

Form **990-EZ**

**Short Form
Return of Organization Exempt From Income Tax**

OMB No 1545-1150

2009

**Open to Public
Inspection**

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)
▶ 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.

A For the 2009 calendar year, or tax year beginning 10/1/2008 , **2009, and ending** 9/30 , 20 09

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.	C Name of organization Kiwanis Club of Ashland	D Employer identification number 54-6052398
		Number and street (or P O box, if mail is not delivered to street address) Room/suite P.O.Box 2045	E Telephone number
		City or town, state or country, and ZIP + 4 Ashland, VA 23005	F 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: ▶

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

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

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 ▶ \$

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

SCANNED MAR 10 2010

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	
	2	Program service revenue including government fees and contracts		2	
	3	Membership dues and assessments		3	251414
	4	Investment income		4	412
	5a	Gross amount from sale of assets other than inventory		5c	
	b	Less: cost or other basis and sales expenses			
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)			
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		6c	15026
	a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a 23513		
	b	Less: direct expenses other than fundraising expenses	6b 8487		
7a	Gross sales of inventory, less returns and allowances	7a	7c		
b	Less: cost of goods sold	7b			
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)				
8	Other revenue (describe ▶ _____)		8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		9	40579	
Expenses	10	Grants and similar amounts paid (attach schedule)		10	
	11	Benefits paid to or for members		11	23834
	12	Salaries, other compensation, and employee benefits		12	
	13	Professional fees and other payments to independent contractors		13	
	14	Occupancy, rent, utilities, and maintenance		14	
	15	Printing, publications, postage, and shipping		15	1312
	16	Other expenses (describe ▶ _____)		16	8487
	17	Total expenses. Add lines 10 through 16		17	32453
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	8126
	19	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)		19	27086
	20	Other changes in net assets or fund balances (attach explanation)		20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20		21	35212

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
22 Cash, savings, and investments	27086	35212
23 Land and buildings		
24 Other assets (describe ▶ _____)		
25 Total assets	27086	35212
26 Total liabilities (describe ▶ _____)		
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	27086	35212

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		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		✓
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?		✓
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		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a _____		
b	Did the organization file Form 1120-POL for this year?		✓
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?		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b _____		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 39a _____		
b	Gross receipts, included on line 9, for public use of club facilities 39b _____		
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		✓
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 ▶ _____		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
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.		✓
41	List the states with which a copy of this return is filed. ▶ _____		
42a	The organization's books are in care of ▶ _____ Telephone no. ▶ _____ Located at ▶ _____ ZIP + 4 ▶ _____		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	No
	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 .		
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: ▶ _____		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 _____		<input type="checkbox"/>
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
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		✓

Part VI 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.

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	46	<input type="checkbox"/>	<input checked="" type="checkbox"/>
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	<input type="checkbox"/>	<input checked="" type="checkbox"/>
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	<input type="checkbox"/>	<input checked="" type="checkbox"/>
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	If "Yes," was the related organization a section 527 organization?	49b	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

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

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

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

▶ Edwin L. Cooper | 2/10/2010
 Signature of officer | Date

▶ EDWIN L. COOPER - TREASURER
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed: Preparer's identifying number (See instructions): _____

Firm's name (or yours if self-employed), address, and ZIP + 4: _____ EIN: _____ Phone no: _____

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

Statement 1- Form 990ez, Part 1 Line 16 – Other Expenses
Year 10/1/2008-9/30/2009

54-6052398

Civic

Description

Amount

Youth Services

School Perfect Attendance Program	\$1629.77
Bikes & Helmets \$900.77	
Kings Dominion passes \$669	
The Club Car 6 \$10 give cards \$60	
Scholarship Hanover High School	\$500
DMUMC Youth	\$900
Roots & Shoots	\$269.64
HOBY (3 Students)	\$525
	\$3824.41

Kiwanis Foundation

Kiwanis international Birthday Gift	\$425
Capital District Foundation Birthday Gift	\$200
Capital District Foundation Life Member	\$100
	\$725

Community Services

Ashland Holiday Parade	\$708.10
Patrick Henry HS Band Boosters	\$200
Hanover High School Band	\$250
Relay for Life	\$271.11
ACES	\$1000
YMCA Seeds of Hope	\$500
	\$2929.21

Action Club

Activity support	\$250
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Key Clubs

Lee Davis Key Club Convention	\$419
Re-charter for Patrick Henry HS	\$100
Lee Davis matching funds for	
Leukemia & Lymphoma fund raised	\$239.34
	\$758.34

