



**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

| <i>Do not include amounts reported on the 6b, 8, 9, 0b, or 6l of part I</i>  | (A) Total    | (B) Program services | (C) Management and general | (D) Fundraising |
|--|--------------|----------------------|----------------------------|-----------------|
| 22a Grants paid from donor advised funds (attach schedule)<br>(cash \$ <u>0</u> . noncash \$ <u>0</u> .<br>If this amount includes foreign grants, check here <input type="checkbox"/> 22a |              |                      |                            |                 |
| 22b Other grants and allocations (attach schedule)<br>(cash \$ <u>0</u> . noncash \$ <u>0</u> .<br>If this amount includes foreign grants, check here <input type="checkbox"/> 22b         |              |                      |                            |                 |
| 23 Specific assistance to individuals (attach schedule)  | 23           |                      |                            |                 |
| 24 Benefits paid to or for members (attach schedule)   | 24           |                      |                            |                 |
| 25a Compensation of current officers, directors, key employees, etc. listed in Part V-A  | 25a 84,397.  |                      |                            |                 |
| b Compensation of former officers, directors, key employees, etc. listed in Part V-B   | 25b 114,740. |                      |                            |                 |
| c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)                   | 25c          |                      |                            |                 |
| 26 Salaries and wages of employees not included on lines 25a, b, and c   | 26           |                      |                            |                 |
| 27 Pension plan contributions not included on lines 25a, b, and c  | 27           |                      |                            |                 |
| 28 Employee benefits not included on lines 25a - 27  | 28           |                      |                            |                 |
| 29 Payroll taxes   | 29 10,900.   |                      |                            |                 |
| 30 Professional fundraising fees   | 30           |                      |                            |                 |
| 31 Accounting fees   | 31 2,500.    |                      |                            |                 |
| 32 Legal fees  | 32 1,535.    |                      |                            |                 |
| 33 Supplies  | 33 1,337.    |                      |                            |                 |
| 34 Telephone   | 34 3,380.    |                      |                            |                 |
| 35 Postage and shipping  | 35 7,750.    |                      |                            |                 |
| 36 Occupancy   | 36           |                      |                            |                 |
| 37 Equipment rental and maintenance  | 37           |                      |                            |                 |
| 38 Printing and publications   | 38 3,163.    |                      |                            |                 |
| 39 Travel  | 39 14,936.   |                      |                            |                 |
| 40 Conferences, conventions, and meetings  | 40 4,680.    |                      |                            |                 |
| 41 Interest  | 41           |                      |                            |                 |
| 42 Depreciation, depletion, etc. (attach schedule)   | 42 279.      |                      |                            |                 |
| 43 Other expenses not covered above (itemize):   |              |                      |                            |                 |
| a _____  | 43a          |                      |                            |                 |
| b _____  | 43b          |                      |                            |                 |
| c _____  | 43c          |                      |                            |                 |
| d _____  | 43d          |                      |                            |                 |
| e _____  | 43e          |                      |                            |                 |
| f _____  | 43f          |                      |                            |                 |
| g <b>SEE STATEMENT 2</b>   | 43g 49,080.  |                      |                            |                 |
| 44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)   | 44 298,677.  |                      |                            |                 |

Joint Costs. Check  if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No

If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A ; (ii) the amount allocated to Program services \$ N/A ; (iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

Part III Statement of Program Service Accomplishments (See the instructions)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments

What is the organization's primary exempt purpose? SEE STATEMENT 3

Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)

a MEMBERSHIP AND SPECIAL PROJECTS WHICH PROMOTE THE COLLISION REPAIR INDUSTRY AND PROVIDE MEMBERS WITH NETWORKING AND EDUCATIONAL OPPORTUNITIES.

(Grants and allocations \$ ) If this amount includes foreign grants, check here

b

(Grants and allocations \$ ) If this amount includes foreign grants, check here

c

(Grants and allocations \$ ) If this amount includes foreign grants, check here

d

(Grants and allocations \$ ) If this amount includes foreign grants, check here

e Other program services (attach schedule)

(Grants and allocations \$ ) If this amount includes foreign grants, check here

f Total of Program Service Expenses (should equal line 44, column (B), Program services)

