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990-EZ**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 of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$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**Department of the Treasury
Internal Revenue Service**A** For the 2008 calendar year, or tax year beginning **October 1**, 2008, and ending **September 30**, 20 **09****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****K00380 San Angelo**

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

P. O. Box 148

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

San Angelo, TX 76902-0148**D** Employer identification number**75****6035715****E** Telephone number**(325)****224-2774****F** Group Exemption Number**▶****0026**• **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.sanangelokiwani.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 ▶ \$ **69,442****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	1178
	2	Program service revenue including government fees and contracts	2	0
	3	Membership dues and assessments	3	22,590
	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 <input type="checkbox"/>		
	a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	45,674
	b	Less: direct expenses other than fundraising expenses	6b	27,272
Expenses	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	18,402
	7a	Gross sales of inventory, less returns and allowances	7a	
	b	Less: cost of goods sold	7b	
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0
	8	Other revenue (describe ▶ _____)	8	0
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8. ▶	9	42,170
	10	Grants and similar amounts paid (attach schedule)	10	26,581
	11	Benefits paid to or for members	11	0
	12	Salaries, other compensation, and employee benefits	12	0
	13	Professional fees and other payments to independent contractors	13	0
Net Assets	14	Occupancy, rent, utilities, and maintenance	14	0
	15	Printing, publications, postage, and shipping	15	117
	16	Other expenses (describe ▶ _____)	16	13,993
	17	Total expenses. Add lines 10 through 16. ▶	17	40,691
	18	Excess or (deficit) for the year (Subtract line 17 from line 9).	18	1479
	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	29,485
	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	30,964

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	29,329	30,081
23 Land and buildings	0	0
24 Other assets (describe ▶ _____)	156	883
25 Total assets	29,485	30,964
26 Total liabilities (describe ▶ _____)	0	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	29,485	30,964

For Privacy Act and Paperwork Reduction Act Notice, see the instruction for Form 990.

Cat No. 108421

Form **990-EZ** (2008)

SCANNED FEB 23 2010

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

What is the organization's primary exempt purpose? Community Services

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.

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

28 Grants and similar amounts paid with primary emphasis on children and youth. (These grants and similar amounts paid are listed in the schedule for Line 10)

(Grants \$	19,009)	If this amount includes foreign grants, check here	<input type="checkbox"/>	28a	19,009
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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	<input type="checkbox"/>	31a

32 Total program service expenses (add lines 28a through 31a)	32	19,009
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Part IV **List of Officers, Directors, Trustees, and Key Employees.** List each one even if not compensated. (See the instructions for Part IV.)

[illegible]

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		✓
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		✓
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 section 6033(e) notice, reporting, and proxy tax requirements?		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a		
b	Did the organization file Form 1120-POL for this year?		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b n/a		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 39a n/a		
b	Gross receipts, included on line 9, for public use of club facilities 39b n/a		
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		✓
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶		
d	Enter amount of tax on line 40c reimbursed by the organization ▶		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.		
40e			
41	List the states with which a copy of this return is filed. ▶		
42a	The books are in care of ▶ Thomas R. Johnston Telephone no. ▶ (325) 224-2774 Located at ▶ 3105 Southland Blvd. San Angelo, Texas 76904 ZIP + 4 ▶ 76904-7446		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .	42b	✓
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶	42c	✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	✓
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	✓

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
46		✓
47		✓
48		✓
49a		✓
49b		
- 47** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48** Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a** Did the organization make any transfers to an exempt non-charitable related organization?
- 49b** If "Yes," was the related organization(s) a section 527 organization?
- 50** Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
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 is 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 each receiving over \$100,000 . . ▶		

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: Thomas R. Johnston Date: 11/20/10

Type or print name and title: Thomas R. Johnston - Treasurer

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed ☐ Preparer's Identifying Number (See instructions): _____

