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Form **990-EZ**

Department of the Treasury Internal Revenue Service

DAA

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 \$500,000 and total assets less than \$1,250,000 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 2009

Open to Public Inspection

A	For the	2009 calend	lar year,	or tax year beginning	, and endin	g						
В	Check if	applicable	Please	C Name of organization					D	Empl	oyer identification number	
	Address	ress change use IRS label or l										
	Name cl	hange	print or	Kollegewidgwok	Yacht Club				01-0217552			
	Initial ref	turn	type.	Number and street (or P O box, if n	nail is not delivered to street	address)		Room/suite	E		phone number	
	Termina	ition	See Specific	PO Box 368						207	7-374-5581	
	Amende	ed return	Instruc-	City or town, state or country, and Z				1	F	Grou	p Exemption	
	Applicat	ion pending	tions.	Blue Hill	ME	04614				Numb		
	Sec	tion 501(c)(3) organi:	zations and 4947(a)(1) nonexen	npt charitable trusts m	ust attach		G Accounting	g meth	nod	Cash X Accrual	
				mpleted Schedule A (Form 990				Other (specify)	<u> </u>			
ı	Websit	te: 🕨 <u>WV</u>	w.ko	llegewidgwokyc.c				H Check ▶	X	If the	organization is not edule B (Form 990,	
<u>J</u>		empt status (d					527	990-EZ, o	990-1	PF)	Soule B (1 offil 555,	
K	Check	▶		ganization is not a section 509(a)				eipts are norma	ally no	ot moi	re than \$25,000 A	
_				turn is not required, but if the orga		<u> </u>		file a complete i	return		046.066	
	-111-11-1			to determine gross receipts, if \$500,00						<u>▶ \$</u>	246,066	
F	art I			penses, and Changes in	Net Assets or Ful	nd Balan	ces (S	ee the instr	uctic		or Part I.)	
	1			nts, and similar amounts received	_				-	1	21 602	
	2	•		enue including government fees a	and contracts	0 0			⊢	2	21,693	
	3	•		nd assessments		see s	tate	ement 1	-	3	165,895	
	4	Investment	income			1 -	ı		-	4	10,931	
	5a			sale of assets other than inventory	/	5a	ļ					
	b			asis and sales expenses		5b	l			- 1		
	С			of assets other than inventory (Subtra				. –	. ⊦	5c		
9	6			rities (complete applicable parts of Sch			check he	re 🕨 📘				
Revenue	а	Gross rever	nue (not i	ncluding \$	of contributions	1	ı					
&	1	reported on	line 1)			6a			_	1		
	b	Less direct	expense	s other than fundraising expenses	S	6b	l		_	1		
	С	Net income	or (loss)	from special events and activities	(Subtract line 6b from li	ne 6a)			<u></u> -	6c		
	7a	Gross sales	of inven	tory, less returns and allowances		7a		47,5		- 1		
ļ	b	Less cost of	of goods	sold		7b	l	37,8	13	- 1		
>	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7b								L	7c	9,734	
<u> </u>	8	Other reven	ue (desc	rbe > RECEIVED) -	8		
- >—	9	Total reven	ue. Add	mes 1, 2, 3, 4, Separ Vol. and 8						9	208,253	
>	10	Grants and	sımılar a		ပ္စု			Stmt 2		10	25,000	
UIU 6 Expenses	11	Benefits par	d to or fo	minimembers 7 2010	81				L	11		
⊒ \$	12	Salaries, oth	her com	ensetion and employee benefits	Ď.				L	12	47,249	
₽S P	13	Professiona	ıl fees a	d other Gym Is ig morphade in	ontractors				L	13	21,175	
<u>ē</u>	14	Occupancy,	rent, util	ities, and maintenance	1				L	14	54,313	
ũ	15	Printing, pul	blications	s, postage, and shipping	J				L	15		
	16	Other exper	nses (des	scribe > See Statem	ent 3) L	16	67,738	
	17	Total expe	nses. Ad	d lines 10 through 16					>	17	215,475	
	18	Excess or (deficit) fo	r the year (Subtract line 17 from li	ine 9)					18	-7,222	
ets	19	Net assets	or fund b	alances at beginning of year (from	n line 27, column (A)) (m	ust agree w	ıth			- 1		
Ass		end-of-year	figure re	ported on pnor year's return)					L	19	826,172	
Net Assets	20	Other chang	ges in ne	t assets or fund balances (attach	explanation)	See S	state	ement 4	L	20	19,592	
	21	Net assets	or fund b	alances at end of year Combine	lines 18 through 20				▶ <u> </u>	21	838,542	
F	art II	Balan	ce She	ets. If Total assets on line 25, c	olumn (B) are \$1,250,00	0 or more, t	file Form	990 instead of	Form	990-	EZ	
				(See the instructions for Part II.	.)		(A)	Beginning of year	r		(B) End of year	
22	Cash,	savings, and	investme	ents				180,1	80	22	221,868	
		and buildings						150,0	$\overline{}$	23	150,000	
24	Other	assets (descr	ibe 🕨	See Statement	<u>5</u>)		502,4	54	24	466,674	
25	Total a	assets						832,6	34	25	838,542	
26	Total I	liabilities (de	scribe 🕨	See Statement	6)		6,4				
				s (line 27 of column (B) must agr	ree with line 21)			826,1	72	27	838,542	
				Reduction Act Notice, see the				<u></u>			Form 990-EZ (2009	

