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Form **990-EZ**

Department of the Treasury  
Internal Revenue Service

# 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)

- ▶ Sponsoring organizations and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 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.*

# 2008

## Open to Public Inspection

**A For the 2008 calendar year, or tax year beginning 07-01-2008**

<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	<b>Please use IRS label or print or type. See Specific Instructions.</b>	<b>C Name of organization</b> TOBACCO FREE KANSAS COALITION INC		<b>D Employer identification number</b> 48-1145082
		Number and street (or P O box, if mail is not delivered to street address) Room/suite 5375 SW 7th St		<b>E Telephone number</b> (785) 272-8396
		City or town, state or country, and ZIP + 4 TOPEKA, KS 66606		<b>F Group Exemption Number</b>

**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) ☐




<b>I Website:</b>  WWW.TOBACCOFREEKANSAS.ORG		<b>H</b> Check  <input type="checkbox"/> if the organization is <b>not</b> required to attach Schedule B (Form 990, 990-EZ, or 990-PF)
<b>J Organization type</b> (check only one) — <input checked="" type="checkbox"/> 501(c)(3)  (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 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 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 \$1,000,000 or more, file Form 990 instead of Form 990-EZ \$ 392,624



<b>Part I</b>	<b>Revenue, Expenses, and Changes in Net Assets or Fund Balances</b> (See the instructions for Part I )
---------------	---

Revenue		1	2
1	Contributions, gifts, grants, and similar amounts received . . . . .		369,276
2	Program service revenue including government fees and contracts . . . . .		3,486
3	Membership dues and assessments . . . . .		
4	Investment income . . . . .		8,900
5a	Gross amount from sale of assets other than inventory . . . . .	5a	
b	Less cost or other basis and sales expenses . . . . .	5b	0
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c	
6	Special events and activities (complete applicable parts of Schedule G) If any amount is from <b>gaming</b> , check here  		
a	Gross revenue (not including \$ _____ of contributions reported on line 1) . . . . .	6a	0
b	Less direct expenses other than fundraising expenses . . . . .	6b	0
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . . .	6c	0
7a	Gross sales of inventory, less returns and allowances . . . . .	7a	
b	Less cost of goods sold . . . . .	7b	0
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	7c	
8	Other revenue (describe   )	8	10,962
9	<b>Total revenue</b> (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8) . . . . . 	9	392,624

Expenses	<b>10</b>	Grants and similar amounts paid (attach schedule) 	<b>10</b>	84,791
	<b>11</b>	Benefits paid to or for members . . . . .	<b>11</b>	
	<b>12</b>	Salaries, other compensation, and employee benefits . . . . .	<b>12</b>	125,919
	<b>13</b>	Professional fees and other payments to independent contractors . . . . .	<b>13</b>	
	<b>14</b>	Occupancy, rent, utilities, and maintenance . . . . .	<b>14</b>	6,480
	<b>15</b>	Printing, publications, postage, and shipping . . . . .	<b>15</b>	6,149
	<b>16</b>	Other expenses (describe  _____)	<b>16</b>	338,547
	<b>17</b>	<b>Total expenses</b> (add lines 10 through 16) . . . . . 	<b>17</b>	561,886

Net Assets	<b>18</b>	Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	<b>18</b>	-169,262
	<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>	551,049
	<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>	381,787

**Part II Balance Sheets**—If Total assets on line 25, column (B) are \$2,500,000 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 . . . . .	552,766	<b>22</b> 384,442
<b>23</b>	Land and buildings . . . . .		<b>23</b>
<b>24</b>	Other assets (describe  )	43	<b>24</b>
<b>25</b>	<b>Total assets</b> . . . . .	552,809	<b>25</b> 384,442
<b>26</b>	<b>Total liabilities</b> (describe  )	1,760	<b>26</b> 2,655
<b>27</b>	<b>Net assets or fund balances</b> (line 27 of column (B) <b>must</b> agree with line 21) .	551,049	<b>27</b> 381,787