**Part IV Balance Sheets** (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

|   |   | (A)<br>Beginning of year | (B)<br>End of year |
|---|---|--------------------------|--------------------|
| Assets  | 45 Cash - non-interest-bearing  | 20,829.                  | 14,611.            |
|   | 46 Savings and temporary cash investments   | 20,608.                  | 20,610.            |
|   | 47 a Accounts receivable  | 1,438.                   |                    |
|   | 47 b Less: allowance for doubtful accounts  |                          | 1,438.             |
|   | 48 a Pledges receivable   |                          |                    |
|   | 48 b Less: allowance for doubtful accounts  |                          |                    |
|   | 49 Grants receivable  |                          |                    |
|   | 50 a Receivables from current and former officers, directors, trustees, and key employees   |                          |                    |
|   | 50 b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) |                          |                    |
|   | 51 a Other notes and loans receivable   |                          |                    |
|   | 51 b Less: allowance for doubtful accounts  |                          |                    |
|   | 52 Inventories for sale or use  |                          |                    |
|   | 53 Prepaid expenses and deferred charges  | 3,498.                   | 5,292.             |
|   | 54 a Investments - publicly-traded securities   |                          |                    |
|   | 54 b Investments - other securities   |                          |                    |
| 55 a Investments - land, buildings, and equipment basis   |   |                          |                    |
| 55 b Less: accumulated depreciation   |   |                          |                    |
| 56 Investments - other  |   |                          |                    |
| 57 a Land, buildings, and equipment: basis  | 3,918.  |                          |                    |
| 57 b Less: accumulated depreciation   | 1,413.  | 2,505.                   |                    |
| 58 Other assets, including program-related investments (describe <b>INVESTMENT IN PARTNERSHIP</b> )   | 25,000.   | 45,000.                  |                    |
| 59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58  | 70,935.   | 89,456.                  |                    |
| Liabilities   | 60 Accounts payable and accrued expenses  | 2,343.                   | 96.                |
|   | 61 Grants payable   |                          |                    |
|   | 62 Deferred revenue   |                          |                    |
|   | 63 Loans from officers, directors, trustees, and key employees  |                          |                    |
|   | 64 a Tax-exempt bond liabilities  |                          |                    |
|   | 64 b Mortgages and other notes payable  |                          |                    |
|   | 65 Other liabilities (describe <b>ADVANCED DUES COLLECTED</b> )   | 0.                       | 6,000.             |
| 66 <b>Total liabilities</b> . Add lines 60 through 65   | 2,343.  | 6,096.                   |                    |
| Net Assets or Fund Balances   | Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.         |                          |                    |
|   | 67 Unrestricted   |                          |                    |
|   | 68 Temporarily restricted   |                          |                    |
|   | 69 Permanently restricted   |                          |                    |
|   | Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 70 through 74            |                          |                    |
|   | 70 Capital stock, trust principal, or current funds   | 0.                       | 0.                 |
|   | 71 Paid-in or capital surplus, or land, building, and equipment fund  | 0.                       | 0.                 |
|   | 72 Retained earnings, endowment, accumulated income, or other funds   | 68,592.                  | 83,360.            |
| 73 <b>Total net assets or fund balances</b> . Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21) | 68,592.   | 83,360.                  |                    |
| 74 <b>Total liabilities and net assets/fund balances</b> . Add lines 66 and 73  | 70,935.   | 89,456.                  |                    |



|                 |   |     |                                     |                                     |
|-----------------|---|-----|-------------------------------------|-------------------------------------|
| <b>Part V-A</b> | <b>Current Officers, Directors, Trustees, and Key Employees</b> <i>(continued)</i>  |     | <b>Yes</b>                          | <b>No</b>                           |
| <b>75 a</b>     | Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings <span style="float:right">▶ <u>15</u></span>   |     |                                     |                                     |
| <b>b</b>        | Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s) <span style="float:right"><b>SEE STATEMENT 5</b></span>   | 75b | <input checked="" type="checkbox"/> |                                     |
| <b>c</b>        | Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization"<br>If "Yes," attach a statement that includes the information described in the instructions. | 75c |                                     | <input checked="" type="checkbox"/> |
| <b>d</b>        | Does the organization have a written conflict of interest policy?   | 75d | <input checked="" type="checkbox"/> |                                     |

