?	13		X
14a		14a		
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> X</u>
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, Parts II and IV	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, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions 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 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		_X_
2 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (2011)

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Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the	İ	ł	
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	i	-	
	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 lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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	<u> </u>	
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	Is the organization 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	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	∌d		
	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, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			!
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	<u> </u>	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

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

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

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

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1

contributions? If "Yes," complete Schedule M

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

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

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O

X Form **990** (2011)

X

Х

Х

X

Х

Х

Х

X

X

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35b

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Form 990 (2011) YOUNG CHILDREN

Part V Statements Regarding Other IRS Filings and Tax Compliance

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L	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			T
b		7		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1.	l.	
	(gambling) winnings to prize winners?	1c	[<u>"</u>	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		,	Г
	filed for the calendar year ending with or within the year covered by this return 2a 12			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	200.00
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	(04.000	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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.	-	٠ ٢	
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			1.
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		Х
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and 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		l
7	Organizations that may receive deductible contributions under section 170(c).	t-		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	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	1.21	\$ 3.	25
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
q	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting		3	2333
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	u1 .	1	
а	Did the organization make any taxable distributions under section 4966?	9a		L
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9ь		<u>L</u>
10	Section 501(c)(7) organizations. Enter		_z ·	· 127 12
а	Initiation fees and capital contributions included on Part VIII, line 12			Ę.
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			. '
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
l2a	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 . 12b			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.		<u> </u>	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O			١. "
b	Enter the amount of reserves the organization is required to maintain by the states in which the			l
	organization is licensed to issue qualified health plans		محصور	- 22270
С	Enter the amount of reserves on hand	2052.5.		
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

IOWA ASSOCIATION FOR THE EDUCATION OF

Form 990 (2011)

YOUNG CHILDREN

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI				\mathbf{X}						
Sec	tion A. Governing Body and Management										
			-	Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	23									
	If there are material differences in voting rights among members of the governing body, or if the governing				'						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.										
b	Enter the number of voting members included in line 1a, above, who are independent 1b	23									
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.	/ision		-							
	of officers, directors, or trustees, or key employees to a management company or other person?		3		Х						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		Х						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		Х						
6	Did the organization have members or stockholders?		6	X							
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
	more members of the governing body?		7a	Х							
b											
	persons other than the governing body?										
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	ıa:	7b	Х							
а	The governing body?	•	8a	X	-						
b	Each committee with authority to act on behalf of the governing body?		8b	X							
9	Is there any officer, director, 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		9		X						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			= =	Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?		10a	X							
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate	es,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b	X							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing to	he form?	11a	X							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			_	_						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		12b	X							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	ın Schedule O how this was done		12c	X							
13	Did the organization have a written whistleblower policy?		13	X							
14	Did the organization have a written document retention and destruction policy?		14	Х							
15	Did the process for determining compensation of the following persons include a review and approval by independ	ent		- ,	;						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		:	_	,						
а	The organization's CEO, Executive Director, or top management official		15a	_X_							
b	Other officers or key employees of the organization		15b		X						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).										
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		<u>X</u>						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participal	ion									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		 -	~	-						
	exempt status with respect to such arrangements?		16b								
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ►NONE										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le							
	for public inspection. Indicate how you made 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 made its governing documents, conflict of interest	st policy, and	tinar	ncıal							
	statements available to the public during the tax year										
20	State the name, physical address, and telephone number of the person who possesses the books and records of t	ne organizat	ion 🕨	_							
	BARBARA MERRILL - 515-331-8000 5525 MEREDITH DRIVE, SUITE F, DES MOINES, IA 50310	-									
13200	6		Form	990 (20111						
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- 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