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

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

	Admin Fund	Activites Fund	Total
Cash Balance, beginning of year	\$11,282 79	\$18,045.92	\$29,328.71
Inventories		\$155.54	\$155.54
Fund Balance, beginning of year	\$11,282.79	\$18,201 46	\$29,484.25
 Total income for the year	 \$23,268.26	 \$19,545.09	 \$42,813 35
Total expenses for the year	\$20,864 90	\$19,296.55	\$40,161 45
	\$2,403.36	\$248.54	\$2,651 90
 Fund Balance, end of year	 \$13,573.65	 \$18,450.00	 \$32,023.65
 Cash balance, end of year	 \$13,573 65	 \$16,507.77	 \$30,081.42
Inventories	\$0.00	\$883.09	\$883 09
Fund balance, end of year	\$13,573.65	\$17,390.86	\$30,964 51

KIWANIS INTERNATIONAL-K00380 SAN ANGELO
 SAN ANGELO KIWANIS CLUB, INC
 SCHEDULE ATTACHED TO FOR 990-EZ

EIN 75-6035715

YEAR ENDED SEPTEMBER 30, 2009

Update 1/21/10

Event or Activity	Gross Receipts	Contributions	Gross Revenue	Expenses	Net Income
Football games- Concessions and programs	15,789	0	15,789	8,250	7,539
Geranium Sales	15,870	0	15,870	11,463	4,407
San Angelo Relays-Concessions	1,882	0	1,882	859	1,023
All Other.					0
Little Olympics, Garage Sale					0
Gumball machine commissions					0
Other	12,133	0	12,133	6,699	5,434
Total	\$45,674	\$0	\$45,674	\$27,272	\$18,402

Part I, Line 10-Grants and similar amounts paid

San Angelo Day Nursery	1,000
Safe Kids of San Angelo	1,000
Childrens Emergency Shelter	1,000
CASA	1,000
Healthy Families of San Angelo	1,000
Boys & Girls Club of San Angelo	1,000
Hope House	1,000
Concho Valley Home for Girls	1,000
House of Faith	1,000
Boy Scouts of America	1,000
El Camino Council - Girl Scouts	1,000
YMCA	1,000
DESK Project	1,000
Children's Miracle Network	1,000
San Angelo Area Foundation	1,943
State School Christmas Party	67
San Angelo Central Key Club	1,999
Scholarships	
J. J. Gossett, San Angelo, TX	1,000
Sub-Total (to Part III, line 32)	19,009

Payments to affiliates:

Kiwanis International-dues	3300
Texas-Oklahoma District of Kiwanis International - dues	1775
Texas-Oklahoma District of Kiwanis International-Division 12 assessments	552
Kiwanis International Foundation	
Unrestricted Contributions	1575
Texas-Oklahoma District of Kiwanis International Foundation.	
Unrestricted contributions	340
Total (to Part I, line 10)	26,551

Part I, Line 16-Other Expenses

Meals (Regular meeting and interclub)	11,326
Supplies and Copies	0

KIWANIS INTERNATIONAL-K00380 SAN ANGELO

EIN: 75-6035715

SAN ANGELO KIWANIS CLUB, INC

SCHEDULE ATTACHED TO FOR 990-EZ

YEAR ENDED SEPTEMBER 30, 2009

Bank service charge	24
Insurance	1,304
Membership processing	185
Prayer Breakfast	71
Memorial Donations	150
Convention expense	0
Conferences and meetings	95
Kiwanis service awards	375
Kiwanis T-Shirts	-64
Awards Night	508
Membership picnic	19
Total (to Part I, Line 16)	13,993

**Part V - Other information, General Instruction V, Information Regarding
Personal Benefit Contracts**

The organization was not involved in any activities involving personal benefit contracts

Part V, Line 35-Receipts from business activities not reported on Form 990-T

Income from trade or business activities is not reported on Form 990-T because these events and activities are not regularly carried on

KIWANIS INTERNATIONAL-K00380 SAN ANGELO
SAN ANGELO KIWANIS CLUB, INC.
SCHEDULE ATTACHED TO FOR 990-EZ

EIN 75-6035715

YEAR ENDED SEPTEMBER 30, 2009

	Gross Revenue	Expenses	Net Income	
Little Olympics	3,008	1,984	1,024	1,024
Garage Sale	2,858	217	2,641	
Golf Tournaments	5,128	4,390	1,238	
Gumball Receipts	1,011	0	1,011	
Music Festival	128 25	109	19	
 Total Other	 \$12,133	 \$6,699	 \$5,934	