Form 990-EZ (2009) Kolle	gewidgwok Yacht Club	01	<u>-0217552</u>			Page 2
Part III Statement of I	Program Service Accomplishments	s (See the instruction	ons for Part III	.)	E	kpenses
What is the organization's primary e	exempt purpose?				(Required	for section
Promote Sailing and Recr	eation		<u> </u>		501(c)(3)	and 501(c)(4)
Describe what was achieved in carr	ying out the organization's exempt purposes. Ir	n a clear and concise			organızatı	ons and section
manner, describe the services provi	ided, the number of persons benefited, or other	r relevant information for			4947(a)(1) trusts, optional
each program title		<u> </u>			for others)
28 See Statement 7						
			i	Щ.		
(Grants \$) If this amount includes foreign grants,	check here	<u> </u>	LL	28a	_
29						
				ہمر		
(Grants \$) If this amount includes foreign grants,	check here	<u> </u>	Щ	29a	
30						
				, ,,,,		
(Grants \$) If this amount includes foreign grants,	check here	<u> </u>	L_L	30a	
31 Other program services (attach	•			_		
(Grants \$) If this amount includes foreign grants,	, check here	<u> </u>	ĻĻ	31a	
32 Total program service expens				<u> </u>	32	-
Part IV List of Officers, D	Pirectors, Trustees, and Key Employees. List		mpensated (See the compensation (C)	he in:	Contributions to	Part IV) (e) Expense
(a	a) Name and address	(b) Title and average hours per week	(if not paid,	emplo	yee benefit plans &	B account and
	·	devoted to position	enter -0)	defer	red compensation	other allowances
Richard Gurin	Blue Hill	Commodore	_			.]
PO Box 1651	ME 04614	2.00	0			
Peter Linder	Surry	Treasurer	_			
PO Box 194	ME 04684	2.00	0			<u> </u>
Jım Darby	E. Blue Hill	Secretary	_			.] .
PO Box 5	ME 04629	1.00	0			0
Terrence Britton	Blue Hill	Director				
PO Box 483	ME 04614	0.50	0	⊢		0 (
Laura Lock Lamb	Surry	Director				.]
1595 Newury Neck Road	ME 04684	0.50	0	₩		0 - (
Thomas Richardson	Blue Hill	V. Commodore	_			
PO Box 1266	ME 04614	1.00	0	 		0
Ann Luskey	Blue Hill	R. Commodore				
119 Falls Bridge Road	ME 04614	1.00	0	╁		0 (
Patrick Wilmerding	Blue Hill	Director	_			
PO Box 42	ME 04614	0.50	0	-		0(
J. Russel Duym	Blue Hill	Director		1		
PO Box 368	ME 04614	0.50	0	-		0
William Taylor	Blue Hill	Director		1		
PO Box 368	ME 04614	0.50	.0	 		<u> </u>
Brennan Starkey	Blue Hill	Director		ļ		
РО Вож 368	ME 04614	0.50	0	├		0
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## Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the changes are changes and the organization and income from business activities, such as those reported on lines 2.6a, and 7a (among others), but not reported on Form 990-1, attach a statement explaning why the organization of interest 2.6a, and 7a (among others), but not reported on Form 990-1, attach a statement explaning why the organization of interest 2.6a, and 7a (among others), but not reported on Form 990-1, attach a statement explaning why the organization of interest 2.6a, and 7a (among others), but not reported on Form 990-1, attach a statement explaning why the organization of interest 2.6a, and 7a (among others), but not reported on Form 990-1, attach a statement explaning why the organization of interest 2.6a, and 7a (among others), but not reported on Form 990-1, attach a statement explaning why the organization of interest 2.6a, and 7a (among others), but not reported on Form 990-1. To this year? ### If **Tex**, "Tex** of filed a fax return on Form 990-1 To this year? ### If **Tex**, "Tex** of filed a fax return on Form 990-1 To this year? ### If **Tex**, "Tex** of filed a fax return on Form 990-1 To this year? ### If **Tex**, "Tex** of filed a fax return on Form 990-1 To this year? ### If **Tex**, "Tex** of filed a fax return on Form 990-1 To this year? ### If **Tex**, "Tex** of the Form 126-POL for this year? ### If **Tex**, "Tex** of the Form 126-POL for this year? ### If **Tex**, "Tex** of the Form 126-POL for this year? ### If **Tex**, "Tex** of the Form 126-POL for this year? ### If **Tex**, "Tex** of the Form 126-POL for this year? ### If **Tex**, "Tex** of the Form 126-POL for this year? ### If **Tex**, "Tex** of the Form 126-POL for this year? ### If **Tex**, "Tex** of the Form 126-POL for this year? ### If **Tex**, "Tex** of the Form 126-POL for this year? ### If **Tex**, "Tex** of the Form 126-POL for year and interest the form 126-POL for year and year and year o					Yes	No
34	33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed				