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	Position (do not check more than					one	Reportable	Reportable	Estimated
	hours per	box	box, unless person is both an officer and a director/trustee)					compensation	compensation	amount of
	week	\vdash			1000078430		100,	from the	from related	other
	(describe hours for	trustee or director				_		organization	organizations (W-2/1099-MISC)	compensation from the
	related	0 00	stee			nsate		(W-2/1099-MISC)	(** 2/ 1033 14/100)	organization
	organizations	trust	Institutional trustee		yee	adwo		(** = ** ** ** ** ** ** ** ** ** ** ** **		and related
	ın Schedule	Individual	rtto	 ==	Key employee	est co	je je			organizations
	O)	ıpu	Instr	Officer	Key	Highest compensated employee	Former			
(1) SUSAN GRAY										
PRESIDENT	1.00	X		X				0.	0.	0
(2) MARY AIRY								}		
VICE PRESIDENT	1.00	X		Х	Ш.			0.	0.	0
(3) TOM RENDON								_	_	
TREASURER	1.00	X		X			_	0.	0.	0
(4) DIANNE CASTO	4 00									•
SECRETARY	1.00	X		Х				0.	0.	0
(5) LEANN ANDRE	1 00	١,,								_
BOARD MEMBER	1.00	X					_	0.	0.	0
(6) BRIAN KINGREY	1.00	x						0.	0.	0
BOARD MEMBER	1.00	^				 		U •	0.	0
(7) JED HAMMEN BOARD MEMBER	1.00	x						0.	0.	0
(8) SHEILA HANSEN	1.00	<u> </u>					\vdash		0.	
BOARD MEMBER	1.00	X						0.	0.	0
(9) TERRY WANGBERG		<u></u>		_			l			
BOARD MEMBER	1.00	x					İ	0.	0.	0
(10) BRANDY SMITH										
BOARD MEMBER	1.00	X						0.	0.	0
(11) CONNIE SCHULTE										
BOARD MEMBER	1.00	X						0.	0.	0
(12) PATRICIA EMERSON										
BOARD MEMBER	1.00	X				<u> </u>	<u>.</u>	0.	0.	0
(13) MALISA RADER								_	_	_
BOARD MEMBER	1.00	X						0.	0.	0
(14) JOY BROWN	1 00									
BOARD MEMBER	1.00	X				<u> </u>	<u> </u>	0.	0.	0
(15) ALICE ATKINSON	1 00	,,								_
BOARD MEMBER	1.00	 X			_	-	_	0.	0.	0
(16) LESLIE STONEHOCKER	1 00	.							^	^
BOARD MEMBER	1.00	┝	\vdash	-	\vdash	1		0.	0.	0
(17) PAM MAHONEY	1.00	\ v						0.	0.	0
BOARD MEMBER 132007 01-23-12	1 1.00	1 1					<u> </u>	1	<u> </u>	Form 990 (201

YOUNG CHILDREN

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Part VII Section A. Officers, Directors, T		mpl	oyee			High	est	t Compensated Employ	ees (continued)			
· (A)	(B)	İ		•	C)	_		(D)	(E)		(F)	
Name and title	Average hours per		not c		more	than		Reportable	Reportable		Estimated	_
•	week		k, unle icer ar					. I	compensatio from related		amount c	ρf
	(describe	φ					Ė	from the	organization		other compensat	non
	hours for	director				8			(W-2/1099-MIS		from the	
	related	tee or	ustee			ensate		(W-2/1099-MISC)	`	′	organizatio	
	organizations	i tra	nal tr		oyee	E .					and relate	ed .
	in Schedule	llvidu	nstitutional trustee	Officer	Key emptoyee	Highest compensated employee	寶				organizatio	∍⊓s
	O)	르	<u>s</u>	- ₩	<u>\$</u>	₹5	<u> </u>					
(18) NICHOL KLEESPIES	1 00	7.									_	^
BOARD MEMBER	1.00	X				\vdash		0.		0.		0.
(19) BECKY HIXSON	1.00	x						0.		0.		0.
BOARD MEMBER (20) CATHY SWACKHAMER	1.00	1	_				-			0.		<u> </u>
BOARD MEMBER	1.00	X						0.		0.		0.
(21) SALLY HARTLEY	1.00	123			\vdash	 	-					<u> </u>
BOARD MEMBER	1.00	x						0.		0.		0.
(22) KRISTEN POWELL								 				
BOARD MEMBER	1.00	X					ŀ	0.		0.		0.
(23) AMY LILES											i	
BOARD MEMBER	1.00	X						0.		0.	l	0.
(24) BARBARA MERRILL											i	
EXECUTIVE DIRECTOR	40.00	<u>. </u>	<u> </u>	X				62,551.		0.		0.
											ı	
			├-		<u> </u>	├—			· · · · · · · · · · · · · · · · · · ·			
											İ	
1b Sub-total		1	<u> </u>	L	I		<u></u>	62,551.		0.	- 	0.
c Total from continuation sheets to Part	/II. Section A					•		0.		ō.		0.
d Total (add lines 1b and 1c)	,					•		62,551.		0.		0.
2 Total number of individuals (including but	not limited to th	nose	liste	ed at	bove	e) wi	no r	 -	,000 of reportabl			
compensation from the organization												0
											Yes	No
3 Did the organization list any former office	r, director, or tri	uste	e, ke	y en	nplo	yee	, or	highest compensated ei	mployee on	-		
line 1a? If "Yes," complete Schedule J for	such individual			-							3	X
4 For any individual listed on line 1a, is the	•							•	the organization	- 1		
and related organizations greater than \$1										- 1	4	X
5 Did any person listed on line 1a receive or	•						elat	ted organizatıon or ındıvı	dual for services			
rendered to the organization? If "Yes," co.	mplete Schedui	e J i	or s	uch	pers	son					5	X
Section B. Independent Contractors 1 Complete this table for your five highest of	omponented in		2000	nt o	onte			that recovered more than	\$100,000 of com		ation from	—
the organization. Report compensation fo										pens	ation nom	
(A)	, and delicinedity				****	<u></u>		(B)	704		(C)	
Name and busines	s address	N	ONE	3				Description of s	ervices	С	ompensation	1
							ᅥ					
	,,						ヿ					
2 Total number of independent contractors	-	ot li	mıte	d to		_	stec	d above) who received m	ore than			
\$100,000 of compensation from the organ	nization >				(0					- 000 :-	
											Form 990 (2	.U11)