<b>Part III Statement of Program Service Accomplishments</b> (See the instructions for Part III )		<b>Expenses</b> (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others )	
What is the organization's primary exempt purpose? <b>REDUCE TOBACCO USE AMONG KANSANS</b>			
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			
<b>28</b> Assist with the recruitment of individuals and local and statewide organizations, businesses and agencies to reduce the damage caused by tobacco use, assist with identification and dissemination of information on a variety of strategies for reducing the harm of second-hand smoke in public places, reducing youth access to tobacco products, reducing the impact of tobacco marketing and promotions on youth, plus monitoring and publicizing local and state policy changes on tobacco issues. Provide materials, information and training on tobacco control prevention. Provide mini-grant funding to community and youth groups for educational tobacco use projects. Provide data on tobacco use and evaluation procedures for tobacco control and tobacco prevention programs. Use mailings, e-mails, list serve announcements, and newsletters to disseminate news and events to Tobacco Free Kansas Coalition members and other individuals and organizations concerned about the physical and economic damage of tobacco use. (Grants \$ 499,864) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		<b>28a</b>	84,791
<b>29</b>			
(Grants \$ ) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		<b>29a</b>	
<b>30</b>			
(Grants \$ ) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		<b>30a</b>	
<b>31</b> Other program services (attach schedule) . . . . . (Grants \$ ) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		<b>31a</b>	
<b>32 Total program service expenses</b> (add lines 28a through 31a) . . . . .		<b>32</b>	499,864

<b>Part IV List of Officers, Directors, Trustees, and Key Employees.</b> List each one even if not compensated. (See the instructions for Part IV.)				
(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 Additional Data Table				

Form **990-EZ** (2008)

Part VI

Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 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		Yes	No
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		Yes	
48	Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "yes," complete Schedule E			No
49a	Did the organization make any transfers to an exempt non-charitable related organization?			No
b	If "Yes," was the related organization(s) a section 527 organization?			No
50	Complete this table for the five highest compensated employees (other than officers, directors, trustees, and key employees) who received more than \$100,000 of compensation from the organization. If there are 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				
Total number of other employees paid over \$100,000				

51	Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there are none, enter "None."				
(a)	Name and address of each independent contractor paid more than \$100,000	(b)	Type of service	(c)	Compensation
	NONE				
	Total number of other independent contractors receiving over \$100,000				

Please 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		2010-05-10 Date		
Paid Preparer's Use Only	Preparer's signature Bradley N Owen		Date	Check if self-employed	Preparer's PTIN (See Gen. Inst. X)
	Firm's name (or yours if self-employed), address, and ZIP + 4 Mize Houser & Company PA 534 S Kansas Ave Suite 700 Topeka, KS 66603				EIN
					Phone no. (785) 233-0536
May the IRS discuss this return with the preparer shown above? See instructions.					
Yes No					

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)  
nonexempt charitable trusts.  
Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

2008

Open to Public  
Inspection

Name of the organization TOBACCO FREE KANSAS COALITION INC		Employer identification number 48-1145082
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Part I

Reason for Public Charity Status (to be completed by all organizations) (See Instructions)

The organization is not a private foundation because it is (Please check only **one** organization )

1	<input type="checkbox"/>	A church, convention of churches, or association of churches described in <b>Section 170(b)(1)(A)(i).</b>
2	<input type="checkbox"/>	A school described in <b>Section 170(b)(1)(A)(ii).</b> (Attach Schedule E )
3	<input type="checkbox"/>	A hospital or a cooperative hospital service organization described in <b>Section 170(b)(1)(A)(iii).</b> (Attach Schedule H )
4	<input type="checkbox"/>	A medical research organization operated in conjunction with a hospital described in <b>Section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state
5	<input type="checkbox"/>	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>Section 170(b)(1)(A)(iv).</b> (Complete Part II )
6	<input type="checkbox"/>	A federal, state, or local government or governmental unit described in <b>Section 170(b)(1)(A)(v).</b>
7	<input type="checkbox"/>	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in <b>Section 170(b)(1)(A)(vi)</b> (Complete Part II )
8	<input type="checkbox"/>	A community trust described in <b>Section 170(b)(1)(A)(vi)</b> (Complete Part II )
9	<input type="checkbox"/>	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See <b>Section 509(a)(2).</b> (Complete Part III )
10	<input type="checkbox"/>	An organization organized and operated exclusively to test for public safety See <b>Section 509(a)(4).</b> (See instructions )
11	<input checked="" type="checkbox"/>	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See <b>Section 509(a)(3).</b> Check the box that describes the type of supporting organization and complete lines 11e through 11h a <input checked="" type="checkbox"/> Type I      b <input type="checkbox"/> Type II      c <input type="checkbox"/> Type III - Functionally Integrated      d <input type="checkbox"/> Type III - Other
e	<input type="checkbox"/>	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f	<input type="checkbox"/>	If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
g	<input type="checkbox"/>	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? (ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above?
h	<input type="checkbox"/>	Provide the following information about the organizations the organization supports