the changes If the organization had income from bisumess activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-7, attach a statement explaining why the organization did not report the income on Form 990-7. If the organization have unrelated business gross income of \$1,000 or more or was if subject to section 6033(e) notice, reporting, and rorry tax requirements? If "Yes," has if filed a tax return on Form 990-7 for this year? If "Yes," has if filed a tax return on Form 990-7 for this year? If "Yes," has if filed a tax return on Form 990-7 for this year? If "Yes," complete applicable parts of Schedule N The Enter mount of pinical expenditions, effect or inferts, a described in the nets. If "Yes," complete Schedule I, Part II and other the botal amount worked Section 501(c)(7) organizations and still outstanding at the end of the pened covered by this return? If "Yes," complete Schedule I, Part II and other the botal amount worked Section 501(c)(7) organizations Enter In instabon fees and capital contributions included on line 9 If "Yes," complete Schedule I, Part II and other the botal amount worked Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year or the scholar scholar of the pened covered by this return? If yes, complete Schedule I, Part II and other the botal amount worked Section 501(c)(3) and 501(c)(4) organizations. Dut the organization during the year under section 4918 by scholar sch		description of each activity		33		X
35 If the organization had income from business admites, such as those reported on line 2 (8,8, and 7 is (among others), but not reported on Form 990-7. The organization during the section of Form 990-7. The organization during the section of S03(6) notice, reporting, and proxy tax requirements? 1 Price, *Name I filed a tax return on Form 990-17 for the year? 3 Did the organization undergo a lequidation, dissolution, termination, or significent disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 3 Tile Earls amount of political expenditures, direct or indirect, as described in the nest; 3 Did the organization to Form 1149-0-10, for the year? 3 Did the organization to form 1149-0-10, for the year? 3 Did the organization to Form 1149-0-10, for the year? 3 Did the year or at the water the bid	34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of				
on Form 990-T, attach a statement explaning with the organization durit report the incore on Form 990-T for this year? If "Yes," has if filled a fax return on Form 990-T for this year? If "Yes," has if filled a fax return on Form 990-T for this year? If "Yes," complete applicable parts of Schedule N 386			ļ <u>-</u>	34		X
a Dot the organization have unrelated business gross income of \$1,000 or more or was it subject to section \$353 k \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	35		rted			
803(e) notice, reporting, and proxy tax requirements? 15 If "Yes," has it filed a tax return on Form 990-T for the year? 16 Unity of the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 17 a Enter amount of poincial expenditure, direct or infecting, a described in the instr. 18 Did the organization brief from 1120-PCU for this year? 18 Did the organization brief from 1120-PCU for this year? 28 Did the organization brief from 1120-PCU for this year? 29 Did the organization brief from on, or make any yofficer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 18 If "Yes," complete Schedule I, Part II and enter the total amount involved 29 Section 501(c)(?) organizations Enter 20 In Interest in the first of the period covered by this return? 20 If "Yes," complete Schedule I, Part II and enter the total amount involved 38				1		
b If Yes, * has it flied a tax return on Form \$90-T for the year? Did the organization undergo a laudiation, dissolution, termination, or significant disposition of net assets during the year? If Yes,* complete spolicable parts of Schedule N 36	а				•	
36 D the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes," complete applicable parts of Schedule N	_		<u> </u>			
dung the year? If "Yes," complete applicable parts of Schedule N 27b Enter amount of political expenditures, direct or indirect, as described in the instr. b Did the organization file Form *1128-POL for this year? 38a Did the organization borrow from, or make any loans to, any officer, director, fusitee, or key employee or were any such hoars made in a prior year and still outstanding at the end of the pend covered by this return? b If "Yes," complete Schedule L, Part II and either the total amount involved Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶		·	F.	35b	<u> </u>	
37a Enter amount of pointical expenditures, direct or indirect, as described in the instr. Did the organization file Form 1120-PDL for this year? 38a Did the organization birow 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 outstanding at the end of the penod covered by this return? If "Yes," complete Schedule, I part I liad entire the total amount involved Section 501(c)(7) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ≥	36					
b Did the organization file Form 112b-POL for this year? 27b	27-		-	36		
Did the organization borrow from, or make any Joans to, any officer, director, trustee, or key employee or were any such bans made in a prior year and still outstanding at the end of the penod covered by this return? 1 Yes, complete Schedule Territ land enter the total amount moived 38b 38a X 38a X 38b 38a X		·		276		v