YOUNG CHILDREN

Form 990 (2011)

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Part VIII Statement of Revenue (D) (A) (B) (C) Revenue excluded from Total revenue Related or Unrelated exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 32,681. b Membership dues 1b c Fundraising events 1c d Related organizations e Government grants (contributions) 1e All other contributions, gifts, grants, and 21,058. similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 53,739 h Total. Add lines 1a-1f Business Code 2 a TEACH PROGRAM 611600 1,031,351. 1,031,351 Program Service Revenue CONTRACT INCOME 611600 82,009. 82,009. CONFERENCE INCOME 611600 72,159 72,159. f All other program service revenue 185,519 Total. Add lines 2a-2f Investment income (including dividends, interest, and 1,245 1,245. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (ii) Other 45,004 assets other than inventory b Less cost or other basis 44,169 and sales expenses 835 c Gain or (loss) d Net gain or (loss) 835 835. 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d 241,338.1,185,519 0. Total revenue See instructions. 2,080. Form **990** (2011)

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Form 990 (2011)

YOUNG CHILDREN

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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).

	Check if Schedule O contains a responsion include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	· ·			
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified		İ		
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	379,620.	265,734.	113,886.	
7	Other salanes and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	8,115.	5,681.	2,434.	
0	Payroll taxes	33,720.	23,604.	10,116.	
1	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying	_		_	
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				•
13	Office expenses				
4	Information technology				
5	Royalties				
6	Occupancy	29,855.	26,272.	3,583.	
7	Travel	77,782.	69,362.	8,420.	
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	33,912.	33,912.		
20	Interest	3,207.		3,207.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	5,328.		5,328.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	SCHOLARSHIPS	576,884.	576,884.		
b	PROFESSIONAL FEES	20,090.	4,018.	16,072.	· · · · · · · · · · · · · · · · · · ·
С	PROVISION FOR BAD DEBTS	16,026.	16,026.		
d	MINOR EQUIPMENT	12,646.	10,117.	2,529.	· · · · · · · · · · · · · · · · · · ·
е	All other expenses	54,246.	38,537.	15,709.	
25	Total functional expenses. Add lines 1 through 24e	1,251,431.	1,070,147.	181,284.	(
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)	1			

Form 990 (2011)

