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## Short Form

OMB No 1545-1150

Form **990-EZ****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)

▶ For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year

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

**2005****Open to Public Inspection**Department of the Treasury  
Internal Revenue Service**A** For the 2005 calendar year, or tax year beginning October 1, 2005, and ending September 30, 2006**B** Check if applicable

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return  
☐ Amended return  
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

**C** Name of organization

Kiwaniis Club of Elkhart

Number and street (or P O box, if mail is not delivered to street address)

P.O. Box 802

City or town, state or country, and ZIP + 4

Elkhart, IN 46515-0802

**D** Employer identification number

35-6030744

**E** Telephone number**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: ▶ N/A

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

**J** Organization type (check only one) — ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

**K** Check ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization chooses to file a return, be sure to file a complete return. **Some states require a complete return.**

**L** Attach lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 41,337**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 38 of the instructions.)

Rev.	Line	Description	Amount
	1	Contributions, gifts, grants, and similar amounts received	
	2	Program service revenue including government fees and contracts	
	3	Membership dues and assessments	13,810
	4	Investment income	659
5a		Gross amount from sale of assets other than inventory	
5b		Less: cost or other basis and sales expenses	
5c		Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)	0.00
6		Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>	
6a		Gross revenue (not including \$ of contributions reported on line 1)	26,868
6b		Less direct expenses other than fundraising expenses	7,888
6c		Net income or (loss) from special events and activities (line 6a less line 6b)	18,980.00
7a		Gross sales of inventory, less returns and allowances	
7b		Less: cost of goods sold	
7c		Gross profit or (loss) from sales of inventory (line 7a less line 7b)	0.00
8		Other revenue (describe ▶ )	
9		<b>Total revenue</b> (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	33,449.00
10		Grants and similar amounts paid (attach schedule) cash grants & allocations	27,462
11		Benefits paid to or for members	
12		Salaries, other compensation, and employee benefits	
13		Professional fees and other payments to independent contractors	
14		Occupancy, rent, utilities, and maintenance	
15		Printing, publications, postage, and shipping	
16		Other expenses (describe ▶ bank charges, conferences, conventions, & supplies)	8,130
17		<b>Total expenses</b> (add lines 10 through 16)	35,592.00
18		Excess or (deficit) for the year (line 9 less line 17)	(2,143.00)
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)	52,090.00
20		Other changes in net assets or fund balances (attach explanation)	
21		Net assets or fund balances at end of year (combine lines 18 through 20)	49,947.00

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

(See page 41 of the instructions.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	54,439	49,947
23 Land and buildings		
24 Other assets (describe ▶ )		
25 <b>Total assets</b>	54,439.00	49,947.00
26 <b>Total liabilities</b> (describe ▶ Deferred income)	2,349	0
27 <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	52,090.00	49,947.00

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

Form **990-EZ** (2005)

STATUTE CLEARED

SCANNED JAN 05 2010

 STATUTE UNIT  
 RECEIVED  
 DEC 01 2009  
 TPR BRANCH  
 OGDEN

P. W. W.

**Part III Statement of Program Service Accomplishments** (See page 42 of the instructions)

What is the organization's primary exempt purpose?

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title

**Expenses**  
(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)

28		
(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	
29		
(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30		
(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (attach schedule)		
(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a)	32	

**Part IV List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated. See page 42 of the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
See attached				

**Part V Other Information** (Note the attachment requirement in General Instruction V, page 14.)

	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	33	X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)	36	X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. <b>37a</b> 0		
b Did the organization file Form 1120-POL for this year?	37b	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 unpaid at the start of the period covered by this return?	38a	X
b If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved <b>38b</b> N/A		
39 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 <b>39a</b> N/A		
b Gross receipts, included on line 9, for public use of club facilities <b>39b</b> N/A		
40a 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 <b>N/A</b> ; section 4912 <b>N/A</b> ; section 4955 <b>N/A</b>		
b 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation.	40b	X
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <b>0</b>		
d Enter amount of tax on line 40c reimbursed by the organization <b>0</b>		

**Part V Other Information** (Note the attachment requirement in General Instruction V, page 14.) (Continued)**41** List the states with which a copy of this return is filed. ▶ None

**2a** The books are in care of ▶ Larry Meteiver Telephone no. ▶ 574-294-5471  
 Located at ▶ 54215 Forest Grove Elkhart, IN ZIP + 4 ▶ 46514

**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: ▶ .....

See the instructions for exceptions and filing requirements for Form TD F 90-22.1.