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (See Instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
AMERICAN HEART ASSOCIATION	135613797	LINE 11A	Yes			No	Yes		124966
AMERICAN LUNG ASSOCIATION OF KANSAS	480543751	LINE 11A	Yes			No	Yes		124966
AMERICAN CANCER SOCIETY	741185665	LINE 11A	Yes			No	Yes		124966
KDHE and Local Health Agencies	486029925	LINE 8	Yes			No	Yes		124966
Total									499,864

Part II

Support Schedule for Organizations Described in IRC 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.)

Public Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add line 1-3						
5 The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						
6 Public Support subtract line 5 from line 4						

Total Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
11 Total Support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions )					12	
13 First Five Years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Computation of Public Support Percentage		
14 Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	15	
16a 33 1/3% Test - 2008. 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 type="checkbox"/>
b 33 1/3% Test - 2007. If the organization did not check the 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"/>
17a 10% Facts and Circumstances Test - 2008. 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 10% Facts and Circumstances Test - 2007. 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"/>
18 Private Foundation. If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		<input type="checkbox"/>

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total Add lines 1-5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
cTotal of lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Total Support						
Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
13Total Support (Add lines 9, 10c, 11 and 12)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Computation of Public Support Percentage		
15Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	15	
16Public Support Percentage for 2007 Schedule A, Part IV -A, line 27g	16	

Computation of Investment Income Percentage		
17Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f))	17	
18Investment Income Percentage from 2007 Schedule A, Part IV -A, line 27h	18	
19a33 1/3% Tests - 2008. 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		
b33 1/3% Tests - 2007. 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		
20Private 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 information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

Facts and Circumstances Test

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

OMB No 1545-0047

2008

Open to Public Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

- Section 501(c)(3) organizations    complete Parts I-A and B    Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations    complete Parts I-A and C below    Do not complete Part I-B
- Section 527 organizations    complete Part I-A only

If the organization answered “Yes,” to Form 990, Part IV, Line 4, or Form 990EZ, Part VI, line 47 (Lobbying Activities)

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h))    complete Part II-A    Do not complete Part II-B
  - Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h))    Complete Part II-B    Do not complete Part II-A
- If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax)
- Section 501(c)(4), (5), or (6) organizations    complete Part III

Name of the organization TOBACCO FREE KANSAS COALITION INC	Employer identification number  48-1145082
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Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations. (See the instructions for Schedule C for details.)

- 1

Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2

Political expenditures

\$
- 3

Volunteer hours

Part I-B To be completed by all organizations exempt under section 501(c)(3). (See the instructions for Schedule C for details.)

- 1

Enter the amount of any excise tax incurred by the organization under section 4955

\$
- 2

Enter the amount of any excise tax incurred by organization managers under section 4955

\$
- 3

If the organization incurred in a section 4955 tax, did it file Form 4720 for this year?

☐ Yes

☒ No
- 4a

Was a correction made?

☐ Yes

☒ No
- b

If "Yes," describe in Part IV

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3). (See the instructions for Schedule C for details.)

- 1

Enter the amount directly expended by the filing organization for section 527 exempt function activities

\$
- 2

Enter the amount of the filing organization's internal funds contributed to other organizations for section 527 exempt funtion activities

\$
- 3

Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b

\$
- 4

Did the filing organization file **Form 1120-POL** for this year?

