

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



**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 1545-0047 2008

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

_	For the	e 2008 calend	dar year, o	or tax year begin	ning Jul 1	, 2	2008, and	d endin	g Jun	. 30		, 2009		
В	Check if applicable C Name of organization									D Empl	oyer Ide	ntification N	umber	
	Add	fress change	Please use IRS label	Television	Radio New	spaper Club	of S	pring	gfield	ا 37	-609	5241		
	Nan	ne change	or print or type	Number and stre	et (or PO box if mai	I is not delivered to str	eet addr)	Room/s	uite	E Telep	hone nu	mber		
	Initi	al return	See specific	P.O. Box 7	23			1		(217) 483-9994				
	Terr	mination	Instruc- tions	City, town or cou	ntry		State ZIP	code + 4						
	Ame	ended return		Springfiel	.d		IL 62	2705		G Gross	s receipts	\$ 182	,285.	
	App	dication pending	F Name a	and address of principa			•		H(a) Is this	a group re			Yes	X No
			Kim Da	wkins P.O.	Box 723 8	Springfield	IL6	2705	H(b) Are al				Yes	No
1	Tax-e	exempt statu			(insert no )	4947(a)(1) c		527	If 'No,	' attach a li	st (see i	nstructions)		
<u> </u>		site: ► N/		(6) ( )	(11301(110)	1.1.377(0)(1.7.5	<u>· 113</u>		H(c) Group	exemption	number	<b>&gt;</b>		
ĸ		of organization	X Corpora	ation Trust	Association (	Other ►	1 Year	of Format	ion 195			f legal domic	ute TT.	
_	ırt I	Summa		ation   Trust	Association		LETICAL	OF F OFFICE	1011 223	<u> </u>	· Clate o	r legar corne		
<u></u>				janization's missi	on or most signi	ficant activities	Pleas	sure	Recreat	ion & N	on-pr	ofit En	tertai	nment
4	' '	strony accorn	oc the org	Jan 12 2000 17 3 17 11 33 1	on or most sign	modific dollaring		2-2-97				. <del></del>		
J.	-					<b>-</b>								
Г	-											- <i></i>		
ove	2 (	Check this bo	× - []	if the organizatio	n discontinued if	ts operations or o	lisposed	of mor	e than 25	% of its	assets			
G ex				bers of the gover			·				3	175		
Se G				t voting members		g body (Part VI, I	ine 1b)				4	175		
Activities & Governance		Total number of employees (Part V, line 2a)									5	1.55		
Ę				eers (estimate if i		10 (6					6	175		
`	i	-		ousiness revenue			·)				7:			0.
	<u> </u>	<u>ver urirerated</u>	business	taxable income t	rom Form 990-1	i, line 34			<u> </u>			<del></del>		
	8 Contributions and grants (Part VIII, line 1h)								Prior Yea			rrent Ye		
ş	į.		-	-	•				-		, 800			<u>131.</u>
Revenue	9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)								<u> </u>		,017 ,698			<u>760.</u> 876.
Re	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)								<u> </u>		, 658			438.
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)								-		, 173			205.
											,	+	+0.7	
	ľ	Benefits paid		-			+							
	Į.		<b>)</b> )			0	+							
es				nsation, employee			1162 2-10	)	-					
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)							<b></b>		5	+		
ᅑ	l .			nses (Part IX, col					.			<b>_</b>		
	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)												089.
	18	Total expense	es Add Iir	nes 13-17 (must e	equal Part IX, co	olumn (A), line 25	5)		57,954.				089.	
	19 F	19 Revenue less expenses Subtract line 18 from line 12								65	,219	·	9,	116.
000									Beg	inning o	f Year	Er	nd of Yea	ar
alar.	20 7	Total assets (	(Part X, Iu	ne 16)							,347		377,	463.
Net Assets or Fund Balancos	21 1	Total liabilitie	s (Part X,	, line 26)										
		<u>Net assets or </u>	fund bala	ances Subtract li	ne 21 from line	20				368	,347		377,	463.
Pa	ırt II	Signati	ure Blo	ck										
		Under penaltie	s of perjury,	I declare that I have e Declaration of prepar	xamined this return,	including accompanyir	ng schedule	es and sta	tements, ar	d to the be	st of my	knowledge ai	nd belief, it	I\$
		liue, correct, a	ina complete	Declaration of prepar	rer totner than omicer	) is based on all illion	nation of w	инси ргер	arer nas an	y knowledgi	E			
Sig	gn	<b>-</b>												
He	re	Signature	of officer							Date				
		<b> ►</b>												
		Type or pr	int name an	d title										
_				<del></del>			Date			Check if		Preparer's in (see instruct	dentifying n tions)	umber
Pa		Preparer s					ŀ			self- employed	► X			
Pre		signature	<u> </u>				01	/11/1	.0					
Da:	rer's	Firm's name (	or Jef	f S. Morti	mer, CPA									·
On		yours if self employed),		S 5th Str						EIN ►				
_	··· <b>·</b>	address and ZIP + 4	Aub			IL 6	2615			Phone no	<b>-</b> (2	17) 43	8-911	.0
May	the IR	S discuss this return with the preparer shown above? (see instructions)									ΧY	'es	No	

	990 (2008) Television Radio Newspaper Club of			37-60	95241	F	age 2
Par		ments (see instri	uctions)				
1	Briefly describe the organization's mission						
	Pleasure, Recreation & Non-profit Enter	tainment					- <b>-</b> -
				<b></b> _			
			<del> </del>				
2	Did the organization undertake any significant program services of	during the year which	n were not listed on t	he prior			
	Form 990 or 990-EZ?				Yes	X	No
	If 'Yes,' describe these new services on Schedule O				_		
3	Did the organization cease conducting, or make significant change	ges in how it conduct	s, any program servi	ces?	∐ Yes	X	No
	If 'Yes,' describe these changes on Schedule O						
4	Describe the exempt purpose achievements for each of the organ and 501(c)(4) organizations and section 4947(a)(1) trusts are req	nization's three larges	st program services to	y expenses	Section 50	11(c)(3) e total	
	expenses, and revenue, if any, for each program service reported	d					
	- <del></del>						
Δa	(Code) (Expenses \$includ	ing grants of \$	١,	'Revenue	¢		١
<b>⊣</b> a	(Code) (Expenses \$ miciad						—- <i>'</i>
							- <del>-</del> -
						<b>-</b>	
						- <b></b>	
					. <b></b>		
		. <b></b>			. <b></b>		
4 b	(Code) (Expenses \$ includ	ling grants of S	<b>)</b>	Revenue	Ś		١
. 2	(coso) (axponses $\phi_{_{_{_{_{_{_{_{_{_{_{_{_{_{_{_{1}}}}}}}}$	g grants or \$	/	(110701100	Ÿ		—′
							<b></b> -
							<b>-</b>
				<del>-</del> -			
						- <b></b> -	
							- <b></b>
							. <b></b> -
Δc	(Code) (Expenses \$include	ling grants of \$	,	(Revenue	¢		)
70	(Code) (Expenses \$\psi micial	aning grants or \$		(i teveride	٧		—′
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~						
4 d	Other program services (Describe in Schedule O)						
	(Expenses \$ including grants of	\$	) (Revenue	\$			
4 e	Total program service expenses ► \$		IX, Line 25, column (				

	CTV Officentiate of tredumed definedates		· · ·	
	· ·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	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	3		x
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		
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? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		<u>x</u>
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? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		_ x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
t	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		х
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? If 'Yes,' complete Schedule F, Part II	15		х
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? If 'Yes,' complete Schedule F, Part III	16		х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17	<u> </u>	Х
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20	<u></u>	X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 17 If 'Yes,' complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2º If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		х
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and			
Ь	complete Schedule K If 'No, 'go to question 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b	_	X
		240	<del> </del>	$\dagger$
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		ļ
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d	<del> </del>	
25 a	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
t	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		
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? If 'Yes,' complete Schedule L, Part II	26	<u> </u>	х
27	contributor, or to a person related to such an individual? If 'Yes.' complete Schedule L, Part III	27		x
BAA		Forn	n <b>990</b>	(2008)

37-6095241 Television Radio Newspaper Club of Springfield Page 3 Form **990** (2008) Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'i'es,' complete X Schedule A 2 Х Is the organization required to complete Schedule B, Schedule of Contributors? 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 3 Х Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C. Part II 4 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? If 'Yes,' complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I 6 Х Did the organization receive or hold a conservation easement, including easements to preserve open space, the 7 Х environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 8 Х complete Schedule D, Part III 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? If 'Yes,' complete q Х Schedule D, Part IV 10 Х 10 Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, 11 Х VII, VIII, IX, or X as applicable 12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 Х 13 Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E Х 14a Did the organization maintain an office, employees, or agents outside of the US? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I 14b Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization 15 X or entity located outside the United States? If 'Yes,' complete Schedule F, Part II 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? If 'Yes,' complete Schedule F, Part III 16 Х 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I 17 Х X 18 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III 19 X 20 X Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H 21 X Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete 23 Х Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000

\*

RAA

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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No, 'go to question 25

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 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I

b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I

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? If 'Yes,' complete Schedule L, Part II

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III

Form **990** (2008)

24a

24b

24c

24d

25a

25<sub>b</sub>

26

Х

Х

& This is how It is

in our Software. Please change this

answer to a "no" response. Thanks.

Form 990 (2008) Television Radio Newspaper Club of Springfield Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
i	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		<u>x</u>
١	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		<u>x</u>
•	c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	28c		<u>x</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		_x_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule $M$	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		<u>x</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Scneaule N, Part II	32		_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? If 'Yes,' complete Schedule R, Part I	33		<u>x</u>
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule $R$ , Part $V$ , line $2$	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
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? If 'Yes,' complete Schedule R, Part VI	37		Х
ο Λ Λ		Corn	000	(2000)

			Yes	No			
1 a	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 0						
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?	1 c	х				
2 a	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						
2 b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		L			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)						
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	_3a		х			
b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 b					
4 a	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)?	4a		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						
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_5a		<u> </u>			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X			
c	If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5 c					
6 a	Did the organization solicit any contributions that were not tax deductible?	6a		<u> </u>			
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6 b					
7	Organizations that may receive deductible contributions under section 170(c).						
a	a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?						
b	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?						
С	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?						
d	If 'Yes,' indicate the number of Forms 8282 filed during the year						
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7е		х			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х			
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g					
h	For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h					
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8					
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.						
a	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>			
b	Did the organization make any distribution to a donor, donor advisor, or related person?	9 b		<u> </u>			
10	Section 501(c)(7) organizations. Enter	,		ļ.,			
а	Initiation fees and capital contributions included on Part VIII, line 12  10a  0.	- :	[	1			
	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 3,150.						
11		ļ					
	Gross income from other members or shareholders		l	1			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	<del></del>			
BAA	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year   12b	Form	200	(2008)			
		1 011		(2000)			

Form-990 (2008) Television Radio Newspaper Club of Springfield \_\_\_\_ 37-6095241 Page

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

	1 A Course Della IManage						
<u> 2ec</u>	tion A. Governing Body and Management						
	For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, de processes, or changes in Schedule O See instructions	scribe the circumstances,		Yes	No		
1 a	Enter the number of voting members of the governing body	1a 175					
b	Enter the number of voting members that are independent	1b 175		i 1			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation of the business relationship or a business relationship or a business relationship or a business relation of the busin	ationship with any other	2		х_		
3	Did the organization delegate control over management duties customarily performed by or un of officers, directors or trustees, or key employees to a management company or other person	der the direct supervision	3		X.		
4	Did the organization make any significant changes to its organizational documents		4		Х		
5	since the prior Form 990 was filed?	c accete?	5		х		
6	Did the organization become aware during the year of a material diversion of the organization' Does the organization have members or stockholders?	2 922612.	6	х			
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?							
	Are any decisions of the governing body subject to approval by members, stockholders, or oth	•	7 b	X			
8	Did the organization contemporaneously document the meetings held or written actions under the following	aken during the year by					
	The governing body?		8 a	X			
	Each committee with authority to act on behalf of the governing body?		8 b	_X_			
9 a	Does the organization have local chapters, branches, or affiliates?		9a		<u>x</u>		
b	If 'Yes,' does the organization have written policies and procedures governing the activities of and branches to ensure their operations are consistent with those of the organization?	such chapters, affiliates,	9 b				
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? describe in Schedule O the process, if any, the organization uses to review the Form 990	All organizations must	10	х			
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who can organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	not be reached at the	11		х		
Sec	tion B. Policies						
				Yes	No		
12 a	Does the organization have a written conflict of interest policy? If 'No,' go to line 13		12 a		<u>X</u>		
b	Are officers, directors or trustees, and key employees required to disclose annually interests to conflicts?	hat could give rise	12b				
c	Does the organization regularly and consistently monitor and enforce compliance with the poli Schedule O how this is done	cy? If 'Yes,' describe in	12 c				
13	Does the organization have a written whistleblower policy?		13		<u>X</u>		
14	Does the organization have a written document retention and destruction policy?		14		Х		
15	Did the process for determining compensation of the following persons include a review and a persons, comparability data, and contemporaneous substantiation of the deliberation and deci	pproval by independent sion					
а	The organization's CEO, Executive Director, or top management official?		15 a		X		
	Other officers of key employees of the organization?		15b	}	X		
	Describe the process in Schedule O (see instructions)						
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a entity during the year?	arrangement with a taxable	16a		х		
b	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard status with respect to such arrangements?	to evaluate its participation the organization's exempt	16b				
Sec	tion C. Disclosures						
17	List the states with which a copy of this Form 990 is required to be filed ▶						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an inspection. Indicate how you make these available. Check all that apply	nd 990-T (501(c)(3)s only) av	aılable	for pu	plic		
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how) the organization makes its governing docum statements available to the public	ents, conflict of interest polic	y, and	financ	al		
	State the name, physical address, and telephone number of the person who possesses the bo						
•	Frank Beagles Brideview Beach Rd Springfield 1	L 62705-0723 (2	17)	<u> 483 -</u>	9994		
BAA			Form	990	(2008)		