| <b>Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits</b> (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.) |                        |   |   |  |
|--|------------------------|---|---|--|
| (A) Name and address   | (B) Loans and Advances | (C) Compensation (if not paid, enter -0-) | (D) Contributions to employee benefit plans & deferred compensation plans | (E) Expense account and other allowances |
| JEFF HENDLER<br>SEE ATTACHED   | 0.                     | 114,740.                                  | 0.  | 0.                                       |
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|                |   |     |                                     |                                     |
|----------------|---|-----|-------------------------------------|-------------------------------------|
| <b>Part VI</b> | <b>Other Information</b> <i>(See the instructions.)</i>   |     | <b>Yes</b>                          | <b>No</b>                           |
| <b>76</b>      | Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change  | 76  |                                     | <input checked="" type="checkbox"/> |
| <b>77</b>      | Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.   | 77  |                                     | <input checked="" type="checkbox"/> |
| <b>78 a</b>    | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  | 78a |                                     | <input checked="" type="checkbox"/> |
| <b>b</b>       | If "Yes," has it filed a tax return on Form 990-T for this year? <span style="float:right">N/A</span>   | 78b |                                     |                                     |
| <b>79</b>      | Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement   | 79  |                                     | <input checked="" type="checkbox"/> |
| <b>80 a</b>    | Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? | 80a | <input checked="" type="checkbox"/> |                                     |
| <b>b</b>       | If "Yes," enter the name of the organization ▶ <u>DATABASE ENHANCEMENT GATEWAY, LLC</u> and check whether it is <input type="checkbox"/> exempt or <input checked="" type="checkbox"/> nonexempt                          |     |                                     |                                     |
| <b>81 a</b>    | Enter direct and indirect political expenditures. (See line 81 instructions) <span style="float:right">81a   <u>0.</u></span>   |     |                                     |                                     |
| <b>b</b>       | Did the organization file Form 1120-POL for this year?  | 81b |                                     | <input checked="" type="checkbox"/> |

| <b>Part VI</b> | <b>Other Information</b> <i>(continued)</i>  |     | <b>Yes</b> | <b>No</b> |
|----------------|--|-----|------------|-----------|
| 82 a           | Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?  | 82a |            | X         |
| b              | If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III.)  | 82b |            | N/A       |
| 83 a           | Did the organization comply with the public inspection requirements for returns and exemption applications?  | 83a | X          |           |
| b              | Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?  | 83b |            | N/A       |
| 84 a           | Did the organization solicit any contributions or gifts that were not tax deductible?  | 84a |            | X         |
| b              | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  | 84b |            | N/A       |
| 85 a           | 501(c)(4), §, or 6. Were substantially all dues nondeductible by members?  | 85a |            | X         |
| b              | Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year  | 85b | X          |           |
| c              | Dues, assessments, and similar amounts from members  | 85c |            | N/A       |
| d              | Section 162(e) lobbying and political expenditures   | 85d |            | N/A       |
| e              | Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices   | 85e |            | N/A       |
| f              | Taxable amount of lobbying and political expenditures (line 85d less 85e)  | 85f |            | N/A       |
| g              | Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?  | 85g |            | N/A       |
| h              | If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?   | 85h |            | N/A       |
| 86             | 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12  | 86a |            | N/A       |
| b              | Gross receipts, included on line 12, for public use of club facilities   | 86b |            | N/A       |
| 87             | 501(c)(12) organizations. Enter: a Gross income from members or shareholders   | 87a |            | N/A       |
| b              | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  | 87b |            | N/A       |
| 88 a           | At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX   | 88a |            | X         |
| b              | At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI  | 88b |            | X         |
| 89 a           | 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911 <u>N/A</u> ; section 4912 <u>N/A</u> ; section 4955 <u>N/A</u>  |     |            |           |
| b              | 501(c)(3) and 51(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction   | 89b |            | N/A       |
| c              | Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <u>0.</u>  |     |            |           |
| d              | Enter: Amount of tax on line 89c, above, reimbursed by the organization <u>0.</u>  |     |            |           |
| e              | All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?  | 89e |            | X         |
| f              | All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?  | 89f |            | X         |
| g              | For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  | 89g |            | X         |
| 90 a           | List the states with which a copy of this return is filed <b>NONE</b>  |     |            |           |
| b              | Number of employees employed in the pay period that includes March 12, 2007  | 90b |            | 1         |
| 91 a           | The books are in care of <b>LINDA ATKINS</b> Telephone no. <b>(877) 841-0660</b><br>Located at <b>PO BOX 909, PROSSER, WA</b> ZIP + 4 <b>99350</b>   |     |            |           |
| b              | At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <u>N/A</u><br>See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | 91b |            | X         |

