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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.*

OMB No 1545-1150

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 10-01-2008 , and ending 09-30-2009

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☑ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

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

C Name of organization
Kiwanis International K02018 Vicksburg
K02018 Vicksburg

Number and street (or P O box, if mail is not delivered to street address) | Room/suite
PO Box 401

City or town, state or country, and ZIP + 4
Vicksburg, MS 39181

D Employer identification number
64-0468348

E Telephone number
(601) 218-1754

F Group Exemption Number ▶

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

G Accounting method ☑ Cash ☐ Accrual
Other (specify) ▶

I Website: ▶ www vicksburgkiwanis org

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

J Organization type (check only one)— ☑ 501(c) (4) ◀(insert no) ☐ 4947(a)(1) or ☐ 527

K Check ▶ ☑ if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than $25,000 A 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 ▶ $ 42,515

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

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	18,759
	2	Program service revenue including government fees and contracts		2	0
	3	Membership dues and assessments		3	23,382
	4	Investment income		4	0
	5a	Gross amount from sale of assets other than inventory	5a 0		
	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	0
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from **gaming**, check here ▶ ☐			
	a	Gross revenue (not including $ ____ 0 ____ 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 0		
	b	Less cost of goods sold	7b 0		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	0
	8	Other revenue (describe ▶)		8	374
	9	**Total revenue** (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)		9	42,515
Expenses	10	Grants and similar amounts paid (attach schedule)		10	16,890
	11	Benefits paid to or for members		11	3,060
	12	Salaries, other compensation, and employee benefits		12	0
	13	Professional fees and other payments to independent contractors		13	23,086
	14	Occupancy, rent, utilities, and maintenance		14	0
	15	Printing, publications, postage, and shipping		15	2,189
	16	Other expenses (describe ▶)		16	4,156
	17	**Total expenses** (add lines 10 through 16)		17	49,381
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	-6,866
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	15,355
	20	Other changes in net assets or fund balances (attach explanation)		20	0
	21	Net assets or fund balances at end of year (combine lines 18 through 20)		21	8,489

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
22	Cash, savings, and investments	15,355	22	8,489
23	Land and buildings	0	23	0
24	Other assets (describe ▶)	0	24	0
25	**Total assets**	15,355	25	8,489
26	**Total liabilities** (describe ▶)	0	26	0
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	15,355	27	8,489

Part III Statement of Program Service Accomplishments (See the instructions for Part III)

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

What is the organization's primary exempt purpose?
Kiwanis is a global organization of volunteers dedicated to serving one child and one community at a time The Vicksburg Kiwanis Club is a service club that performs service projects within the community of Vicksburg,Mississippi to serve those who need help

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

28 See Additional Data Table (Grants $) If this amount includes foreign grants, check here . . . ▶ ☐	**28a**		
29 (Grants $) If this amount includes foreign grants, check here . . . ▶ ☐	**29a**		
30 (Grants $) If this amount includes foreign grants, check here . . . ▶ ☐	**30a**		
31 Other program services (attach schedule) . . . . . . (Grants $) If this amount includes foreign grants, check here . . . ▶ ☐	**31a**		
32 Total program service expenses (add lines 28a through 31a) . . . . . ▶	**32**	20,657	

Part IV List of Officers, Directors, Trustees, and Key Employees. 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				

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

			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		No
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34		No
35	*If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but **not** reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T*			
a	Did the organization have unrelated business gross income of $1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a		No
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	35b		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? *If "Yes," complete applicable parts of Schedule N*	36		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0			
b	Did the organization file **Form 1120-POL** for this year?	37b		No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or** were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	*501(c)(7) organizations.* Enter			
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40a	*Section 501(c)(3) organizations.* Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____			
b	*Section 501(c)(3) and (4) organizations.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? *If "Yes," complete Schedule L, Part I.*	40b		No
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0			
d	Enter amount of tax on line 40c reimbursed by the organization ▶ 0			
e	*All organizations.* At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	40e		No

41 List the states with which a copy of this return is filed ▶ MS

42a The books are in care of ▶ Charles McKinnie Telephone no ▶ (601) 218-1754

Located at ▶ 120 Annandale Drive Vicksburg, MS ZIP + 4 ▶ 39183

			Yes	No
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		No
	If "Yes," enter the name of the foreign country ▶ _____			
	See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.**			
c	At any time during the calendar year, did the organization maintain an office outside of the U S ?	42c		No
	If "Yes," enter the name of the foreign country ▶ _____			

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041**—Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43

			Yes	No
44	Did the organization maintain any donor advised funds? *If "Yes", Form 990 must be completed instead of Form 990-EZ.*	44		No
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? *If "Yes", Form 990 must be completed instead of Form 990-EZ.*	45		No

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.

