

Form **990-EZ**

**Short Form**  
**Return of Organization Exempt From Income Tax**  
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
 (except black lung benefit trust or private foundation)

OMB No 1545-1150

**2009**

**Open to Public Inspection**

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.  
 ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Department of the Treasury  
 Internal Revenue Service

**A** For the 2009 calendar year, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <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 MISSOURI ALLIANCE FOR HISTORICAL PRESERVATION	<b>D</b> Employer identification number 51-0188614
		Number and street (or P O box, if mail is not delivered to street address) Room/suite PO BOX 1715	<b>E</b> Telephone number
		City or town, state or country, and ZIP + 4 COLUMBIA MO 65203-2850	<b>F</b> Group Exemption Number

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

**G** Accounting method  Cash  Accrual  
 Other (specify) ▶

**I** Website: ▶ N/A

**J** Tax-exempt status (check only one) —  501(c) ( 3 ) ◀ (insert no )  4947(a)(1) or  527

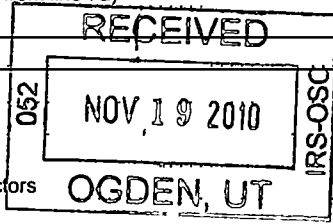
**H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

**K** Check  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return

**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 252,256

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

<b>Expenses</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received	<b>1</b>	130,833
	<b>2</b> Program service revenue including government fees and contracts	<b>2</b>	112,176
	<b>3</b> Membership dues and assessments	<b>3</b>	8,093
	<b>4</b> Investment income	<b>4</b>	1,154
	<b>5a</b> Gross amount from sale of assets other than inventory	<b>5a</b>	
	<b>b</b> Less: cost or other basis and sales expenses	<b>5b</b>	
	<b>c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	<b>5c</b>	
	<b>6</b> Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
	<b>a</b> Gross revenue (not including \$ 110,978 of contributions reported on line 1)	<b>6a</b>	
	<b>b</b> Less: direct expenses other than fundraising expenses	<b>6b</b>	74,078
	<b>c</b> Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	<b>6c</b>	-74,078
	<b>7a</b> Gross sales of inventory, less returns and allowances	<b>7a</b>	
	<b>b</b> Less: cost of goods sold	<b>7b</b>	
	<b>c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	<b>7c</b>	
	<b>8</b> Other revenue (describe ▶)	<b>8</b>	
	<b>9 Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	<b>9</b>	178,178
	<b>10</b> Grants and similar amounts paid (attach schedule)	<b>10</b>	
<b>11</b> Benefits paid to or for members	<b>11</b>		
<b>12</b> Salaries, other compensation, and employee benefits	<b>12</b>	57,361	
<b>13</b> Professional fees and other payments to independent contractors	<b>13</b>	7,105	
<b>14</b> Occupancy, rent, utilities, and maintenance	<b>14</b>	7,700	
<b>15</b> Printing, publications, postage, and shipping	<b>15</b>	2,122	
<b>16</b> Other expenses (describe ▶ SEE STATEMENT 2)	<b>16</b>	74,832	
<b>17 Total expenses.</b> Add lines 10 through 16	<b>17</b>	149,120	
<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9)	<b>18</b>	29,058	
<b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	<b>19</b>	143,307	
<b>20</b> Other changes in net assets or fund balances (attach explanation)	<b>20</b>		
<b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20	<b>21</b>	172,365	



**Part II Balance Sheets.** If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)

	(A) Beginning of year	(B) End of year
<b>22</b> Cash, savings, and investments	143,307	172,365
<b>23</b> Land and buildings		
<b>24</b> Other assets (describe ▶)		
<b>25 Total assets</b>	143,307	172,365
<b>26 Total liabilities</b> (describe ▶)	0	0
<b>27 Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	143,307	172,365

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

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**Part V Other Information** (Note the statement requirements in the instructions for Part V.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr <span style="float:right">▶ <b>37a</b></span>		
b	Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved <span style="float:right">▶ <b>38b</b></span>		
39	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on line 9 <span style="float:right">▶ <b>39a</b></span>		
b	Gross receipts, included on line 9, for public use of club facilities <span style="float:right">▶ <b>39b</b></span>		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <span style="float:right">▶ _____</span>		
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization <span style="float:right">▶ _____</span>		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41	List the states with which a copy of this return is filed. <span style="float:right">▶ <u>NONE</u></span>		
42a	The organization's books are in care of <span style="float:right">▶ _____</span> Telephone no. <span style="float:right">▶ _____</span> Located at <span style="float:right">▶ _____</span> ZIP + 4 <span style="float:right">▶ _____</span>		
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: <span style="float:right">▶ _____</span> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: <span style="float:right">▶ _____</span>		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here <span style="float:right">▶ <input type="checkbox"/></span> and enter the amount of tax-exempt interest received or accrued during the tax year <span style="float:right">▶ <b>43</b></span>		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X

**Part VII Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
49a Did the organization make any transfers to an exempt non-charitable related organization?		X
b If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over \$100,000 ▶ \_\_\_\_\_

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

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000 ▶ \_\_\_\_\_

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

Signature of officer: Derek L. Smith Date: 11-15-10  
 Type or print name and title: Derek L. Smith, Treasurer

**Paid Preparer's Use Only**

Preparer's signature: FRED W. KORTE, JR., CPA Date: 09/30/10 Check if self-employed:  Preparer's Identifying Number (See instr): P00141543