## 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

- 1 a Complete this table for all persons required to be listed. 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, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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) or 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

X Check this box if the organization did not (A)	(B)	ate ar	ıy or		r, ai c)	rector,	trus	(D)	(E)	(F)
(A) Name and Title		Posi	tion (		-	that appl	ly)		ľ	
Name and Thie	Average hours per week	adividial fractes	mshluhoaal taislee	Offi el	Key employee	employee	ru,nei	Reportable compensation from the organization (W 2/1099 MISC)	Reportable compensation from related organizations (W-2/1099 MISC)	Estimated amount of other compensation from the organization and related organizations
Marty Mau										
Current V-P	0.00			х		<u> </u>		0.	0.	0.
Kim Dawkins	,			i						
Current President	0.00		Ш	X_			<u> </u>	0.	0.	0.
Carolyn York					ŀ					
Secretary	0.00			Х	_			0.	0.	0.
Frank_Beagles										_
Treasurer	0.00	<u> </u>	_	X	ļ	ļ —		0.	0.	0.
	_									
			_	_	_	<u> </u>	_			
										<u></u>
	<del> </del>		┢	$\vdash$		-	<b>├</b>	<del></del>		
	ļ <u>.</u>	<u> </u>	_	_	$\vdash$	ļ	_			
									!	
						<b> </b>				
	<del> </del>	<u> </u>	<u> </u>	<u> </u>	-	ļ	ļ			
								1		
<del></del>		Ц	<u> </u>	<u> </u>	ـــــ		1	<del>L</del>	<u> </u>	5 000 (0000

Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization >

Par	T VIII   Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions)  f All other contributions, gifts, grants, and similar amounts not included above g Noncash contribns included in lns 1a-1f h Total. Add lines 1a-1f	20,131.	20,131.			
	. Bus	iness Code				
REVE	2ab					
/ICE	b					
PROGRAM SERVICE REVENUE	d					
	e		14.760	14,760.	0.	0.
2ROG	f All other program service revenue g Total. Add lines 2a-2f	<b>•</b>	14,760. 14,760.	14,780.		
	Investment income (including dividends, intere- other similar amounts)	•	3,876.	3,876.	0.	0.
	4 Income from investment of tax-exempt bond p	roceeds ►				<u> </u>
	5 Royalties (i) Real (	(ii) Personal				
	6a Gross Rents 7,350.					<b>)</b> .
	b Less rental expenses 793.					
	c Rental Income or (loss) 6,557.	<u> </u>		c ====	•	
	d Net rental income or (loss)	(II) Other	6,557.	6,557.	0.	0.
	7a Gross amount from sales of assets other than inventory	(17 00101				
	<b>b</b> Less cost or other basis					
	and sales expenses					
	c Gain or (loss)					-
	d Net gain or (loss)					
VENUE	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c)					
OTHER REVEN	See Part IV, line 18					•
THE	b Less direct expenses b					
J	c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities See Part IV, line 19		ļ			•
	b Less direct expenses b					,
	c Net income or (loss) from gaming activities	<b>•</b>				<u> </u>
	10a Gross sales of inventory, less returns and allowances a	96,432.		,		
	<b>b</b> Less cost of goods sold <b>b</b>	74,287.				
	c Net income or (loss) from sales of inventory  Miscellaneous Revenue Bu	siness Code	22,145.	22,145.	0	0.
	11 a		1			
	b					
	c					<del></del>
	d All other revenue		39,736.	39,736.	0	0.
	e Total. Add lines 11a-11d	7.00	39,736.		<del>                                     </del>	<del>                                     </del>
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 10c, and 11e	/a, 8c, 9c, ►	107,205.	87,074.	0	. 0.

Part IX | Statement of Functional Expenses

Form **990** (2008)

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). (B) Program service (C) (D) (A) Total expenses Fundraising Do not include amounts reported on lines Management and general expenses 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) a Management **b** Legal c Accounting **d** Lobbying e Prof fundraising svcs See Part IV, In 17 f Investment management fees g Other 12 Advertising and promotion 13 Office expenses 3,315. 3,315. 14 Information technology 15 Royalties 16 25,551 Occupancy 25,551 17 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 15,722 15,722 23 Insurance 11,998. 11,998. 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) f All other expenses 41,503 41,503 25 Total functional expenses Add lines 1 through 24f 98,089 98,089 26 Joint Costs. Check here ► ☐ 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

_				(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing		97,058.	1	68,020.
	2	Savings and temporary cash investments		115,000.	2	168,876.
	3	Pledges and grants receivable, net		223/000	3	
	4	Accounts receivable, net			4	<del></del>
	5	Receivables from current and former officers, directors	trustees key employees			<del></del>
	٦	or other related parties Complete Part II of Schedule I	, trustees, key employees,	'	5	·
	6	Receivables from other disqualified persons (as define	d under section 4958(f)(1))	)		
		and persons described in section 4958(c)(3)(B) Comp	lete Part II of Schedule L		6	
Ş	7	Notes and loans receivable, net			7	
ASSETS	8	Inventories for sale or use			8	
Š	9	Prepaid expenses and deferred charges			9	
	10 a	Land, buildings, and equipment cost basis	10a 199,142	2.		
	b	Less accumulated depreciation Complete Part VI of				
		Schedule D	10b 58,57	5. 156,289.	10 c	140,567.
	11	Investments - publicly-traded securities			11	
	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	Total assets Add lines 1 through 15 (must equal line	34)	368,347.	16	377,463.
	17	Accounts payable and accrued expenses		17		
L !	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
A B	21	Escrow account liability Complete Part IV of Schedule	D		21	
I L I T I E S	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified per-	tees, key employees,			
ţ		of Schedule L	sons Complete Lart II		22	
Ė	23	Secured mortgages and notes payable to unrelated th		23		
3	24	Unsecured notes and loans payable	ra parties	· · · · · ·	24	· · · · · · · · · · · · · · · · · · ·
	25	Other liabilities Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
N		Organizations that follow SFAS 117, check here ►	and complete lines			
Ĕ		27 through 29 and lines 33 and 34.				
A	27	Unrestricted net assets			27	
ASSET	28	Temporarily restricted net assets			28	
S	29	Permanently restricted net assets			29	
R		Organizations that do not follow SFAS 117, check he	re F X and complete			
		lines 30 through 34.				
ナンズロ	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, and equip	ment fund		31	
Ê	32	Retained earnings, endowment, accumulated income,	or other funds	368,347.	32	377,463.
BALAZCES	33	Total net assets or fund balances.		368,347.	33	377,463.
5	34	Total liabilities and net assets/fund balances		368,347.	34	377,463.
Pa	rt X	Financial Statements and Reporting				
						Yes No
			Cash	Other		
2		ere the organization's financial statements compiled or	- '			2a X
		ere the organization's financial statements audited by a				2b X
	c If "	Yes' to 2a or 2b, does the organization have a committing or compilation of its financial statements and sele	ee that assumes responsib	oility for oversight of the au-	dit,	2 c
,3		a result of a federal award, was the organization requi			ıngle	
Ī		dit Act and OMB Circular A-133?			-	3a X
		Yes,' did the organization undergo the required audit or	audits?		_	3b    Form 990 (2008)
BΑ	A					FOITH <b>330</b> (2008)

# SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Name	of the organization		Employer Identification number						
Te.	levision Radio Newspaper Club	of Springfield		37-6095241					
		Advised Funds or Other Similar Fund	s or Acco	ounts Complete	ıf				
1 2 3 4	Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year	(a) Donor advised funds	(b) F	unds and other acc	ounts				
5	Did the organization inform all donors and done funds are the organization's property, subject to	or advisors in writing that the assets held in dono of the organization's exclusive legal control?	r advised	Yes	☐ No				
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Yes No								
Pa	t II   Conservation Easements Comple	ete if the organization answered 'Yes' to	o Form 99	00, Part IV, line	<u>7</u>				
2									
	of the tax year			Held at the End of	the Year				
3	year •	ed historic structure included in (a) i (c) acquired after 8/17/06 ransferred, released, extinguished, or terminated	2a 2b 2c 2d by the orga	nization during the	taxable				
4 5	Number of states where property subject to cor Does the organization have a written policy reg enforcement of the conservation easement it h	arding the periodic monitoring, inspection, violati	ons, and	☐ Yes	☐ No				
6		inspecting, and enforcing easements during the	vear ►						
7		specting, and enforcing easements during the year	_						
8	Does each conservation easement reported on 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of section	on	Yes	□ No				
	include, if applicable, the text of the footnote to conservation easements	orts conservation easements in its revenue and e to the organization's financial statements that desi	cribes the or	rganization's accour	nting for				
Pai	rt III Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, line 8	Other Sin	nilar Assets					
	treasures, or other similar assets held for publi the text of the footnote to its financial statemen		e of public s	service, provide, in l	Part XIV,				
ı	o If the organization elected, as permitted under treasures, or other similar assets held for publ amounts relating to these items	SFAS 116, not to report in its revenue statement ic exhibition, education, or research in furtherance	and balance e of public s	e sheet works of ar service, provide the	t, historical following				
	(i) Revenues included in Form 990, Part VIII,	line 1		<b>►</b> \$					
	(ii) Assets included in Form 990, Part X			<b>►</b> \$					
2	amounts required to be reported under SFAS 1	5	financial ga	in, provide the follo	wing				
	a Revenues included in Form 990, Part VIII, line	1		<b>-</b> \$					
1	Assets included in Form 990, Part X			<b>►</b> \$					

Part III Organizations Mainta				Other Similar Ass	
3 Using the organization's accession					
that apply)	and other r	_	or exchange programs	our dos or no concer	(0.1001.01)
<del></del>			or exchange programs		
b Scholarly research		e [ ] Other			
c Preservation for future gener			Maria di salaman dan arawasan	skieule euseest nivesees	
4 Provide a description of the organ Part XIV		·			ın
5 During the year, did the organiza assets to be sold to raise funds r					Yes No
Part IV Trust, Escrow and Cu IV, line 9, or reported	istodial Ari an amoun	r <b>angements</b> Complet on Form 990, Part	ete if organization a X, line 21.	answered 'Yes' to F	orm 990, Part 
1 a Is the organization an agent, trus included on Form 990, Part X?	tee, custodiar	n, or other intermediary f	or contributions or other	assets not	Yes No
b If 'Yes,' explain the arrangement	ın Part XIV a	nd complete the following	g table		
					Amount
c Beginning balance				1c	
d Additions during the year				1 d	
e Distributions during the year	1e				
f Ending balance				1f	
2a Did the organization include an a	mount on For	m 990. Part X. line 21?			Yes No
<b>b</b> If 'Yes,' explain the arrangement					
Part V Endowment Funds Co		rganization answere	ed 'Yes' to Form 99	0. Part IV. line 10.	
	(a) Current				(e) Four years back
1 a Beginning of year balance	(2) (3)	(2) 1101 / (2)		(0, 000 )	
<b>b</b> Contributions	·				<del> </del>
c Investment earnings or losses					<del>                                     </del>
d Grants or scholarships					<del> </del>
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	<del> </del>		
a Board designated or guasi-endov	-	%			
<b>b</b> Permanent endowment ►		<del></del>			
c Term endowment ►					
3a Are there endowment funds not a organization by	n the possess	ion of the organization th	hat are held and admini	stered for the	Yes No
(i) unrelated organizations					3a(i)
(II) related organizations			•		3a(ii)
b If 'Yes' to 3a(II), are the related of	organizations	listed as required on Sch	nedule R?		3b
4 Describe in Part XIV the intended	uses of the	organization's endowmer	nt funds		
Part VI Investments-Land, E	uildings, a	nd Equipment. See	e Form 990, Part X	, line 10.	
Description of investmen		(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book Value
1 a Land					
<b>b</b> Buildings			199,142.	58,575.	140,567.
c Leasehold improvements					
<b>d</b> Equipment					
e Other				<del>.</del>	
Total. Add lines 1a-1e (Column (d) sho	ould equal Fo	rm 990. Part X. column i	(B), line 10(c) )	<b>•</b>	140,567.
ВАА			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Sche	dule <b>D</b> (Form 990) 2008

-Schedule D (Form 990) 2008 Television Radio New	wspaper Club of S	pringfield	<u>37-6</u> 095241	Page 3
Part VII Investments-Other Securities See Fo	orm 990, Part X, Iır	ne 12.		
(a) Description of security or category (including name of security)	(b) Book value	Cost o	) Method of valuation r end-of-year market value	
Financial derivatives and other financial products				
Closely-held equity interests				
Other				
	<u> </u>			
			<u>-</u>	
	<del></del>	<del> </del> -	<del></del>	·
Total (Column (b) should equal Form 990 Part X, col (B) line 12)	Form 000 Dort V	luno 12)		
Part VIII Investments-Program Related (See			NAME AND ASSOCIATION	
(a) Description of investment type	(b) Book value	Cost o	c) Method of valuation r end-of-year market value	
		ļ <u>.</u>		
Total Column (b)(should equal Form 990, Part X, Col (B) line 13)	1.5	L		
Part IX Other Assets (See Form 990, Part X,		<del></del>		
(a) De	escription		<b>(b)</b> Boo	k value
		<del></del>		
	<del></del>	<del> </del>		
	<del></del>			
	<del></del>			
Total. Column (b) Total (should equal Form 990, Part X, col	(B), line 15)		<b>▶</b>	
Part X Other Liabilities (See Form 990, Part				
(a) Description of Liability	(b) Amount			
Federal Income Taxes	1,1			
			ı	
Total Column (b) Total (should equal Form 990, Part X, col (B) line 25)	<u> </u>		·	
In Part XIV, provide the text of the footnote to the organizat	ion's financial statemen	its that reports the org	anization's liability for uncerta	ın tax

37-6095241

	dule D (Form 990) 2008 Television Radio Newspaper Club of Spr		7-6095241	Page 4
Pai	t XI   Reconciliation of Change in Net Assets from Form 990 to F	inancial Statements	·····	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		ļ	
2	Total expenses (Form 990, Part IX, column (A), line 25)			
3	Excess or (deficit) for the year Subtract line 2 from line 1		ļ	
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities			
6	Investment expenses		<u> </u>	
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net) Add lines 4-8			
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	<del></del>		
Pai	t XII   Reconciliation of Revenue per Audited Financial Statemen	its With Revenue per F	Return	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1		
ā	Net unrealized gains on investments	2a	_	
ł	Donated services and use of facilities	2b	_	
C	Recoveries of prior year grants	2c		
C	Other (Describe in Part XIV)	2d		
€	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
ā	Investments expenses not included on Form 990, Part VIII, line 7b	4a	_	
Ł	Other (Describe in Part XIV)	4b		
(	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)		5	
Par	t XIII   Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses pe	r Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
ŀ	Prior year adjustments	2 b	7 )	
c	Losses reported on Form 990, Part IX, line 25	2c		
c	Other (Describe in Part XIV)	2d	7	
•	Add lines 2a through 2d		2 e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
ā	Investments expenses not included on Form 990, Part VIII, line 7b	4a	1 1	
ŀ	Other (Describe in Part XIV)	4b	7	
(	Add lines 4a and 4b	<del></del>	4c	
5	Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18)	)	5	
	t XIV   Supplemental Information			
Com line	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part I, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	rt III, lines 1a and 4, Part IV,	lines 1b and 2b, I	Part V,
- <b>-</b> -				
- <del>-</del> -				

Scheaule <b>D</b> (Form 990) 2008	Television Radio New	spaper Club of-Springfield	37-6095241	Page 5
Part XIV   Supplementa	I Information (continued)	)		
				. – – – –
		- <b>-</b>		. <b></b>
				· ·
_				
	<b>-</b>			
·· = ·· = · = · = · = · = · = · = · = ·	<del></del>			
	<del></del>			
	<b></b>			
	<b></b>			

### Form **4562**

# **Depreciation and Amortization** (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172

2008

Attachment Sequence No 67

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Television Radio Newspaper Club of Springfield

urn.

Sequence No C

37-6095241

Busine	ess or activity to which this form relate	es							
	m 990 / Form 990E	ZZ							
Par	Election To Exp Note: If you have an	ense Certain in by listed property,	Property Under Sec complete Part V before	tion 179 you complete Pa	art I				
1	Maximum amount See the	instructions for a	higher limit for certain b	usinesses			1	\$250,000.	
2	Total cost of section 179 pr	2							
3	Threshold cost of section 1	79 property before	e reduction in limitation (	see instructions	)		3	\$800,000.	
4	Reduction in limitation Sub	stract line 3 from I	ine 2 If zero or less, en	ter -0-			4		
5	Dollar limitation for tax yea separately, see instructions	5							
6	(a)	Description of property		(b) Cost (busines	s use only)	(C) Elected	cost		
				<u></u>		ļ			
7	Listed property Enter the a		mount from line 29						
8	Total elected cost of section			), lines 6 and 7			8		
9	Tentative deduction Enter						9	<u> </u>	
10	Carryover of disallowed dec		-		N = = 1 =	5 ( · · ·	10		
11	Business income limitation		•		•	5 (see instrs)	11		
12	Section 179 expense deductions Carryover of disallowed dec				13	T		<del> </del>	
	: Do not use Part II or Part I				1 13	L			
Par			ce and Other Depre		ot includ	e listed propert	v ) (See II	netructions )	
							y y cocc i	istructions )	
14	Special depreciation allowatax year (see instructions)	ince for qualified p	property (other than liste	d property) plac	ed in ser	vice during the	14		
15	Property subject to section	15							
16	Other depreciation (including	ng ACRS)					16	1,165.	
Par	t III MACRS Deprec	iation (Do not in	nclude listed property) (	See instructions	)				
			Section	on A					
17	MACRS deductions for asset	ets placed in servi	ice in tax years beginnin	g before 2008			17	14,557.	
18	If you are electing to group asset accounts, check here	٦							
			in Service During 2008	Tay Year Using	the Gen	eral Depreciato	on System	n	
	(a)	(b) Month and	(C) Basis for depreciation	(d)	(6		(f)	(g) Depreciation	
	Classification of property	year placed in service	(business/investment use only — see instructions)	Recovery period	Conve		thod	deduction	
19 a	3-year property								
	5-year property								
	7-year property	}			<u> </u>				
c	10-year property	_							
e	15-year property								
f	20-year property	]							
	25-year property			25 yrs		S	/┖		
ŀ	Residential rental			27.5 yrs	M	M S	<u>/</u> L		
	property		_	27.5 yrs	M	M S	/L		
i	Nonresidential real			39 yrs	M	M S	/L		
	property	L	MM S/				/L		
	Section C -	- Assets Placed in	n Service During 2008 T	ax Year Using t	he Alterr	native Deprecia	tion Syst	em	
20 a	Class life					s	/L		
	12-year	]		12 yrs		s	/L		
	: 40-year			40 yrs	М	M S	/L		
Par	t IV Summary (See in	structions)		•					
21	Listed property Enter amo	21							
22	Total Add amounts from line 12, the appropriate lines of your return	lines 14 through 17, Ir	nes 19 and 20 in column (g), a	and line 21 Enter he	re and on		22	15,722	
23	For assets shown above ar the portion of the basis attr	nd placed in service	ce during the current year	1	23		<del></del>		

_	' <b>4562</b> (2008)	Televisio	n Radio	Newspa	per C	lub_c	of Sp	<u>rinc</u>	field			37-60	9524	<u>L</u>	Page_2
Par		Property (Incoment, recreation	lude automob	ules, certa						ertaın co	mputer	s, and p	roperty i	ised for	
	Note: Fo	or any vehicle fo	r which you a	re usıng tl	he standa	rd mile	age rate	e or d	educting le	ease exp	ense, c	omplete	only 24	a, 24b,	
	<del> </del>	(a) through (c) n A – Deprecia					-			mits for	nassen	ger auto	mobiles		
24 a	Do you have eviden					[	Yes		lo 24b If "					Yes	No
Ту	(a) pe of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost other b	or	(busine	(e) ir deprecia ss/investm se only)		(f) Recovery period	Me	(g) thod/ vention	Depr	( <b>h)</b> eciation uction	EI sect	(i) ected ion 179 cost
25	Special depreci	ation allowance 50% in a quali	for qualified				ervice d	uring	the tax ye	ar and	25				
26	Property used r														
	-							_						<u> </u>	<del></del>
										-				+-	
27	Property used 5	i0% or less in a	qualified bus	iness use			•								
			<u> </u>											4	
28	Add amounts in	column (h) lin	es 25 through	27 Enter	here and	d on lin	e 21. pa	age 1			28	<del>                                     </del>		1	
	Add amounts in		_				<b></b> , p						29		
	-				B – Infor						•	_			
Com o yo	plete this sectior ur employees, fi	n for vehicles us rst answer the o	ed by a sole guestions in S	proprietor Section C t	, partner, to see if v	or othe ou mee	er 'more et an ex	than ceptic	5% owner on to comp	,' or rela leting th	ted per: is section	son If yo on for th	ou provid ose vehi	led veh cles	ıcles
_			<u> </u>		a)	(t		Ţ,	(c)		d)	Т .	e)		<u></u>
30	Total business/investment miles driven during the year (do not include commuting miles)			1 '	Vehicle 1		Vehicle 2		* * *				cle 5 Vehic		icle 6
31	• ,														
32	Total other pers	sonal (noncomn	nuting)												
33	Total miles driv lines 30 through		ear Add												
				Yes	No	Yes	No	Yes	s No	Yes	No	Yes	No	Yes	No
	Was the vehicle during off-duty	hours?						<u> </u>							
	Was the vehicle than 5% owner	·										-			ļ
36	ls another vehic personal use?	cle available for	<u></u>												ļ
			C – Question							-	•			_	
Ansv 5% c	ver these question where or related	ons to determine I persons (see i	e if you meet nstructions).	an except	ion to cor	mpletin	g Sectio	on B fo	or vehicles	used by	emplo	yees wh	o are no	t more	than
37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?								***	Yes	No				
38	Do you maintair employees? Se	n a written polic	y statement t	hat prohib	oits persoi	nal use	of vehi	cles,	except cor	nmuting,	by you	ır			
39	Do you treat all			•	•		3, 41100	,	01 170 01 11		10.0				
40	Do you provide vehicles, and re	more than five	vehicles to yo	our employ			rmation	from	your emp	loyees a	bout the	use of	the		
41	Do you meet the <b>Note:</b> If your ar	e requirements	concerning q	ualified au											
Par	t VI Amorti					<u></u>									<u> </u>
	(a) Description of costs			Date a	(b) mortization egins		(c) Amortizat amount		0	(d) Code ection	P	(e) ortization eriod or rcentage		(f) Amortization for this year	
42	Amortization of	costs that begi	ns during you	ır 2008 tax	x year (se	e instri	uctions)		<del>                                     </del>						
				<del> </del>		+			+				<del> </del>		
43	Amortization o	f costs that beg	an before vol	ır 2008 ta	x vear							43	1		

44 Total. Add amounts in column (f) See the instructions for where to report