YOUNG CHILDREN

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Pa	rt X	Balance Sheet				
		`		(A) Beginning of year		(B) End of year
	٠1	Cash - non-interest-bearing	_	97,487.	1	45,475.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		161,357.	4	221,875.
	5	Receivables from current and former officers, di	rectors, trustees, key			
		employees, and highest compensated employee	es Complete Part II		i i	
	1	of Schedule L			5	•
	6	Receivables from other disqualified persons (as	defined under section			
		4958(f)(1)), persons described in section 4958(c)				
		employers and sponsoring organizations of sect	• • • • • • • • • • • • • • • • • • • •			
		employees' beneficiary organizations (see instru	· · · · · · · · · · · · · · · · · · ·	,	6	
ets	7	Notes and loans receivable, net	- · · · · · · · · · · ·		7	
Assets	8	Inventories for sale or use			8	
•	9	Prepaid expenses and deferred charges		133.	9	3,146.
		Land, buildings, and equipment cost or other	1 1			3/110.
		basis Complete Part VI of Schedule D	10a			
	Ь		10b		10c	
	11	Investments - publicly traded securities	100		11	
	12	Investments - other securities See Part IV, line 1	1	87,066.	12	34,064.
	13	Investments - program-related See Part IV, line	07,000.	13	34,004.	
	14	Intangible assets	- · · · · · · · · · · · · · · · · · · ·			
	15	Other assets See Part IV, line 11		14		
	16	Total assets. Add lines 1 through 15 (must equa	al line 24)	346,043.	15	304,560.
	17	Accounts payable and accrued expenses	ar irrie 54)	25,725.	16	32,483.
	18	Grants payable	•	45,145.	17	34,403.
	19	Deferred revenue	38,222.	18	25,156.	
	20	Tax-exempt bond liabilities		30,222.	19	23,136.
"	21	•	Part IV of Schodulo D		20	
Liabilities	22	Escrow or custodial account liability Complete F Payables to current and former officers, director			21	
pii	22	highest compensated employees, and disqualific		'		i
Lia		of Schedule L	ed persons. Complete Part II		~	- 4n n
	23		150,000.	22	150 000	
	24	Secured mortgages and notes payable to unrela		130,000.	23	150,000.
	25	Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, pay	•		24	
	25	parties, and other liabilities not included on lines				
		Schedule D	17-24) Complete Part X of		0.5	
	26			213,947.	25	207 620
	20	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check he	V	213,347.	26	207,639.
"			ere 🚩 🔼 and complete	,		•
ĕ	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets		132,096.		 06 001
Fund Balances	27	·		134,096.	27	96,921.
B	28	Temporarily restricted net assets Permanently restricted net assets	•		28	······································
Ę	29	•			29	7 23
Ē		Organizations that do not follow SFAS 117, ch	neck here and			
0	00	complete lines 30 through 34.				·
set	30	Capital stock or trust principal, or current funds			30	
As	31	Paid-in or capital surplus, or land, building, or eq	•		31	·
Net Assets or	32	Retained earnings, endowment, accumulated in	come, or other funds	120 005	32	06 006
_	33	Total net assets or fund balances	•	132,096.	33	96,921.
	34	Total liabilities and net assets/fund balances		346,043.	34	<u>304,560.</u>

IOWA ASSOCIATION FOR THE EDUCATION OF

Form	1 990 (2011) YOUNG CHILDREN	42-1	135283	Pa	ge 12			
Pa	rt XI. Reconciliation of Net Assets							
	Check if Schedule O contains a response to any question in this Part XI				X			
1	Fotal revenue (must equal Part VIII, column (A), line 12)	1	1,24 1,25					
2	2 Total expenses (must equal Part IX, column (A), line 25)							
3	Revenue less expenses Subtract line 2 from line 1	3			93.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	13	2,0	96.			
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-2	<u>5,0</u>	82.			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	9	6,9	21.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response to any question in this Part XII			_	X			
				Yes	No			
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				, ,			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	_					
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				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audıt,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			,			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a						
	separate basis, consolidated basis, or both							
	X Separate basis Consolidated basis Both consolidated and separate basis							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii	ngle Audıf						
	Act and OMB Circular A-133?		3a	X				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	X				