**Part VI Other Information** (continued) Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c    
 If "Yes," enter the name of the foreign country N/A

92 Section 47(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here   
 and enter the amount of tax-exempt interest received or accrued during the tax year 92 | N/A

**Part VII Analysis of Income-Producing Activities** (See the instructions)

**Note:** Enter gross amounts unless otherwise indicated.

|   | Unrelated business income |               | Excluded by section 512, 513, or 514 |               | (E)<br>Related or exempt<br>function income |
|---|---------------------------|---------------|--------------------------------------|---------------|---|
|   | (A)<br>Business<br>code   | (B)<br>Amount | (C)<br>Exclu-<br>sion<br>code        | (D)<br>Amount |   |
| 93 Program service revenue:                                     |                           |               |                                      |               |   |
| a WEBSITE INCOME  |                           |               |                                      |               | 16,500.                                     |
| b PRODUCT SALES   |                           |               |                                      |               | 195.  |
| c   |                           |               |                                      |               |   |
| d   |                           |               |                                      |               |   |
| e   |                           |               |                                      |               |   |
| f Medicare/Medicaid payments                                    |                           |               |                                      |               |   |
| g Fees and contracts from government agencies                   |                           |               |                                      |               |   |
| 94 Membership dues and assessments                              |                           |               |                                      |               | 295,696.                                    |
| 95 Interest on savings and temporary cash investments           |                           |               | 14                                   | 4.            |   |
| 96 Dividends and interest from securities                       |                           |               |                                      |               |   |
| 97 Net rental income or (loss) from real estate:                |                           |               |                                      |               |   |
| a debt-financed property  |                           |               |                                      |               |   |
| b not debt-financed property                                    |                           |               |                                      |               |   |
| 98 Net rental income or (loss) from personal property           |                           |               |                                      |               |   |
| 99 Other investment income                                      |                           |               |                                      |               |   |
| 100 Gain or (loss) from sales of assets<br>other than inventory |                           |               |                                      |               |   |
| 101 Net income or (loss) from special events                    |                           |               |                                      |               |   |
| 102 Gross profit or (loss) from sales of inventory              |                           |               |                                      |               |   |
| 103 Other revenue:  |                           |               |                                      |               |   |
| a MISCELLANEOUS INCOME  |                           |               |                                      |               | 1,050.                                      |
| b   |                           |               |                                      |               |   |
| c   |                           |               |                                      |               |   |
| d   |                           |               |                                      |               |   |
| e   |                           |               |                                      |               |   |
| 104 Subtotal (add columns (B), (D), and (E))                    |                           | 0.            |                                      | 4.            | 313,441.                                    |
| 105 Total (add line 104, columns (B), (D), and (E))             |                           |               |                                      |               | 313,445.                                    |

**Note:** Line 05 plus the e, Part I should equal the amount on line 2, Part I

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions)

| Line No. | Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes). |
|----------|---|
| 103      | OTHER REVENUE FROM ANCILLARY SERVICES   |
| 93AB     | ALL PROGRAM SERVICES PROMOTE THE INDUSTRY AND PROVIDE MEMBERS OPPORTUNITIES TO DEMONSTRATE THEIR INDUSTRY SPECIALIZATION.   |
| 94       | MEMBERSHIP PROVIDES INDUSTRY NETWORKING AND EDUCATIONAL OPPORTUNITIES.  |

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions)

| (A)<br>Name, address, and EIN of corporation,<br>partnership, or disregarded entity | (B)<br>Percentage of<br>ownership interest | (C)<br>Nature of activities | (D)<br>Total income | (E)<br>End-of-year<br>assets |
|---|--|-----------------------------|---------------------|------------------------------|
| N/A   | %  |                             |                     |                              |
|   | %  |                             |                     |                              |
|   | %  |                             |                     |                              |
|   | %  |                             |                     |                              |

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No  
 (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

**Note:** If "Yes" to (b), file Form 8770 and Form 720 (see instructions).

**Part XI** Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). **N/A**

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

|     |    |
|-----|----|
| Yes | No |
|     |    |

|               | (A)<br>Name, address, of each<br>controlled entity | (B)<br>Employer<br>Identification<br>Number | (C)<br>Description of<br>transfer | (D)<br>Amount of<br>transfer |
|---------------|--|---|-----------------------------------|------------------------------|
| a             | -----<br>-----                                     |   |                                   |                              |
| b             | -----<br>-----                                     |   |                                   |                              |
| c             | -----<br>-----                                     |   |                                   |                              |
| <b>Totals</b> |  |   |                                   |                              |

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

|     |    |
|-----|----|
| Yes | No |
|     |    |

|               | (A)<br>Name, address, of each<br>controlled entity | (B)<br>Employer<br>Identification<br>Number | (C)<br>Description of<br>transfer | (D)<br>Amount of<br>transfer |
|---------------|--|---|-----------------------------------|------------------------------|
| a             | -----<br>-----                                     |   |                                   |                              |
| b             | -----<br>-----                                     |   |                                   |                              |
| c             | -----<br>-----                                     |   |                                   |                              |
| <b>Totals</b> |  |   |                                   |                              |

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

|     |    |
|-----|----|
| Yes | No |
|     |    |

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

Please Sign Here

*Tim Wald* Signature of officer  2-12-09 Date

*Tim Waloren - Treasure* Type or print name and title

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Paid Preparer's Use Only

Preparer's signature *Susan M. Greggo* Date *1-22-09* Check if self-employed  Preparer's SSN or PTIN (See Gen Inst X)

Firm's name (or yours if self-employed), address, and ZIP + 4 **WARADY & DAVIS LLP**  
**1717 DEERFIELD ROAD, SUITE 300S**  
**DEERFIELD, IL 60015** EIN

Phone no. **(847) 267-9600**

Society of Collision Repair Specialists  
FEIN: 43-1275465  
Board Member Contact List

| FIRST   | LAST      | TITLE                                |
|---------|-----------|--------------------------------------|
| Farzam  | Afshar    | Immediate Past Chairman              |
| Danny   | Bailey    | National Director                    |
| Stacy   | Bartnik   | Director At Large, National Director |
| Rollie  | Benjamin  | National Director                    |
| Toby    | Chess     | National Director                    |
| Aaron   | Clark     | Secretary                            |
| Barry   | Dorn      | Vice Chairman                        |
| Bill    | Garoutte  | MO KAN SCRS Chapter Designated Rep.  |
| Dale    | Matsumoto | National Director                    |
| Tom     | Moreland  | Active Past Chairman                 |
| Stephen | Regan     | National Director                    |
| Ronald  | Reichen   | National Director                    |
| Joe     | Skurka    | National Director                    |
| Tim     | Waldren   | Treasurer                            |
| Gary    | Wano, Jr  | Chairman                             |

All board members can be contacted at the address listed on the return.

| Asset No | Description                            | Date Acquired | Method | Life | Line No | Unadjusted Cost Or Basis | Bus % Excl | * Reduction in Basis | Basis For Depreciation | Accumulated Depreciation | Current Sec 179 | Current Year Deduction |
|----------|--|---------------|--------|------|---------|--------------------------|------------|----------------------|------------------------|--------------------------|-----------------|------------------------|
| 1        | COMPUTER<br>* TOTAL 990 PAGE 2<br>DEPR | 011408        | SL     | 5.00 | 16      | 2,785.                   |            | 0.                   | 2,785.                 | 0.                       | 0.              | 279.                   |
|          |  |               |        |      |         | 2,785.                   |            |                      | 2,785.                 |                          |                 | 279.                   |

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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FOOTNOTES

STATEMENT 1

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ON 990 PAGE 6, PART V-B, COMPENSATION AMOUNT INCLUDES AMOUNTS PAID TO COMPANIES OWNED BY JEFF HENDLER, A FORMER BOARD MEMBER, FOR ADMINISTRATION OF THE ORGANIZATION AND CONSULTING.

114,740.

FORM 990 OTHER EXPENSES STATEMENT 2

| DESCRIPTION                     | (A)<br>TOTAL   | (B)<br>PROGRAM<br>SERVICES | (C)<br>MANAGEMENT<br>AND GENERAL | (D)<br>FUNDRAISING |
|---------------------------------|----------------|----------------------------|----------------------------------|--------------------|
| DUES AND SUBSCRIPTIONS          | 4,477.         |                            |                                  |                    |
| CONSULTING                      | 2,900.         |                            |                                  |                    |
| BANK & CREDIT CARD FEES         | 1,929.         |                            |                                  |                    |
| MARKETING AND PROMOTION EXPENSE | 19,721.        |                            |                                  |                    |
| BENEVOLENCE AND CONTRIBUTIONS   | 1,260.         |                            |                                  |                    |
| BAD DEBT EXPENSE                | 15,000.        |                            |                                  |                    |
| PAYROLL SERVICE                 | 1,387.         |                            |                                  |                    |
| INSURANCE                       | 1,540.         |                            |                                  |                    |
| MISCELLANEOUS                   | 162.           |                            |                                  |                    |
| EDUCATION AND TRAINING          | 704.           |                            |                                  |                    |
| <b>TOTAL TO FM 990, LN 43</b>   | <b>49,080.</b> |                            |                                  |                    |

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III STATEMENT 3

EXPLANATION

TRADE ASSOCIATION TO PROMOTE THE COLLISION REPAIR INDUSTRY AND PROVIDE EDUCATION AND NETWORKING OPPORTUNITIES AND BENEFITS TO MEMBERS.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 4

| DESCRIPTION                              | COST OR<br>OTHER BASIS | ACCUMULATED<br>DEPRECIATION | BOOK VALUE    |
|--|------------------------|-----------------------------|---------------|
| COMPUTER                                 | 2,785.                 | 279.                        | 2,506.        |
| <b>TOTAL TO FORM 990, PART IV, LN 57</b> | <b>2,785.</b>          | <b>279.</b>                 | <b>2,506.</b> |

FORM 990

EXPLANATION OF RELATIONSHIP  
PART V-A, LINE 75B

STATEMENT 5

INDIVIDUAL'S NAME

TITLE OR ROLE

STACY BARTNIK

NAT'L DIRECTOR

INDIVIDUAL'S NAME

TITLE OR ROLE

DAN BAILEY

NAT'L DIRECTOR

EXPLANATION OF RELATIONSHIP

WORK FOR SAME COMPANY.

INDIVIDUAL'S NAME

TITLE OR ROLE

STACY BARTNIK

NAT'L DIRECTOR

INDIVIDUAL'S NAME

TITLE OR ROLE

BILL GAROUTTE

NAT'L DIRECTOR

EXPLANATION OF RELATIONSHIP

WORK FOR SAME COMPANY.

| <u>INDIVIDUAL'S NAME</u> | <u>TITLE OR ROLE</u> |
|--------------------------|----------------------|
| STACY BARTNIK            | NAT'L DIRECTOR       |

| <u>INDIVIDUAL'S NAME</u> | <u>TITLE OR ROLE</u> |
|--------------------------|----------------------|
| JEFF HENDLER             | PAST CHAIRMAN        |

EXPLANATION OF RELATIONSHIP  
JEFF WORKS AS AN INDEPENDENT CONTRACTOR FOR STACY'S EMPLOYER.

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| <u>INDIVIDUAL'S NAME</u> | <u>TITLE OR ROLE</u> |
|--------------------------|----------------------|
| DANNY BAILEY             | NAT'L DIRECTOR       |

| <u>INDIVIDUAL'S NAME</u> | <u>TITLE OR ROLE</u> |
|--------------------------|----------------------|
| JEFF HENDLER             | PAST CHAIRMAN        |

EXPLANATION OF RELATIONSHIP  
JEFF WORKS AS AN INDEPENDENT CONTRACTOR FOR DANNY'S EMPLOYER.

| <u>INDIVIDUAL'S NAME</u> | <u>TITLE OR ROLE</u> |
|--------------------------|----------------------|
| BILL GAROUTTE            | NAT'L DIRECTOR       |

| <u>INDIVIDUAL'S NAME</u> | <u>TITLE OR ROLE</u> |
|--------------------------|----------------------|
| DAN BAILEY               | NAT'L DIRECTOR       |

EXPLANATION OF RELATIONSHIP  
WORK FOR SAME COMPANY.

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| <u>INDIVIDUAL'S NAME</u> | <u>TITLE OR ROLE</u> |
|--------------------------|----------------------|
| BILL GAROUTTE            | NAT'L DIRECTOR       |

| <u>INDIVIDUAL'S NAME</u> | <u>TITLE OR ROLE</u> |
|--------------------------|----------------------|
| JEFF HENDLER             | PAST CHAIRMAN        |

EXPLANATION OF RELATIONSHIP  
JEFF WORKS AS AN INDEPENDENT CONTRACTOR FOR BILL'S EMPLOYER.