any such loans made in a prior year and still outstanding at the end of the penod covered by this return? If "Yes," complete Schedule L, Part II and enter the total amount movived Section 501(c)(7) organizations Enter initiation fees and capital contributions included on line 9 Section 501(c)(3) organizations Enter amount of lax imposed on the organization during the year under section 4911 ▶			<u> </u>	3/0		
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursation 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	Joa			382	•	x
Section 501(c)(7) organizations Enter a initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶	ь		-	30a		
a Intiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 39b 39b						
b Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶						
Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4915 section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 99 or 990-EZ in lieu of Form 990 organizations. All any analysis of the calendar year, did the organizations and Financial account in a foreign country see the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 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 see the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 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 see the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 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 see the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 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 seems of the foreign country s	_	· · · · · · · · · · · · · · · · · · ·				
section 4911 section 4912 section 4915 section 4955 section 4955 section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4956 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's pnor Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d. Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization at All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 886-T 41. List the states with which a copy of this return is filed Ellsworth Rd. Located at Blue Hill, ME ZIP+4 O4614 b. At any time during the calendar year, did the organization have an interest in or a signature or other authonity over a financial account in a foreign country (such as a bank account, securities account, or other financial account in a 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 ? If "Yes," enter the name of the foreign country Section 4947(a)(1) nonexempt charlatible 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 Yes No						
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's pnor Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations 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 The organization's books are in care of The McClure Group Telephone no. 207-374-5433 Ellaworth Rd. Located at Blue Hill, ME ZIP+4 04614 b At any time during the calendar year, did the organization have an interest in or a signature or other authonity over a financial account in a foreign country (such as a bank account, securities account, or other financial account in a 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? If "Yes," enter the name of the foreign country Section 4947(a)(1) nonexempt chantable 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 Yes No						
transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ27 if "Yes," complete Schedule L, Part I comparization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization at any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed None **The organization's books are in care of The McClure Group **Ellsworth Rd.** Located at Blue Hill, ME Zip+4 O4614 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. 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 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? 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 out	b					
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		yees (other than officers,			49b	1			
			directors, trustees	and key					
		n the organization if there	is none, enter "No	ne "					
	(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) Expe account other allow	and			
51 Complete \$100,000	nber of other employees paid over \$100,000 e this table for the organization's five highest compensated indep of compensation from the organization. If there is none, enter "I	None "	ach received more		ompensation	1			
d Total num	mber of other independent contractors each receiving over \$100	,000							
Sign Here	Under penalties of penjury, I declare that I have examined this return, included and belief, it is true, correct, and complete Declaration of preparer (other Signature of officer Penjury). Type or print name and title			eparer has any knowled		ס			
	Preparer's	Date	Check if	Preparer's Ident	ifying Number	(See instr			
Paid	signature	06/2	4/10 self- employed	P0044	8181				
Preparer's		100/2	-/ - of cuiholen		0-153	0518			
		P 0 Box 607		Phone	<u> </u>				
USA UNIV !	if self-employed), 344 Ellsworth Rd,	L.U. DUA UJ/		i Phone					
USE CINIY				⊣	-374-	9995			
Use Only	address, and ZIP + 4 Blue Hill, ME 046 scuss this return with the preparer shown above? See instruction	514		no ▶ 207	-374- X Yes	9985			