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

2011

Open to Public Inspection

Name of t	the organizat	on IOWA A	SSOCIATION FO	OR THE	EDUC	ATION	OF	E	mployer i	dentificati	on nur	mber
		YOUNG	CHILDREN						42	-1135	<u> 283</u>	
Part I	Reason	for Public Cha	rity Status (All organiz	zations mu	st comple	te this par	t) See ins	tructions				
The organ	ization is not a	a private foundation	because it is (For lines	1 through	11, check	only one b	ox)					
1	A church, co	nvention of church	es, or association of chur	rches desc	ribed in se	ection 170	(b)(1)(A)(i)).				
2	A school des	cribed in section 1	1 70(b)(1)(A)(ii). (Attach So	chedule E)								
3 🖳	A hospital or	a cooperative hosp	oital service organization	described	In section	170(b)(1)	(A)(iii).					
4 📙	A medical re	search organization	operated in conjunction	with a hos	spital desci	ribed in se	ction 170	(b)(1)(A)(i	ii). Enter th	e hospital	's nam	ie,
	city, and stat											
5 🔲	An organizat	on operated for the	e benefit of a college or u	niversity o	wned or op	perated by	a governi	mental un	rt describe	d in		
	section 170	(b)(1)(A)(iv). (Comp	olete Part II)									
6 🖳	A federal, sta	ite, or local governr	ment or governmental uni	it describe	d in sectio	n 170(b)(I)(A)(v).					
7 X	An organizat	on that normally re	ceives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	e general p	ublic desc	rıbed ır	n
	section 170	b)(1)(A)(vi). (Compl	lete Part II)									
8 📙			section 170(b)(1)(A)(vi).									
9 🔲	An organizati	on that normally re	ceives (1) more than 33	1/3% of its	support f	rom contri	butions, m	nembersh	ip fees, and	d gross red	eipts f	from
	activities rela	ted to its exempt for	unctions - subject to certa	aın exceptı	ons, and (2	2) no more	than 33 1	/3% of its	s support f	rom gross	ınvest	ment
			taxable income (less sec	tion 511 ta	x) from bu	isinesses a	acquired b	y the orga	anızatıon af	ter June 3	0, 197	5.
[<u>-</u>		509(a)(2). (Complet	•									
10	-	_	perated exclusively to te	•	-			•				
11 📖			perated exclusively for the									or
			zations described in secti				2) See sec	ction 509(a)(3). Chec	k the box	that	
			g organization and compl		-				. —			
	a Type			с 🔲 Тур		-	-			Type III - C		
e			at the organization is not									n
			than one or more publicly		_				9(a)(1) or si	ection 509	(a)(2)	
f			itten determination from t	the IRS tha	atitis a 1 y	pe i, i ype	II, or Type	e III				
_		rganization, check t					-646-6-11		0			
g			organization accepted ar			-					\ <u>\</u>	
		-	directly controls, either al	ione or tog	emer wim	persons c	iescribed	m (II) and ((iii) below,	44-63	Yes	No
	_		supported organization? on described in (i) above?)						11g(i)		
		•	a person described in (i) a		o2					11g(ii)		
h	• •	•	a person described in (i) on about the supported or							11g(iii)		
11	1 TOVIGE LITE 1	ollowing information	n about the supported of	yanızanon	(5)							
/-) Nome	of our posted	() FIN	(iii) Type of	(iv) Is the	organization	(v) Did you	i notify the	(vi) !	sthe			
	of supported anization	(II) EIN	organization		sted in your			Lorganizati	on in col. l	(vii) Am		i
orga	amzation		(described on lines 1-9 above or IRC section		document?			(i) organiz U.S	.?	sup	וטכ	
			(see instructions))	Yes	No	Yes	No	Yes	No			
			<u> </u>								-	
				1	-							
		- 77										
	·											
						<u></u>		<u> </u>				
<u>Total</u>		<u></u>		1			L	L				
LHA For P	Paperwork Re	duction Act Notic	e, see the Instructions f	or	·			Schedul	le A (Form	990 or 99	0-EZ)	2011

132021 01-24-12

Form 990 or 990-EZ.

IOWA ASSOCIATION FOR THE EDUCATION OF

Schedule A (Form 990 or 990 EZ) 2011 YOUNG CHILDREN

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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 or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants ")	1218273.	1297570.	1239535.	1138088.	1162205.	6055671.
2	Tax revenues levied for the organ-						
	ızatıon'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 through 3	1218273.	1297570.	1239535.	1138088.	1162205.	6055671.
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,	-		•		a .	
	column (f)						·
	Public support. Subtract line 5 from line 4	,			,	· · · · · · · · · · · · · · · · · · ·	<u>6055671.</u>
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
-	Amounts from line 4	1218273.	1297570.	1239535.	1138088.	1162205.	6055671.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	10 640	5 254	6 540	44 054	1 0 4 5	
	and income from similar sources	12,643.	5,374.	6,740.	11,861.	1,245.	<u>37,863.</u>
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	2 205	25 407	44 006	FO 150	F0 006	100 600
	assets (Explain in Part IV.)	3,305.	35,497.	44,926.	52,158.	52,806.	188,692.
	Total support. Add lines 7 through 10						6282226.
	Gross receipts from related activities,	•	•			12	
13	First five years. If the Form 990 is for	-	tirst, second, thir	d, fourth, or fifth ta	ix year as a section	1 501(c)(3)	. —
Sec	organization, check this box and storetion C. Computation of Publication	ic Support Per	rcentage				
	Public support percentage for 2011 (I			olump (fl)		14	96.39 %
	Public support percentage for 2011 (in Public support percentage from 2010)		•	oluliui (I <i>))</i>		15	96.39 % 96.58 %
	33 1/3% support test - 2011. If the c	•	·	tine 13 and line	ا ۱∡ ۱/3% مت ۳۸		
. 54	stop here. The organization qualifies	_		•	00 1/0/0 01 11	ioro, orioon triis Du	× and
h	33 1/3% support test - 2010. If the o		•		line 15 is 33 1/3%	or more check th	
~	and stop here. The organization qual					o. moro, oncor ti	▶ □
17a	10% -facts-and-circumstances tes	• •	• •		13.16a or16b a	and line 14 is 10%	or more
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			•	·		▶□
b	10% -facts-and-circumstances tes			• • • •	•	7a, and line 15 is	10% or
	more, and if the organization meets the						
	organization meets the "facts-and-circ				•		▶□
18	Private foundation. If the organization		_		,		s
						dule A (Form 990	

132022 01-24-12

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 or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below please complete Part II.)