☐ Yes

☐ No
- 5

State the names, addresses and Employer Identification Number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's own internal funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's internal funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

Part II-A

To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). (See the instructions for Schedule C for details.)

A

Check

☐

if the filing organization belongs to an affiliated group

B

Check

☐

if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures— (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	3,005	
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	4,690	
c	Total lobbying expenditures (add lines 1a and 1b)	7,695	
d	Other exempt purpose expenditures	554,191	
e	Total exempt purpose expenditures (add lines 1c and 1d)	561,886	
f	Lobbying nontaxable amount Enter the amount from the following table in both columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000 The lobbying nontaxable amount is: 20% of the amount on line 1e \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000	109,283	
g	Grassroots nontaxable amount (enter 25% of line 1f)	27,321	
h	Subtract line 1g from line 1a Enter -0- if line g is more than line a		
i	Subtract line 1f from line 1c Enter -0- if line f is more than line c		
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

4-Year Averaging Period Under Section 501(h)  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount	53,277	62,871	51,335	109,283	276,766
b Lobbying ceiling amount (150% of line 2a, column(e))					415,149
c Total lobbying expenditures	1,802	2,397	3,496	7,695	15,390
d Grassroots non-taxable amount	13,319	15,718	12,834	27,321	69,192
e Grassroots ceiling amount (150% of line d, column (e))					103,788
f Grassroots lobbying expenditures	1,802	2,397	3,496	3,005	10,700

**Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)).** (See the instructions for Schedule C for details.)

		(a)		(b)
		Yes	No	Amount
<b>1</b>	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
<b>a</b>	Volunteers?			
<b>b</b>	Paid staff or management (include compensation in expenses reported on lines c through i)?			
<b>c</b>	Media advertisements?			
<b>d</b>	Mailings to members, legislators, or the public?			
<b>e</b>	Publications, or published or broadcast statements?			
<b>f</b>	Grants to other organizations for lobbying purposes?			
<b>g</b>	Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b>	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
<b>i</b>	Other activities If "Yes," describe in Part IV			
<b>j</b>	Total lines 1c through 1i			
<b>2a</b>	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b>	If "Yes" enter the amount of any tax incurred under section 4912			
<b>c</b>	If "Yes" enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).** (See the instructions for Schedule C for details.)

		Yes	No
<b>1</b>	Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b>	
<b>2</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b>	
<b>3</b>	Did the organization agree to carryover lobbying and political expenditures from the prior year?	<b>3</b>	

**Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes."** (See the instructions for Schedule C for details.)

<b>1</b>	Dues, assessments and similar amounts from members	1 \$
<b>2</b>	Section 162(e) non-deductible lobbying and political expenditures <i>(do not include amounts of political expenses for which the section 527(f) tax was paid).</i>	
<b>a</b>	Current Year	2a \$
<b>b</b>	Carryover from last year	2b \$
<b>c</b>	Total	2c \$
<b>3</b>	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$
<b>4</b>	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4 \$
<b>5</b>	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5 \$

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Ident ifier	Return Reference	Explanat ion

## Supplemental Information

Identifier	Return Reference	Explanation
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## TY 2008 Grants and Similar Amounts Paid Schedule

**Name:** TOBACCO FREE KANSAS COALITION INC

**EIN:** 48-1145082

**Software ID:** 08000091

**Software Version:** 2008v2.7

<b>Item No.</b>	1
<b>Class of Activity</b>	
<b>Donee's Name</b>	VARIOUS
<b>Donee's Address</b>	various topeka, KS 66601
<b>Amount (FMV)</b>	84,791
<b>Purpose of Payment to Affiliate</b>	
<b>Relationship</b>	
<b>Description</b>	
<b>Book Value</b>	
<b>How BV Determined</b>	
<b>How FMV Determined</b>	
<b>Date of Gift</b>	

TY 2008 Other Assets Schedule

**Name:** TOBACCO FREE KANSAS COALITION INC

**EIN:** 48-1145082

**Software ID:** 08000091

**Software Version:** 2008v2.7

Description	Beginning of Year Amount	End of Year Amount
Furniture and Fixtures	43	

**TY 2008 Other Expenses Schedule****Name:** TOBACCO FREE KANSAS COALITION INC**EIN:** 48-1145082**Software ID:** 08000091**Software Version:** 2008v2.7

Description	Amount
Travel	15,638
TELEPHONE	4,637
SUPPLIES	5,849
PROFESSIONAL FEES AND CONTRACT	147,317
MISCELLANEOUS	1,270
MEDIA	88,134
EQUIPMENT RENTAL AND MAINT	9,650
DUES & SUBSCRIPTIONS	240
Depreciation	43
Conferences, Conventions, and Meetings	54,405
BUSINESS INSURANCE	2,881
BANK CHARGES	30
ADMINISTRATIVE PAYMENTS	8,453



**TY 2008 Other Liabilities Schedule****Name:** TOBACCO FREE KANSAS COALITION INC**EIN:** 48-1145082**Software ID:** 08000091**Software Version:** 2008v2.7

Description	Beginning of Year Amount	End of Year Amount
SIT WITHELD	277	403
FIT & FICA WITHELD	1,483	2,252

TY 2008 Other Revenues Schedule

**Name:** TOBACCO FREE KANSAS COALITION INC

**EIN:** 48-1145082

**Software ID:** 08000091

**Software Version:** 2008v2.7

Description	Amount
MISCELLANEOUS	10,962

## ***Bylaws of the Tobacco Free Kansas Coalition, Inc.***

### ***Article I. Name***

The name of this organization shall be Tobacco Free Kansas Coalition, Incorporated ("the Coalition").

### ***Article II. Mission***

The mission of the Coalition is to reduce the prevalence of tobacco use among Kansans, particularly among children and youth, to improve health and to avoid the negative economic impact of tobacco use.

### ***Article III. Offices***

The principal state office of the corporation shall be located in Topeka, Kansas. The state office shall maintain correct and complete books and records of accounts and shall maintain minutes of the proceedings of its Board of Directors, general membership meetings and committees. The corporation may have such other offices within Kansas, as the Board of Directors may designate or as the affairs of the corporation may require from time to time.

### ***Article IV. Fiscal Year***

The fiscal year of the Coalition shall begin on July 1 and end on June 30, of the following year. The Board of Directors will determine on an annual basis the level of service necessary to ensure that Coalition financial records and reports are properly maintained as determined by grant and/or contract requirements, with such reports to be maintained in the TFKC office with such financial reports to be provided to the Coalition Board of Directors no later than the first day of December of each year.

### ***Article V. Coalition Meetings***

Meeting of the entire Coalition membership shall be at least annually at the initiation of the President. A meeting announcement and agenda shall be sent to the Coalition membership at least two weeks prior to the meetings whether members are on site or are participating through a video connection. Quorums shall be a majority of voting members present at the meeting.

### ***Article VI. Membership***

#### ***Section 1. Responsibilities***

Members of Tobacco Free Kansas Coalition are expected to:

- A. Promote and support the mission of the Coalition;
- B. Advocate in support of the Coalition mission at all policy levels;
- C. Contribute financial support, including annual membership dues, if such are established;
- D. Develop and maintain relationships with Coalition members, allies and local communities; and
- E. Attend meetings.

## *Section 2. Classes of Membership*

- A. An individual member is any person who has requested and been approved for individual membership status by the Board of Directors and who may or may not be associated with a member organization.
- B. A member organization is an organization that has requested membership and been approved by the Board of Directors, with one member of the organization being designated by such organization to be the voting representative. Such organization membership, includes, but is not limited to, corporations, governmental entities, not-for-profit organizations, volunteer or community groups, partnerships, sole-proprietorships, foundations and grassroots organizations.
- C. Other membership categories may be established as determined by the Board of Directors.
- D. Founding members of the Coalition are the American Cancer Society, the American Lung Association; and the American Heart Association and the Kansas Department of Health and Environment and their successors.

## *Section 3. Rights and Privileges*

- A. Individual members shall have all rights and privileges of members, including the eligibility to hold office, to serve on committees, to attend meetings, to participate in debate, and to vote. An individual member shall be entitled to one vote on coalition voting issues.
- B. The designated representative of an organizational member or of a founding member organization shall exercise all rights and privileges of members, including the eligibility to hold office, to serve on committees, to attend meetings, to participate in debate, and to vote. The designated representative is entitled to cast one vote on behalf of the member organization on coalition voting issues.

## *Section 4. Membership Process*

- A. Membership in the Coalition shall be granted upon presentation of the completed application form and approval of the Board of Directors.
- B. Dues
  - 1. The Board of Directors may determine fees for membership, if any, subject to approval of the membership.
  - 2. Such fees, when designated, shall be reviewed by the Board of Directors annually and be due on July 1.
- C. Refusal and Forfeiture of Membership
  - 1. Membership may be terminated by a vote of the Board of Directors for non-compliance with membership criteria.

## *Article VII: Officers*

The Officers of the Coalition include a President, Vice President, Secretary and Treasurer, as well as the Immediate Past President. No person shall hold more than one office concurrently. The term of each office shall be for one year. To be eligible to run for office, each nominee must have been a Coalition member for at least one year prior to nomination for office. Officers shall be elected by the Coalition members eligible to vote. Officers begin their

terms at the start of the fiscal year or after their election, whichever comes first, and shall serve until their successors are elected and qualified. An officer shall serve no more than two consecutive terms in that office.

#### *Section 1. The President*

The President shall be the chief elected officer of the Coalition, have general supervision of the affairs of the Coalition, and serve as presiding officer at all Coalition meetings. The President shall advocate the policy issues adopted by the Coalition and the Board of Directors and shall be the spokesperson for the Coalition.

#### *Section 2. The Vice President*

The Vice President shall in the event of disability of the President or at the direction of the President, perform the duties and exercise the powers of the President.

#### *Section 3. The Secretary*

The Secretary shall have the responsibility for all minutes of meetings, policies and procedures and for all organizational records. The Secretary shall report the prior minutes of the Coalition at each regularly scheduled meeting.

#### *Section 4. The Treasurer*

The Treasurer shall have the responsibility for maintaining records of all funds and securities of the Coalition, but may delegate the accounting of receipts, bookkeeping services, and other financial functions as needs arise. The treasurer shall also monitor the annual review or audit of Coalition accounts to be reported to the membership.

#### *Section 5. Vacancies*

If a board vacancy occurs, the Board of Directors shall appoint a Coalition member to fill the unexpired term.

### *Article VIII. Nominating Committee*

The President shall appoint a nominating committee which will prepare a ballot of officers and directors prior to the annual meeting. The ballot for officers and other directors shall be sent to the membership at least two weeks prior to the election deadline. Directors will begin their terms at the start of the fiscal year on July 1, or after their election, whichever comes first.

### *Article IX. Board of Directors*

The Board of Directors shall consist of:

1. President
2. Vice President
3. Secretary
4. Treasurer
5. Immediate Past President
6. Representatives from up to six regions.
7. Founding members not already represented on the Board.

Each board member will have only one vote.

- A. The Board of Directors shall meet at times deemed appropriate by the President. The Board of Directors shall maintain a record of all its proceedings and will report all activities during the annual Coalition meeting.
- B. If four or more Board Members request in writing a Board meeting, one must be held within two weeks.
- C. Board meetings may be held by means of conference telephone or similar communications equipment by which all Board of Directors can hear each other at the same time. Such participation shall constitute presence in person at the meeting.
- D. Any action required or permitted to be taken at a meeting of the Board of Directors may be taken without a meeting if consent in writing or by electronic means, setting forth the action so taken, shall be approved by the Board of Directors.
- E. The business and the affairs of the corporation shall be managed by the Board of Directors. The Board of Directors shall select and supervise an Executive Director for the corporation, make policy decisions, establish rules and procedures for the corporation and approve and/or consider reports and resolutions.
- F. The Executive Director of the Coalition shall serve as an ex officio member of the Board.
- G. Unexcused absence by a Board Member from three consecutive meetings will be subject to review by the Board and may lead to termination on the Board of Directors. Any Board Member may be removed by a majority vote of the remaining Board whenever in the Board's judgment the best interests of the corporation will be served thereby.
- H. A quorum of the Board of Directors shall consist of a majority of members.
- I. The Board of Directors may establish working committees from within its membership.

#### ***Article X. Standing Committees***

Standing Committees may be established by the Board of Directors and reviewed annually.

#### ***Article XI. Amendments***

These bylaws may be amended by a majority vote of the members present at any Coalition meeting, after having been given two weeks advance notice of the proposed amendment(s).

#### ***Article XII. Dissolution***

The funds of the Coalition shall be used only for the purposes outlined in these bylaws and for no other purpose. Upon dissolution of the Coalition, any funds remaining after paying or making provision for payment of the costs and expenses of dissolution, shall be distributed as determined by the Board of Directors to such an organization or organizations organized and operated exclusively for public charitable use.

***Article XIII. Procedure***

Whenever these bylaws fail to provide express procedural guidance, the most recent Roberts Rules of Order shall govern.

**BYLAWS CHANGES:**

7-15-09 Approved by full coalition membership

6-18-09 Approved for submission to full membership by TFKC Board of Directors

7-12-07 Membership and financial records bylaws approved by full coalition membership

**TFKC/KSKI merger changes**

1-06-04 - Approved for submission to full membership by KSKI Board of Directors.

1-27-04 -- Approved by full coalition membership

Additional Data

Software ID:

Software Version:

EIN: 48-1145082

Name: TOBACCO FREE KANSAS COALITION INC

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(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
MISTY BURKE 5375 SW 7TH ST 100 TOPEKA,KS 66606	Director 0 25	0		
NICOLE BROWN 5375 SW 7TH ST 100 TOPEKA,KS 66606	Director 3 00	0		
RITA FLICKINGER RN 5375 SW 7TH ST 100 TOPEKA,KS 66606	Director 2 50	0		
TRICIA DUNLAP RN 5375 SW 7TH ST 100 TOPEKA,KS 66606	Director 2 00	0		
SHIRLEY VORAN 5375 SW 7TH ST 100 TOPEKA,KS 66606	Director 5 00	0		
ANNE SPIESS 5375 SW 7TH ST 100 TOPEKA,KS 66606	Director 3 00	0		
TERRI ROBERTS RN JD 5375 SW 7TH ST 100 TOPEKA,KS 66606	Treasurer 2 00	0		
LINDA DECOURSEY 5375 SW 7TH ST 100 TOPEKA,KS 66606	President 3 00	0		
JAMES GARDNER MD 5375 SW 7TH ST 100 TOPEKA,KS 66606	Director 2 00	0		
JOHN NEUENSWANDER 5375 SW 7TH ST 100 TOPEKA,KS 66606	Director 2 50	0		
PAULA CLAYTON 5375 SW 7TH ST 100 TOPEKA,KS 66606	Director 1 00	0		
JON HAUXWELL MD 5375 SW 7TH ST 100 TOPEKA,KS 66606	Vice President 3 00	0		
KATHY BRUNER 5375 SW 7TH ST 100 TOPEKA,KS 66606	Secretary 2 00	0		
MARY JAYNE HELLEBUST 5375 SW 7TH ST 100 TOPEKA,KS 66606	Executive Direc 40 00	53,949	8,191	



Additional Data

Software ID:  
Software Version:  
EIN: 48-1145082  
Name: TOBACCO FREE KANSAS COALITION INC

Form 990, Schedule A, Part I, Line 11h - Provide the following information about the organizations the organization supports.

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1 - 9 above or IRC section )	(iv) Is the organization in (i) listed in your governing document?		(v) Did you notify the organization in (i) of your support?		(vi) Is the organization in (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
AMERICAN HEART ASSOCIATION	135613797	LINE 11A	Yes			No	Yes		124966
AMERICAN LUNG ASSOCIATION OF KANSAS	480543751	LINE 11A	Yes			No	Yes		124966
AMERICAN CANCER SOCIETY	741185665	LINE 11A	Yes			No	Yes		124966
KDHE and Local Health Agencies	486029925	LINE 8	Yes			No	Yes		124966