Firm's name (if yours if self-employed), address, and ZIP + 4: GERDING, KORTE & CHITWOOD, PC, CPA'S  
723 MAIN STREET  
BOONVILLE, MO 65233 EIN: 43-1260512  
 Phone no: 660-882-7000

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



**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**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	27,523	52,496	62,116	76,155	130,833	349,123
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3	27,523	52,496	62,116	76,155	130,833	349,123
<b>5</b> 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)						
<b>6 Public support.</b> Subtract line 5 from line 4						349,123

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>7</b> Amounts from line 4	27,523	52,496	62,116	76,155	130,833	349,123
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,029	3,255	2,642	1,320	1,154	10,400
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on					0	
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>11 Total support.</b> Add lines 7 through 10						359,523
<b>12</b> Gross receipts from related activities, etc. (see instructions)					12	121,423
<b>13 First five years.</b> 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 <input type="checkbox"/>						

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

<b>14</b> Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	97.11 %
<b>15</b> Public support percentage from 2008 Schedule A, Part II, line 14	<b>15</b>	96.78 %
<b>16a 33 1/3 % support test—2009.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
<b>b 33 1/3 % support test—2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test—2009.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test—2008.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

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 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 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.); 13 Total support. (Add lines 9, 10c, 11, and 12)

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

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2008 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2008 Schedule A, Part III, line 17 18 %

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.



**Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments**

Description	Amount
MEMBERSHIP INCOME	\$ 8,093
TOTAL	\$ 8,093

**Statement 2 - Form 990-EZ, Part I, Line 16 - Other Expenses**

Description	Amount
ANNUAL CONFERENCE	\$
CONFERENCE EXPENSES	53,263
EXPENSES	
OFFICE EXPENSE	2,381
POSTAGE	317
TELEPHONE & INTERNET	2,906
TRAVEL	2,734
INSURANCE	1,745
TEN MOST EXPENSE	564
FUNDRAISING	693
AWARDS EXPENSE	2,986
BOARD MEETING SUPP	1,728
CREDIT CARD FEES	2,528
DUES & SUBSCRIPTIONS	394
BANK SERVICE CHARGES	399
FINANCE CHARGE	681
OTHER EXPENSES	1,513
TOTAL	\$ 74,832

**Statement 3 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose**Description

THE MISSOURI ALLIANCE FOR HISTORIC PRESERVATION IS DEDICATED TO PROMOTING, SUPPORTING, AND COORDINATING HISTORIC PRESERVATION ACTIVITIES THROUGHOUT THE STATE OF MISSOURI.

Missouri Alliance for Historical Preservation  
Attachment to Form 990-EZ  
Part IV - List of Officers, Directors, Trustees and Key Employees

(a) <u>Name and Address</u>	(b) <u>Title</u>	(c) <u>Hours</u>	(c) <u>Compensation</u>	(d) <u>Benefit Plans</u>	(e) <u>Expenses</u>
Barbara Fitzgerald PO Box 1715 Columbia, MO 65205	Executive Director	45	47,000	0	0
Karen Baxter PO Box 1715 Columbia, MO 65205	President	10	0	0	0
Tim Boyle PO Box 1715 Columbia, MO 65205	Vice President	5	0	0	0
Trudy Faulkner	Vice President	7	0	0	0
Derek Smith PO Box 1715 Columbia, MO 65205	Treasurer	5	0	0	0
Frank Salter PO Box 1715 Columbia, MO 65205	Secretary	5	0	0	0
Michael Griffin PO Box 1715 Columbia, MO 65205	At - Large Exec.	3	0	0	0
Gail Emrie PO Box 1715 Columbia, MO 65205	Board Member	1	0	0	0
Michael Esser PO Box 1715 Columbia, MO 65205	Board Member	1	0	0	0
George Esser PO Box 1715 Columbia, MO 65205	Board Member	1	0	0	0
Angie Gaebler PO Box 1715 Columbia, MO 65205	Board Member	3	0	0	0
Susan Hart PO Box 1715 Columbia, MO 65205	Board Member	3	0	0	0

Missouri Alliance for Historical Preservation  
Attachment to Form 990-EZ  
Part IV - List of Officers, Directors, Trustees and Key Employees

(a) <u>Name and Address</u>	(b) <u>Title</u>	(c) <u>Hours</u>	(c) <u>Compensation</u>	(d) <u>Benefit Plans</u>	(e) <u>Expenses</u>
Mary Ann Kellerman PO Box 1715 Columbia, MO 65205	Board Member	1	0	0	0
Joe Maestas PO Box 1715 Columbia, MO 65205	Board Member	1	0	0	0
David Minnick PO Box 1715 Columbia, MO 65205	Board Member	1	0	0	0
Penny Pitman PO Box 1715 Columbia, MO 65205	Board Member	1	0	0	0
Kristin Schwain PO Box 1715 Columbia, MO 65205	Board Member	1	0	0	0
John Simmons PO Box 1715 Columbia, MO 65205	Board Member	1	0	0	0
Marion Smith PO Box 1715 Columbia, MO 65205	Board Member	1	0	0	0
Abigail Tempel PO Box 1715 Columbia, MO 65205	Board Member	1	0	0	0
Shawn Whitney PO Box 1715 Columbia, MO 65205	Board Member	1	0	0	0
Brad Wolf PO Box 1715 Columbia, MO 65205	Board Member	1	0	0	0
Peter Wollenberg PO Box 1715 Columbia, MO 65205	Board Member	1	0	0	0