**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: ▶ .....

	Yes	No
<b>42b</b>		X
<b>42c</b>		X

**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** | N/A

<b>Please Sign Here</b>	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.			
	▶ <u>Jodi Nelson</u> Signature of officer		Date <u>03/30/2009</u>	
<b>Paid Preparer's Use Only</b>	▶ <u>Jodi Nelson, President</u> Type or print name and title			
	Preparer's signature ▶ Firm's name (or yours if self-employed), address, and ZIP + 4 ▶	Date Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen. Inst. W) EIN ▶ Phone no ▶	

Form **990-EZ** (2005)

**Kiwanis Club of Elkhart, Inc.  
October 1, 2005 to September 30, 2006**

Board of Directors		
2006	2007	2008
Kathy Frey Richard Max Jr. Bob Ebbole Karen Carter	Dina Harris Pam Cozort Dan Oakley Jon Walker	Teresa Shultz-Miller Ray Douglas Tom Artley Elizabeth Ebbole

**President**  
Mike Nicolini

**President-Elect**  
Ginger Smetana

**Vice President**  
Lori Harrington

**Secretary**  
Heidi McArt

**Treasurer**  
Larry Metelver

**Immediate Past President**  
Jim Fair

Club Meetings	Membership	Community Projects	Fundraising	Sponsored Clubs	Spiritual Aims	Public Relations	Social Activities
Jon Walker	Ginger Smetana	Jim Fair	Dina Harris	Jon Walker	Jeff Steele	Lori Harrington	Heidi McArt
Finemasters Matt Gerard	Attendance Heidi McArt Dan Craig	ADEC Ride-A-Bike Craig Fulmer	Absentees In Action George Freese	Aktion Club Diane Myers	Club Chaplain Kathy Frey	Public Relations Lori Harrington	Kamp Kiwanis Jim Fair
Interclubs Elizabeth Ebbole Robert Ebbole	Greetings Marnie Cornell	Adopt-A-Road Jon Walker	B-100 and WRBR Alex Strall	Concord Key Club Rick Max	Community Award George Adkins	Newsletter Cheryl Farmer	Progressive Dinner Rick Davis
Invocations Kathy Sears	New Member Packet Heidi McArt	Athletes J.A. Whitmer	CAPS Lifesavers Dina Harris	Elkhart Central Key Club Jackie Clindaniel	Nomination Committee Chris Spataro Matt Yeakey Mike Nicolini Ginger Smetana Heidi McArt Jim Fair Dick Max	Website	River Queen SueAnne VonGuten
K-Comedy Ron Bondurant	New Member Orientation Doug Mulvaney	BBBS Bowl-A-Thon Cheryl Foster	Golf Outing Dan Hood	Memorial Key Club Dina Harris			Theatre Party Chuck Wicks
Music Ray Douglas	New Member Recruitment Ginger Smetana	Indiana Youth Leadership Ginger Smetana	Pancake Days Rick Max				
Programs Lori Harrington	Recognition OPEN	KIDS Program Jeff Steele	Peanut Sales Jim Fair				
30/30/30 Larry Metelver	Retention Dan Craig	Scholarships Steve Brown	Salvation Army Bar Hop Ron Schmanske				
		Scout Cabin Larry Metelver	Bell Ringing Dan Morrison				
		Young Children Priority One Judy Fair Jim Irwin	Gag Auction George Freese				