Federal Statements

Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

Description			Amount			
Membership Initiation		\$	1	154,270		
	rees			11,625		
Total		\$		165,895		

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ar Amounts Pa		Book Value	
Grants and Simila		Noncash Contribution	
Z, Part I, Line 10 - Gr Organizations	Class of Activity	Cash Contribution	truction Subsidy 25,000
Statement 2 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid to Organizations		Description of Property	Ins
<u> </u>	Name and Address	Date of Gift	Kollegewidgwok Sailing & Education

25,000

Blue Hill, ME 04614

Total

PO Box 368

Federal Statements

Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Sale of Gas/Merchandise	\$
Supplies	514
Utilities	616
Insurance	823
Workers Comp	31
License/Permits	43
Expenses	
Insurance	10,450
Supplies/Printing/Postage	10,347
Staff Expenditures	2,132
Racing Program Expenses	3,537
Workers Comp	390
Dinnner Costs	12,410
Repairs and Maintenance	25,642
Miscellaneous	803
Total	\$ 67,738

Statement 4 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description	 Amount
Vanguard Value Change	\$ 19,592
Total	\$ 19,592

Statement 5 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	 Beginning of Year	 End of Year
Accounts Receivable	\$ 9,408	\$ 7,341
Inventories for Sale or Use Prepaid Expenses and Deferred Charges	27,594 5,845	24,965 4,604
Less Accumulated Depreciation	641,868 182,261	641,868 212,104
	 502,454	466,674

Statement 6 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Beginning of Year			End of Year
Accounts Payable and Accrued Expenses Deferred Revenue	\$	4,913 1,549 6,462	\$ 	

Federal Statements

Statement 7 - Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

Description

The Club ran a number of regattas open to members and non-members, and supported the inter club racing program of Northeast Sailing Association. The Club also made its fleet of racing dinghies and Club facilities available to George Stevens Acadamy for use by the schools sailing team.

Form 4562

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

OMB No 1545-0172 2009

Name(s) shown on return

Identifying number

Kollegewidgwok Yacht Club 01-0217552 Business or activity to which this form relates Indirect Depreciation Part 1 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 250,000 1 Maximum amount. See the instructions for a higher limit for certain businesses. 1 2 2 Total cost of section 179 property placed in service (see instructions) 800,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 5 Dollar limitation for tax year. Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 5 (b) Cost (business use only) (c) Elected cost (a) Description of property 6 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction Enter the smaller of line 5 or line 8 10 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 11 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 12 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 29,843 Other depreciation (including ACRS) 16 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Part III Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2009 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recover placed in (e) Convention (f) Method (g) Depreciation deduction (a) Classification of property (business/investment use period service only-see instructions) 19a 3-year property þ 5-year property C 7-year property d 10-year property 15-year property 20-year property 25 yrs S/L 25-year property S/L Residential rental 27 5 yrs MM property ММ S/L 27 5 yrs MM 39 yrs S/L Nonresidential real property MM S/L Section C-Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life 12 <u>yrs</u> S/L 12-year b MM S/L 40-year 40 yrs Part IV Summary (See instructions.) 21 21 Listed property Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 29,843 and on the appropriate lines of your return. Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs