

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

**2009**

Department of the Treasury  
Internal Revenue Service

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

Open to Public Inspection

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

**A** For the 2009 calendar year, or tax year beginning **JUL 1, 2009** and ending **JUN 30, 2010**

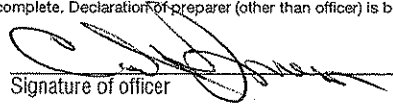
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type.  See Specific Instructions.	<b>C</b> Name of organization <b>RCI INC</b> Doing Business As		<b>D</b> Employer identification number 85-0135073
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1111 MENAUL BLVD NE</b>		<b>E</b> Telephone number 505-255-5501
		City or town, state or country, and ZIP + 4 <b>ALBUQUERQUE, NM 87107-1614</b>		<b>G</b> Gross receipts \$ <b>9,717,440.</b>
		<b>F</b> Name and address of principal officer: <b>CAROL GUERRA</b> <b>SAME AS C ABOVE</b>		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c) ( 3 ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
<b>J</b> Website: <b>WWW.RCI-NM.ORG</b>				
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other				
<b>L</b> Year of formation: <b>1958</b> <b>M</b> State of legal domicile: <b>NM</b>				

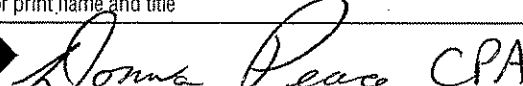
**Part I Summary**

<b>Activities &amp; Governance</b>	1	Briefly describe the organization's mission or most significant activities: <b>TO PROVIDE THERAPY, REHABILITATION, EMPLOYMENT AND DEVELOPMENT OF PERSONS WITH</b>	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	3 10
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 10
	5	Total number of employees (Part V, line 2a)	5 243
	6	Total number of volunteers (estimate if necessary)	6 2
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a 0.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b 0.	
<b>Revenue</b>	8	Contributions and grants (Part VIII, line 1h)	Prior Year 121,439. Current Year 86,745.
	9	Program service revenue (Part VIII, line 2g)	7,927,211. 8,219,379.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-67,791. 97,881.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	525. 14,141.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,981,384. 8,418,146.
<b>Expenses</b>	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,654,573. 5,033,415.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	
	16b	Total fundraising expenses (Part IX, column (D), line 25)	20,646.
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	3,545,473. 3,570,451.	
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,200,046. 8,603,866.	
19	Revenue less expenses. Subtract line 18 from line 12	-218,662. -185,720.	
<b>Net Assets or Fund Balances</b>	20	Total assets (Part X, line 16)	Beginning of Current Year 5,384,408. End of Year 5,314,926.
	21	Total liabilities (Part X, line 26)	2,448,103. 2,535,450.
	22	Net assets or fund balances. Subtract line 21 from line 20	2,936,305. 2,779,476.

**Part II Signature Block**

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

Sign Here:  Date: **9/15/2011**  
 Signature of officer: **CAROL GUERRA, CHAIRMAN**  
 Type or print name and title

Paid Preparer's Use Only: Preparer's signature:  Date: **2/14/11** Check if self-employed:  Preparer's identifying number (see instructions):  
 Firm's name (or yours if self-employed), address, and ZIP + 4: **RICCI & COMPANY, LLC**  
**6200 UPTOWN BLVD NE STE 400**  
**ALBUQUERQUE, NM 87110** EIN: Phone no.: **505-338-0800**

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: TO PROVIDE THERAPY, REHABILITATION, EMPLOYMENT AND DEVELOPMENT OF PERSONS WITH DISABILITIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 2,095,662. including grants of \$ ) (Revenue \$ 2,364,830. ) THERAPEUTIC SERVICES - PROVIDE CERTIFIED AND LICENSED THERAPY FOR CHILDREN AND ADULTS IN THE AREAS OF OCCUPATIONAL, PHYSICAL, AND SPEECH/LANGUAGE. RCI SERVED 875 CLIENTS DURING THE YEAR.

4b (Code: ) (Expenses \$ 708,620. including grants of \$ ) (Revenue \$ 740,520. ) VOCATIONAL SERVICES - PROVIDE OPPORTUNITIES IN THE WORKFORCE TO ADULTS WITH DISABILITIES AND SPECIAL NEEDS. SERVICES INCLUDE CAREER DISCOVERY, WORK ASSESSMENT, JOB DEVELOPMENT, AND JOB COACHING.

4c (Code: ) (Expenses \$ 747,992. including grants of \$ ) (Revenue \$ 874,887. ) DAY HABILITATION - PROVIDE INTEGRATED AND INDIVIDUALIZED COMMUNITY-BASED SERVICES TO ADULTS WITH DEVELOPMENTAL DISABILITIES. ACTIVITIES INCLUDE EXPLORATION, RECREATION, EDUCATION AND COMMUNITY SERVICE. RCI SERVED ABOUT 80 CLIENTS DURING THE YEAR.

4d Other program services. (Describe in Schedule O.) (Expenses \$ 3,807,962. including grants of \$ ) (Revenue \$ 4,253,283. )

4e Total program service expenses \$ 7,360,236.

Part IV Checklist of Required Schedules

Table with 20 rows of questions and columns for Yes/No. Questions include: 1. Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? 2. Is the organization required to complete Schedule B, Schedule of Contributors? 3. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? 4. Section 501(c)(3) organizations. Did the organization engage in lobbying activities? 5. Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? 6. Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? 7. Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? 8. Did the organization maintain collections of works of art, historical treasures, or other similar assets? 9. Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? 10. Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? 11. Is the organization's answer to any of the following questions "Yes"? 12. Did the organization obtain separate, independent audited financial statements for the tax year? 12A. Was the organization included in consolidated, independent audited financial statements for the tax year? 13. Is the organization a school described in section 170(b)(1)(A)(ii)? 14a. Did the organization maintain an office, employees, or agents outside of the United States? 14b. Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? 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? 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? 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? 18. Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? 19. Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 20. Did the organization operate one or more hospitals?

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....		X
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? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
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? <i>If "Yes," complete Schedule J</i> .....		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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> .....		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		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? <i>If "Yes," complete Schedule L, Part I</i> .....		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> .....		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> .....		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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> .....		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
36 <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O. ....	X	

**Part V** Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
1a	37		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2a	243		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note.</i> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	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?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
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?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
8			
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
a	Did the organization make any taxable distributions under section 4966?		
9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
9b			
10	<b>Section 501(c)(7) organizations.</b> Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	<b>Section 501(c)(12) organizations.</b> Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> 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	

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.

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body (10), 1b Enter the number of voting members that are independent (10), 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? (X), 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (X), 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? (X), 5 Did the organization become aware during the year of a material diversion of the organization's assets? (X), 6 Does the organization have members or stockholders? (X), 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? (X), 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? (X), 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X), b Each committee with authority to act on behalf of the governing body? (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 (X).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Does the organization have local chapters, branches, or affiliates? (X), 10b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? (X), 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? (X), 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990., 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 (X), 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X), 12c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done (X), 13 Does the organization have a written whistleblower policy? (X), 14 Does the organization have a written document retention and destruction policy? (X), 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (X), b Other officers or key employees of the organization (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? (X), 16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? (X).

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NM
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
[X] Own website [X] Another's website [X] Upon request
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
BRUCE HAYNES - 505-255-5501
1111 MENAUL BLVD NE, ALBUQUERQUE, NM 87507

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees. 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.

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
LINDA GEISZLER DIRECTOR	1.00	X						0.	0.	0.
CAROL GUERRA CHAIRMAN	2.50	X		X				0.	0.	0.
KATHLEEN CATES DIRECTOR	1.00	X						0.	0.	0.
MYRON SALDYT DIRECTOR	1.00	X						0.	0.	0.
JOAN SCHOFIELD SECRETARY	2.50	X		X				0.	0.	0.
CATHERINE SALAZAR VICE CHAIR	2.50	X		X				0.	0.	0.
CATHY RYPMA-DIXON TREASURER	2.50	X		X				0.	0.	0.
BRAD VAUGHN DIRECTOR	1.00	X						0.	0.	0.
LESLIE STRICKLER, DO DIRECTOR	1.00	X						0.	0.	0.
CATHERINE THOMPkins DIRECTOR	1.00	X						0.	0.	0.
ANGELA VIGIL PRESIDENT & CEO	40.00			X	X			107,612.	0.	4,686.





Part VIII		Statement of Revenue		(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a	57,000.				
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	29,745.				
	g	Noncash contributions included in lines 1a-1f: \$		3,891.				
	h	Total. Add lines 1a-1f			86,745.			
Program Service Revenue	2 a	FEES & CONTRACTS GOVER	Business Code 561700	5,564,827.	5,564,827.			
	b	PROGRAM SERVICES FEES	624100	2,654,552.	2,654,552.			
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			8,219,379.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		26,344.			26,344.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross Rents	(i) Real	(ii) Personal				
			b	Less: rental expenses				
			c	Rental income or (loss)				
			d	Net rental income or (loss)				
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			b	Less: cost or other basis and sales expenses	1370831.			
			c	Gain or (loss)	1299294.			
			d	Net gain or (loss)	71,537.	71,537.		71,537.
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
			b	Less: direct expenses				
			c	Net income or (loss) from fundraising events				
	9 a	Gross income from gaming activities. See Part IV, line 19	a					
b			Less: direct expenses					
c			Net income or (loss) from gaming activities					
10 a	Gross sales of inventory, less returns and allowances	a						
		b	Less: cost of goods sold					
		c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code						
11 a	MISCELLANEOUS	900099		14,141.	14,141.			
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d			14,141.				
12	Total revenue. See instructions.			8,418,146.	8,233,520.	0.	97,881.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	4,252,998.	3,625,926.	627,072.	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	426,560.	357,453.	69,107.	
10 Payroll taxes	353,857.	297,314.	56,543.	
11 Fees for services (non-employees):				
a Management				
b Legal	7,556.	1,785.	5,771.	
c Accounting	20,316.	18.	20,298.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	2,433,238.	2,421,518.	11,720.	
12 Advertising and promotion	22,954.	5,219.	17,735.	
13 Office expenses	80,463.	34,430.	46,033.	
14 Information technology				
15 Royalties				
16 Occupancy	164,224.	99,520.	64,704.	
17 Travel	4,453.	1,514.	2,939.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	102,526.	27,837.	74,689.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	96,314.		96,314.	
23 Insurance	100,676.		100,676.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <b>SUPPLIES</b>	265,298.	255,226.	10,072.	
b <b>COMMISSIONS</b>	135,780.	135,780.		
c <b>TRANSPORTATION SERVICES</b>	95,729.	90,267.	5,462.	
d <b>FUNDRAISING EXPENSES</b>	20,646.			20,646.
e <b>MISCELLANEOUS</b>	20,278.	6,429.	13,849.	
f All other expenses				
<b>25 Total functional expenses.</b> Add lines 1 through 24f	8,603,866.	7,360,236.	1,222,984.	20,646.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	337,000.	1	196,478.
	2	Savings and temporary cash investments	19,495.	2	8,487.
	3	Pledges and grants receivable, net	734,774.	3	794,382.
	4	Accounts receivable, net	428,708.	4	532,834.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	29,830.	9	12,381.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 3,836,361.		
	b	Less: accumulated depreciation	10b 865,168.	10c	2,971,193.
	11	Investments - publicly traded securities	861,220.	11	799,171.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	5,384,408.	16	5,314,926.	
Liabilities	17	Accounts payable and accrued expenses	377,713.	17	354,823.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	1,801,598.	23	1,837,415.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D	268,792.	25	343,212.
	26	<b>Total liabilities.</b> Add lines 17 through 25	2,448,103.	26	2,535,450.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	2,836,810.	27	2,718,505.
	28	Temporarily restricted net assets	99,495.	28	60,971.
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	<b>Total net assets or fund balances</b>	2,936,305.	33	2,779,476.	
34	<b>Total liabilities and net assets/fund balances</b>	5,384,408.	34	5,314,926.	

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:

Separate basis  Consolidated basis  Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2009)



Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f); 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities, whether or not the business is regularly carried on; 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.); 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)); 15 Public support percentage from 2008 Schedule A, Part II, line 14; 16a 33 1/3% support test - 2009; b 33 1/3% support test - 2008; 17a 10% -facts-and-circumstances test - 2009; b 10% -facts-and-circumstances test - 2008; 18 Private foundation.

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	267,012.	199,058.	113,425.	121,439.	86,745.	787,679.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	7146502.	7377101.	7387673.	7927211.	8219379.	38057866.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	7413514.	7576159.	7501098.	8048650.	8306124.	38845545.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b						0.
<b>8 Public support</b> (Subtract line 7c from line 6.)						38845545.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	7413514.	7576159.	7501098.	8048650.	8306124.	38845545.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	39,169.	49,270.	64,047.	46,551.	26,344.	225,381.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	39,169.	49,270.	64,047.	46,551.	26,344.	225,381.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	6,546.	7,648.	1,989.	525.	14,141.	30,849.
13 Total support (Add lines 9, 10c, 11, and 12.)	7459229.	7633077.	7567134.	8095726.	8346609.	39101775.

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

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	99.34 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	99.10 %

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	.58 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	.90 %

19a **33 1/3% support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b **33 1/3% support tests - 2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS

Lined area for providing supplemental information.



**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, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2009**

Open to Public Inspection

Name of the organization

RCI INC

Employer identification number

85-0135073

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
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 impermissible private benefit? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
- Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
 

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06 .....	2d
- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_
- Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_
- Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....
- Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_
- Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....
- In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

(i) Revenues included in Form 990, Part VIII, line 1 .....	▶ \$ _____
(ii) Assets included in Form 990, Part X .....	▶ \$ _____
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
 

a Revenues included in Form 990, Part VIII, line 1 .....	▶ \$ _____
b Assets included in Form 990, Part X .....	▶ \$ _____

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items

(check all that apply):

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

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

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

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

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

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

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

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

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

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

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

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

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

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

- (i) unrelated organizations
  - (ii) related organizations
- b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

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

**Part VI Investments - Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		380,000.		380,000.
b Buildings		2,764,501.	315,837.	2,448,664.
c Leasehold improvements		13,063.	2,518.	10,545.
d Equipment		678,797.	546,813.	131,984.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				2,971,193.





SCHEDULE O

(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public  
Inspection

Name of the organization

RCI INC

Employer identification number

85-0135073

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

DISABILITIES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

NISH - CUSTODIAL HANDICAPPED INDIVIDUALS ARE EMPLOYED PROVIDING  
CUSTODIAL SERVICES FOR CERTAIN BUSINESS UNDER A CONTRACT ARRANGED BY  
NISH.

NISH - SWITCHBOARD HANDICAPPED INDIVIDUALS ARE EMPLOYED PROVIDING  
SWITCHBOARD SERVICES FOR CERTAIN BUSINESS UNDER A CONTRACT ARRANGED BY  
NISH.

LITERACY PROGRAM - PROVIDES TIME, SPACE AND EQUIPMENT FOR HANDICAPPED  
INDIVIDUALS TO DISCOVER THEIR NATURAL TALENTS. THIS ALLOWS THE  
INDIVIDUAL TO CLARIFY VOCATIONAL PURSUITS AND OBTAIN THE SPECIFIC  
RESOURCES AND EMPLOYMENT STRATEGIES TO SUCCEED IN THE COMMUNITY.

CAREER DISCOVERY - FOR ADULTS WHO WANT TO INCREASE THEIR EXPOSURE TO  
THE WORLD OR WORK. THIS INCLUDES WORK ASSESSMENT AND JOB COACHING.  
EXPENSES \$ 3807962. INCLUDING GRANTS OF \$ 0. REVENUE \$ 4253283.

FORM 990, PART VI, SECTION B, LINE 11: THE 990 WAS COMPLETED AND PROVIDED  
TO THE ORGANIZATION. IT WAS REVIEWED BY THE PRESIDENT & CEO, THE DIRECTOR  
OF FINANCE AND THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS. ALL  
QUESTIONS RAISED BY THE ABOVE PARTIES WERE ADDRESSED AND THE 990 WAS  
MODIFIED ACCORDINGLY BEFORE FILING.

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

Schedule O (Form 990) 2009

932211  
02-03-10

SCHEDULE O  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public  
Inspection

Name of the organization

RCI INC

Employer identification number  
85-0135073

FORM 990, PART VI, SECTION B, LINE 12C: RCI, INC. HAS DEVELOPED AND IMPLEMENTED A CODE OF BUSINESS ETHICS AND CONDUCT WHICH HAS BEEN ROLLED OUT TO ALL STAFF AT RCI, INC. THROUGH A TRAINING PROGRAM AND TRACKED VIA A TRAINING CERTIFICATION FORM AND ACKNOWLEDGMENT FORM THAT IS REQUIRED TO BE SIGNED BY EACH EMPLOYEE UPON RECEIVING THE REQUIRED TRAINING AND A COPY OF THE CODE OF BUSINESS ETHICS AND CONDUCT. THIS TRAINING IS PROVIDED TO ALL NEW HIRES AND IS PROVIDED ON AN ANNUAL BASIS TO ALL EMPLOYEES. ALL REQUIRED ACKNOWLEDGEMENT FORMS AND TRAINING CERTIFICATION FORMS ARE MAINTAINED IN EACH EMPLOYEE'S PERSONNEL FILE. THE CONFLICT OF INTEREST POLICY IS COVERED IN THE CODE OF BUSINESS ETHICS AND CONDUCT MANUAL AND THE CORRESPONDING TRAINING MATERIALS. IN ADDITION, CONFLICT OF INTEREST QUESTIONNAIRES ARE GIVEN TO NEW HIRES TO COMPLETE AS PART OF THEIR NEW HIRE ORIENTATION AND REVIEWED BY THE HUMAN RESOURCES PERSONNEL FOR REVIEW AND ASSESSMENT. FINALLY, CONFLICT OF INTEREST QUESTIONNAIRES ARE PERIODICALLY DISTRIBUTED TO ALL EXECUTIVE MANAGEMENT STAFF AND THE BOARD OF DIRECTORS BASED ON THE RESPONSES PROVIDED IN THE CONFLICT OF INTEREST QUESTIONNAIRES.

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD CONTRACTED AN INDEPENDENT COMPANY TO DO A WAGE MARKET ANALYSIS AND PROVIDE THEM WITH A STANDARD RATE OF PAY FOR ALL POSITIONS IN THE ORGANIZATION. THIS PROCESS IS UPDATED ANNUALLY. THE BOARD ALSO DOES AN ANNUAL PERFORMANCE REVIEW OF THE PRESIDENT AND CEO BEFORE FIXING THE AMOUNT OF PAY AND THE PRESIDENT AND CEO DOES AN ANNUAL PERFORMANCE REVIEW OF THE KEY EMPLOYEES.

FORM 990, PART VI, SECTION C, LINE 19: FINANCIAL STATEMENTS ARE AVAILABLE

SCHEDULE O  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public  
Inspection

Name of the organization

RCI INC

Employer identification number

85-0135073

TO THE PUBLIC THROUGH GUIDESTAR, THE ATTORNEY GENERAL OFFICE AND IN THE  
ANNUAL REPORT WHICH IS ON RCI, INC'S WEBSITE WWW.RCINM.ORG. INDIVIDUALS  
CAN ALSO REQUEST A COPY OF THE FINANCIAL STATEMENTS. GOVERNING DOCUMENTS  
INCLUDING THE CONFLICT OF INTEREST POLICY ARE INTERNAL DOCUMENTS BUT COPIES  
ARE MADE AVAILABLE UPON REQUEST. SOME OF THE GOVERNING DOCUMENTS WILL NOW  
BE AVAILABLE TO THE PUBLIC SINCE THEY WILL BE SUBMITTED WITH THE ATTORNEY  
GENERAL OFFICE AS PART OF THE REGISTRATION PACKET.

# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box  **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II (on page 2 of this form).

**Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**  
**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

*All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.*

<b>Type or print</b>	Name of exempt organization <b>RCI INC</b>	Employer identification number <b>85-0135073</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>1111 MENAUL BLVD NE</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>ALBUQUERQUE, NM 87107-1614</b>	

Enter the Return code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**BRUCE HAYNES**

• The books are in the care of ▶ **1111 MENAUL BLVD NE - ALBUQUERQUE, NM 87507**  
 Telephone No. ▶ **505-255-5501** FAX No. ▶ \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

**1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2011**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year \_\_\_\_\_ or  
 ▶  tax year beginning **JUL 1, 2009**, and ending **JUN 30, 2010**.

**2** If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	0.
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	0.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.  
 LHA For Paperwork Reduction Act Notice, see Instructions. Form 8868 (Rev. 1-2011)