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

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
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
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

▶ _____ 2010-05-17
Signature of officer Date

▶ Charles McKinnie Treasurer
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-empolyed ▶ ☐	Preparer's PTIN (See Gen Inst X)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶			EIN ▶
			Phone no ▶

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

Additional Data

Software ID:
Software Version:
EIN: 64-0468348
Name: Kiwanis International K02018 Vicksburg
K02018 Vicksburg

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.	Expenses (Required for 501(c)(3) and (4) organizations and 4947 (a)(1) trusts; optional for others.)	
28 Sponsored Youth Committee Key Clubs Scholarships, weekly Kiwanis meeting meals, K-family party, and Key Club Advisor dues (Grants $ 5,928) If this amount includes foreign grants, check here . . . ▶ ☑	**28a**	5,928
29 Community Services Committee Help with the Good Shepard Center and other community organizations such as Special Olympics (Grants $ 1,000) If this amount includes foreign grants, check here . . . ▶ ☑	**29a**	1,000
30 Spiritual Aims Committee Provide Clergy Appreciation Day at Kiwanis meeting (Grants $ 85) If this amount includes foreign grants, check here . . . ▶ ☑	**30a**	85
Youth Services Committee Support Boy Scout troop, sponsor youth sports teams, support St Judes, Support Jacobs Ladder School,and Childrens miracle Network (Grants $ 1,150) If this amount includes foreign grants, check here . . . ▶ ☑		1,150
Young Children Priority One Committee Support projects where young children will benefit (Grants $ 750) If this amount includes foreign grants, check here . . . ▶ ☑		750
YCPO- Read and Succeed program Purchase books for Kindergarten and 1st grades Kiwanis members read books to Kindergarten and 1st grade classes Books are donated to the students and teachers (Grants $ 1,500) If this amount includes foreign grants, check here . . . ▶ ☑		1,500
Youth and Welfare Kiwanis program donates to the Kiwanis Foundation at International, donates to Kiwanis District foundation, provides liability insurance, and District foundation memorials (Grants $ 1,744) If this amount includes foreign grants, check here . . . ▶ ☑		1,744
Support Kiwanis Club fundraising activities (Grants $ 8,500) If this amount includes foreign grants, check here . . . ▶ ☑		8,500

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
Forbes Grogan 820 South Street Vicksburg,MS 39180	President 4	0	0	0
Lee Thames 1642 Chambers Street Vicksburg,MS 39180	President Elect 1	0	0	0
Ryan Lee 4555 Hwy 80 Vicksburg,MS 39180	Vice President 2	0	0	0
Charles McKinnie 120 Annandale Drive Vicksburg,MS 39183	Secretary Treasurer 10	0	0	1,200
Georgia Gradowitz 1107 Newit Vick Drive Vicksburg,MS 39183	Board Director 2	0	0	0
Laura Kaufman 200 Eagle Lake Shore Road Vicksburg,MS 39183	Doard Director 2	0	0	0
Sam Porter 4303 Woodside Drive Vicksburg,MS 39180	Board Director 2	0	0	0
Pam Pugh 8030 Jeff Davis Road Vicksburg,MS 39180	Board Director 2	0	0	0
Donna Osburn 1900 Freetown Road Vicksburg,MS 39183	Board Director 2	0	0	0
Tom Osburn 1900 Freetown Road Vicksburg,MS 39183	Board Director 8 00	0	0	0
Rusty Fuller 103 Trailwood Drive Vicksburg,MS 39180	Board Director 2	0	0	0
Wesley Jones PO Box 822585 Vicksburg,MS 39181	Board Director 2	0	0	0

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TY 2008 Other Expenses Schedule

Name: Kiwanis International K02018 Vicksburg
K02018 Vicksburg
EIN: 64-0468348
Software ID: 08000095
Software Version: v1.00

Description	Amount
Fund Raiser Expenses	4,156

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TY 2008 Other Revenues Schedule

Name: Kiwanis International K02018 Vicksburg
K02018 Vicksburg
EIN: 64-0468348
Software ID: 08000095
Software Version: v1.00

Description	Amount
Misc. Donations	374