Se	ction A. Public Support	elow, please com	piete Fait II /	• • • • • • • • • • • • • • • • • • • •			·
	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions, and	(-)		(-)	(2) =	(9/33,4,7	1.7
	membership fees received (Do not						
	include any "unusual grants")					İ	
2	Gross receipts from admissions,						
	merchandise sold or services per-	i					
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that	l					
0	are not an unrelated trade or bus-						
	iness under section 513						
					 		
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf				ļ		
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
(Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)	1 1	, ,			,	
	ction B. Total Support		•				
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6		1.7.		1.7.	1-1	1
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975					İ	
	: Add lines 10a and 10b						
	Net income from unrelated business				——————————————————————————————————————		
• •	activities not included in line 10b,						
	whether or not the business is						
10	regularly carried on Other income Do not include gain	<u> </u>			-	 	
12	or loss from the sale of capital						
	assets (Explain in Part IV.)				7		
	Total support (Add lines 9, 10c, 11, and 12)		<u> </u>			<u> </u>	
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a section	on 501(c)(3) orga	nization,
<u> </u>	check this box and stop here						
	ction C. Computation of Publ					7" 1 " " " 	
	Public support percentage for 2011 (, ,,		oiumn (f))		15	<u>%</u>
	Public support percentage from 2010					16	<u>%</u>
	ction D. Computation of Inve					 	
	Investment income percentage for 20	•	• • •	ne 13, column (f))		17	<u>%</u>
	Investment income percentage from :					18	<u>%</u>
19a	33 1/3% support tests - 2011. If the	-				•	e 17 is not
	more than 33 1/3%, check this box a	nd stop here. The	e organization qual	fies as a publicly	supported organiz	ation	▶□
t	33 1/3% support tests - 2010. If the	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%	6, and
	line 18 is not more than 33 1/3%, che	ck this box and s	top here. The orga	ınızatıon qualifies	as a publicly supp	orted organizati	on >
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	his box and see in	structions	▶□

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

➤ Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

Name of the organization IOWA

IOWA ASSOCIATION FOR THE EDUCATION OF

Employer identification number

	YOUNG CHILDREN		42-1135283				
Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds of	or Accounts. Complete if the				
	organization answered "Yes" to Form 990, Part IV, lin	e 6.					
		(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year		· · · · · · · · · · · · · · · · · · ·				
2	Aggregate contributions to (during year)						
3	, , ,						
4	Aggregate value at end of year	Aggregate grants from (during year)					
	,		I.f do				
5	Did the organization inform all donors and donor advisors in						
_	are the organization's property, subject to the organization's	•	└ Yes				
6	6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only						
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring						
D-	impermissible private benefit?		Yes No				
Pai			t IV, line 7.				
1	Purpose(s) of conservation easements held by the organization						
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an histo	rically important land area				
	Protection of natural habitat	Preservation of a certific	ed historic structure				
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form of	a conservation easement on the last				
	day of the tax year.						
			Held at the End of the Tax Year				
а	Total number of conservation easements		2a				
b	Total acreage restricted by conservation easements		2b				
c	Number of conservation easements on a certified historic str	ucture included in (a)	2c				
d	Number of conservation easements included in (c) acquired	` '					
ŭ	listed in the National Register	arter of 17700, and not on a historic structure					
3	Number of conservation easements modified, transferred, rel	loosed extinguished or terminated by the e	2d				
3	year	leased, extinguished, or terminated by the o	rganization during the tax				
4	·	nament is leasted .					
4	Number of states where property subject to conservation ea						
5	Does the organization have a written policy regarding the per						
	violations, and enforcement of the conservation easements r		Yes L No				
6	Staff and volunteer hours devoted to monitoring, inspecting,						
7	Amount of expenses incurred in monitoring, inspecting, and						
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)	````				
	and section 170(h)(4)(B)(ii)?		└── Yes └── No				
9	In Part XIV, describe how the organization reports conservation						
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the	e organization's accounting for				
-	conservation easements						
Pai	t III Organizations Maintaining Collections o		er Similar Assets.				
	Complete if the organization answered "Yes" to Form						
1a	If the organization elected, as permitted under SFAS 116 (AS						
	historical treasures, or other similar assets held for public ext	nibition, education, or research in furtheranc	e of public service, provide, in Part XIV,				
	the text of the footnote to its financial statements that descri	bes these items.					
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement a	nd balance sheet works of art, historical				
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of public	c 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 tre	asures, or other similar assets for financial o	ain, provide				
_	the following amounts required to be reported under SFAS 1	-	, p. 31100				
а	Revenues included in Form 990, Part VIII, line 1	To a coop rolating to these items.	• ¢				
_	Assets included in Form 990, Part X	S					
b	resers included in Fulli 330, Fall A		> \$				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2011

IOWA ASSOCIATION FOR THE EDUCATION OF

	dule D (Form 990) 2011 YOUNG C				_					3 Page 2
Pai	rt III Organizations Maintaining C									
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following that	t are a s	ignificant i	use of its	collectio	n items
	(check all that apply):									
а	Public exhibition	(hange progra					
b	Scholarly research	•		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co							se in Par	t XIV	
5	During the year, did the organization solicit of					er sımıla	r assets		_	
	to be sold to raise funds rather than to be m								Yes	No_
Pai	t IV Escrow and Custodial Arran		lete if the	e organizatio	on answered "	'Yes" to	Form 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	contribution	ns or other as:	sets not	included		7	
	on Form 990, Part X?							L_	」Yes	∟ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table:			_ 			
									Amoun	<u>t</u>
С	Beginning balance	•					1c			
d	Additions during the year					_	1d	_		
е	Distributions during the year						1e	-		
f	Ending balance		040				1f		7	
	Did the organization include an amount on F		217						Yes	L No
Par	If "Yes," explain the arrangement in Part XIV			*V* +- F-	000 Dow	N/ l 1	10			
r ai	t V Endowment Funds. Complete		1							
4.	Decimaling of wars belowed	(a) Current year	(D) F	Prior year	(c) Two year	S Dack	(a) Three y	ears Dack	(e) FOUI	years back
1a	Beginning of year balance		-							
D	Contributions		 							
С.	Net investment earnings, gains, and losses							··		
a	Grants or scholarships									
е	Other expenditures for facilities					l			ŧ.	*
	and programs		 							
-	Administrative expenses		 	 						
9 2	End of year balance Provide the estimated percentage of the curr	ront year and halan	L. June 1	a column /	l hold as	1				
2	Board designated or quasi-endowment	rent year end balanc	% (IIIIe 1	g, column (a	a)) neid as					
a h	Permanent endowment									
0	Temporarily restricted endowment	% %								
C	The percentages in lines 2a, 2b, and 2c shou									
3a	Are there endowment funds not in the posse		ation the	at are held a	and administer	red for t	he organiz	ation		
-	by	object of the organiz		at are more	ina dan iinioto	.00 101 1	ino organiz	ation	-	Yes No
	(i) unrelated organizations								3a(i)	103 100
	(ii) related organizations	-							3a(ii)	
ь	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Scher	dule R?					3b	
4	Describe in Part XIV the intended uses of the						•	•		
Pai	t VI Land, Buildings, and Equipm									
	Description of property	(a) Cost or o			t or other	(c) A	ccumulate	ed	(d) Boo	k value
		basis (investi		1 7 5	(other)	٠,	preciation		(4) 500	· • • • • • • • • • • • • • • • • • • •
1a	Land		····							
	Buildings					· » <u> </u>				
	Leasehold improvements									
	Equipment									
	Other									
		15 000 0								

Schedule D (Form 990) 2011

Part VII Investments - Other Securities.			42	-1135283 Page
(a) Description of security or category		<u>2</u> 	(c) Method of valua	etion
(including name of security)	(b) Book value	c	Cost or end-of-year mai	
(1) Financial derivatives		<u> </u>		
(2) Closely-held equity interests				
(3) Other				
(A) MONEY MARKET FUNDS	16,571.		YEAR MARKET	
(B) COMMON STOCKS	17,493.	END-OF-	YEAR MARKET	VALUE
(C)				
(D)				
(E)				
(F) (G)				
(H)		 		
(1)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)	34,064.	,		1 3 2
Part VIII Investments - Program Related.				
(a) Description of investment type	(b) Book value		(c) Method of valua	
	(2)		ost or end-of-year mar	ket value
(1)				
(2)		 		
(3)				
				·
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)		i skini -	Application of the second	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Part*IX Other Assets. See Form 990, Part X, lin	a) Description	-		(b) Book value
(1)	a) Decemption			(b) Dook value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				·
(10) Total. (Column (b) must equal Form 990, Part X, col (B) III	no 15 \			
Part X Other Liabilities. See Form 990, Part >			·····	
(a) Description of liability		(b) Book value	י מי מוני מוני מוני מוני מוני מוני מוני	
(1) Federal income taxes				· ,
(2)		<u></u>	, ,	4
(3)				,
(4)		···	_	•
(5)		·	- 1 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(6)		<u>,</u>		1
(7)			- (·
(8) (9)		 	- · · ·	:
(10)			1	
(11)			,	
Total. (Column (b) must equal Form 990, Part X, col (B) In FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote 2. FIN 48 (ASC 740)	ne 25)			2 5,-
FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote FIN 48 (ASC 740)	e to the organization's financial stater	ments that reports the org	anızation's liability for uncerta	un tax positions under
132053 01-23-12				edule D (Form 990) 201

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IOWA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN Schedule D (Form 990) 2011 42-1135283 Page 4 Part XI | Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements Total revenue (Form 990, Part VIII, column (A), line 12) 1,241,338. Total expenses (Form 990, Part IX, column (A), line 25) 1,251,431. 2 2 -10,093. 3 Excess or (deficit) for the year Subtract line 2 from line 1 3 Net unrealized gains (losses) on investments -25,082. 4 5 Donated services and use of facilities 5 6 Investment expenses 6 Prior period adjustments 7 Other (Describe in Part XIV) 8 8 -25,082. 9 Total adjustments (net) Add lines 4 through 8 9 -35,175 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 Part XII | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1,216,256. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 -25,082. Net unrealized gains on investments 2a Donated services and use of facilities 2b c Recovenes of prior year grants 2c d Other (Describe in Part XIV) 2d Add lines 2a through 2d <u>-25,082.</u> 26 241,338. Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1. Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV) 4b c Add lines 4a and 4b 4c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 241 338. 5 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements 1,251,431. 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 Other losses 2¢ Other (Describe in Part XIV) 2d 0. e Add lines 2a through 2d 251 431. Subtract line 2e from line 1 3 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 Other (Describe in Part XIV) 4b c Add lines 4a and 4b 4c Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 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, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information PART X, LINE 2: THE ASSOCIATION HAS ADOPTED THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAX REQUIREMENTS AS REQUIRED BY THE INCOME TAX TOPIC OF THE FASB ACCOUNTING STANDARDS CODIFICATION.

Schedule D (Form 990) 2011

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

132211 01-23-12

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization IO

IOWA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN

Employer identification number 42-1135283

10010 0112011111
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PROMOTE PROFESSIONALISM IN THE FIELD.
FORM 990, PART VI, SECTION A, LINE 6: ORGANIZATION HAS MEMBERS.
FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS ELECT THE GOVERNING BODY.
FORM 990, PART VI, SECTION A, LINE 7B: DECISIONS OF GOVERNING BODY ARE
SUBJECT TO APPROVAL BY MEMBERS.
FORM 990, PART VI, SECTION B, LINE 11: THE GOVERNING BOARD AND/OR
GOVERNING BOARD EXECUTIVE COMMITTEE REVIEWS FORM 990 BEFORE FILING.
FORM 990, PART VI, SECTION B, LINE 12C: WRITTEN CONFLICT OF INTEREST
POLICIES ARE UPDATED AND REVIEWED ANNUALLY FOR EACH BOARD MEMBER.
FORM 990, PART VI, SECTION B, LINE 15A: EXECUTIVE DIRECTOR'S COMPENSATION
IS EVALUATED AND REVIEWED BY EXECUTIVE COMMITTEE ANNUALLY.
FORM 990, PART VI, SECTION C, LINE 19: BOARD MEETING MINUTES, FINANCIAL
RECORDS AND OTHER OFFICIAL DOCUMENTS ARE AVAILABLE TO PUBLIC ON WEBSITE.
FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, CONFIDENTIALITY
STATEMENTS AND AGENCY POLICIES ARE AVAILABLE ON REQUEST.
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:
NET UNREALIZED LOSSES ON INVESTMENTS: -25,082
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (201

Schedule O (Form 990 or 990 EZ) (2011)	Page 2
Name of the organization IOWA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN	Employer identification number 42-1135283
•	
PART XI, LINE 2C: ORGANIZATIONAL COMMITTEE ASSUMES RESPO	NSIBILITY FOR
OVERSIGHT OF AUDIT OF FINANCIAL STATEMENTS AND SELECTION	OF INDEPENDENT
ACCOUNTANT. THIS PROCEDURE HAS NOT CHANGED FROM PRIOR Y	EAR.