Total

\$8486.96

Operations

Description	Amount
Printing and Postage	
Stamp Fulfillment Services	\$243.60
We Think In Ink (News Letter)	\$1068.82
Total line 15	\$1312.42
Benefits Paid to or For Members	
WeThinkInInk (Roster printing)	\$147
Tom Varner (Roster Mailing)	\$79.96
Tom Varner (Supplies)	\$397.32
Tom Varner (09 Convention)	\$400
Capital District Kiwanis (Mid Winter Conf Reg)	\$125
Capital District Kiwanis (KLDP Training)	\$45
Postmaster (P.O. Box Rent)	\$106
Berry Wright (09 Convention)	\$1616.77
Fred Hodnett (09 Convention)	\$1406.56
Tom Varner (Christmas favors)	\$47.26
Kiwanis International Foundation (new member)	\$150
Kiwanis International Dues	\$5994
Jameie D. Flanagan (Christmas Dinner Entertainment)	\$200
Wall-Mart (supplies)	\$16.67
Checking Service Charge	\$15
Chartwells (09 Meals)	\$11517.63
Club Resources (Club Management System)	\$300
Prayer Breakfast (Lt Gov Fund)	\$375
Spiritual Aims Breakfast (attending members)	\$55
Parade (invitations)	\$148.07
Funds Transfer to Civic Fund	\$200
DCOM Program Advisement	\$175
Hanover County Safe Serve Training	\$100
Signs Unlimited (New Banner)	\$175
Ed Hutchinson (Picknick)	\$7
Deposit addition error	\$35
Total Line 11	<u>\$23834.20</u>

990
10/1/2008-9/30/2009

Special Events Schedule

2009

Kiwanis Club of Ashland VA

54-6052398

	(A)	(B)	(C)	(D)	(E)	Others	Total
Gross Receipts	<u>11776</u>	<u>8134</u>	<u>450</u>	<u>2630</u>	<u>523</u>	<u>4</u>	23513
Less contributions	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	0
Gross Revenue	<u>11776</u>	<u>8134</u>	<u>450</u>	<u>2630</u>	<u>523</u>	<u>4</u>	23513
Less direct expenses	<u>6645</u>	<u>3599</u>	<u>3</u>	<u>147</u>	<u>0</u>	<u>34</u>	10428
Net income (loss)	<u>5131</u>	<u>4535</u>	<u>447</u>	<u>2483</u>	<u>523</u>	<u>(30)</u>	13085

Description. (A)	<u>Barbeque Dinner 08</u>
(B)	<u>Barbeque Dinner 09</u>
(C)	<u>Pancake Breakfast 08</u>
(D)	<u>Pancake Breakfast 09</u>
(E)	<u>Bird Mill Products</u>
Others	<u>Interest income \$4</u>

54-6052398**Federal Statements****Year 10/1/2008 – 9/30/2009****Statement 2 – Form 990EZ, Part IV – List of Officers, Directors, Trustees,
and Key Employees**

Name Address City, State, Zip	Title	Average Hrs	Compensation	Benefits	Expenses
Upton Martin 113 Henry Clay Ashland, VA 23005	Past Pres	4	0	0	0
Fred Hodnett 14372 Riverside Drive Ashland, VA 23005	President	4	0	0	0
Berry Wright 12320 Cedar Lane Ashland, VA 23005	Pres Elect	3	0	0	0
John Myers 12247 Yowell Road Ashland, VA 23005	Vice Pres	6	0	0	0
Tom Varner 13065 Riverside Court Ashland, VA 23005	Secretary	6	0	0	0
Edwin L Cooper 13461 Deer Creek Rd Ashland, VA 23005	Treasurer	4	0	0	0
George Smith 14437 Whitewood Lane Doswell, VA 23047	Director	3	0	0	0
Rob Wait P O Box 478 Ashland, VA 23005	Director	3	0	0	0
Earl Holzinger 10002 Cheroy Woods Ashland, VA 23005	Director	3	0	0	0
Randy Robertson 12173 Center Street Ashland, VA 23005	Director	3	0	0	0
Jim Smith III 12309 Ashcake Road Ashland, VA 23005	Director	3	0	0	0

Don August 102 Dewey Street Ashland, VA 23005	Director	3	0	0	0
Edwin Hutchinson 7214 Ancient Oak Drive Mechanicsville, VA 23111	Director	3	0	0	0
Thomas Herbert 115 Lee Avenue Ashland, VA 23005	Director	3	0	0	0

54-6052398

Federal Statements

Year 10/1/2008-9/30/2009

Special Events Direct Expenses Civic Account

Description	Amount \$
Column A	
Barbeque Dinner 08	
Cost of Goods Sold	<u>6645</u>
Column B	
Barbeque Dinner 09	
Cost of Goods Sold	<u>3599</u>
Sub Total	<u>10244</u>
Column C	
Pancake Breakfast 08	
Cost of Goods Sold	<u>3</u>
Column D	
Pancake Breakfast 09	
Cost of Goods Sold	<u>147</u>
Sub Total	<u>150</u>
Column E	
Bird Mill Products	0
Sub Total	<u>0</u>
Other	
None	<u>0</u>
Total	<u>10394</u>

Direct expenses other than fundraising expenses
Reported on Form 990-EZ, page 1, line 6b