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Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form**
Return of Organization Exempt From Income TaxUnder 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 calendar year, or tax year beginning January 1, 2009, and ending December 31, 20 09**

- B** Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

Please
use IRS
label or
print or
type
See
Specific
Instruc-
tions**C Name of organization****Downtown Eau Claire Inc.**

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

203 S Farwell Street

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

Eau Claire, WI 54701**D Employer identification number****03-0376253****E Telephone number****715-839-6047****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.downtown-eauclaire.com****J Tax-exempt status** (check only one) — ☒ 501(c) (6) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527**H Check** ► ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)**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 Form 990-EZ or Form 990 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 \$500,000 or more, file Form 990 instead of Form 990-EZ.** ► \$ **68,969****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

1	Contributions, gifts, grants, and similar amounts received	1	22,295
2	Program service revenue including government fees and contracts	2	23,204
3	Membership dues and assessments	3	12,952
4	Investment income	4	65
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)	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 \$ 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 ► Advertising, \$10,453)	8	10,453
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	68,969
10	Grants and similar amounts paid (attach schedule)	10	5,000
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	14,379
14	Occupancy, rent, utilities, and maintenance	14	3,290
15	Printing, publications, postage, and shipping	15	19,381
16	Other expenses (describe ► Bank Charges \$36, Training \$141, Supplies \$6,922)	16	7,099
17	Total expenses. Add lines 10 through 16	17	49,149
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	19,820
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	49,022
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	68,842

Part II Balance Sheets. If total assets on line 25, column (B) are \$1,250,000 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	49,022	68,842
23 Land and buildings	0	0
24 Other assets (describe ►)	0	0
25 Total assets	49,022	68,842
26 Total liabilities (describe ►)	0	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	49,022	68,842

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

	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	✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	✓
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 why the organization did not report the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	✓
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	✓
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	✓
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 outstanding at the end of the period covered by this return?	38a	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b 0	
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 ▶ <u>N/A</u> ; section 4912 ▶ <u>N/A</u> ; section 4955 ▶ <u>N/A</u>		
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 prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	
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 ▶ <u>N/A</u>		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ <u>N/A</u>		
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. ▶ NONE		
42a The organization's books are in care of ▶ <u>Michael Schatz, Executive Director</u> Telephone no. ▶ <u>715-839-6047</u> Located at ▶ <u>203 S Farwell St, Eau Claire, WI</u> ZIP + 4 ▶ <u>54701-3718</u>		
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	✓
If "Yes," enter the name of the foreign country: ▶ <u>N/A</u>		
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	✓
If "Yes," enter the name of the foreign country: ▶ <u>N/A</u>		
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 <u>N/A</u>		
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 and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b 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 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 a section 527 organization? | 49b | <input checked="" type="checkbox"/> |
- 50** Complete this table for the organization's 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."

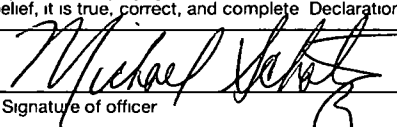
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
N/A				

f Total number of other employees paid over \$100,000 ▶

- 51** Complete this table for the organization's 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
N/A		

d 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		4-22-2010 Date	
Paid Preparer's Use Only	Michael Schatz, Executive Director Type or print name and title			
	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	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

Part I Line #10

Grantee Harmony Corner Cafe
210 South Barstow Street
Eau Claire, WI 54701

Each year Downtown Eau Claire Inc. offers a Jump-Start Downtown Business Grant that awards up to \$5,000 in start-up capital and training. This grant encourages economic development in the downtown area by recognizing and individual with a new and innovative business idea. Harmony Corner Cafe (no relationship with DECI) was the recipient of the 2009 Jump Start grant in the amount of \$5,000.

Part V Line #35

Downtown Eau Claire Incorporated (DECI) reported festival income on line #2. This amount is not being reported on form 990-T because the festivals are directly related to DECI's mission to promote and redevelop the downtown.

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

(A) Name and Address			(B) Title and average hours per MONTH devoted to position		(C) Compensation	Contributions to employee benefit plan & deferred compensation	(E) Expense account and other allowances	
Arntson	Marlene	607 W Grand Ave	Eau Claire, WI	54703	Director	1	0	0
Aspenson	Lisa	301 Water St #3	Eau Claire, WI	54703	Director	1	0	0
Carpenter	Stan	409 Summit Avenue	Eau Claire, WI	54703	Director	1	0	0
Dickey	John	PO Box 1510	Eau Claire, WI	54702	Director	1	0	0
Dooley	Jennifer	3628 Alf Avenue	Eau Claire, WI	54701	Director/Vice Pres	1	0	0
Fisher-Blakeley	Marty	115 W Grand Ave	Eau Claire, WI	54703	Director	1	0	0
Fulgione	Ken	330 Lincoln Ave	Eau Claire, WI	54703	Director	1	0	0
Gross	Paul	404 S Barstow St	Eau Claire, WI	54701	Director	1	0	0
Jahnke	Mel	211 Graham Ave	Eau Claire, WI	54701	Director	1	0	0
Kimblin	Paula	PO Box 8	Eau Claire, WI	54702	Director/Pres	1	0	0
Kincaid	Kerry	4441 S Lowes Creek Rd	Eau Claire, WI	54701	Director	1	0	0
Krause	Robert	6 S Barstow St	Eau Claire, WI	54701	Director/Secretary	1	0	0
Meyer	Nick	17 S Barstow St	Eau Claire, WI	54701	Director	1	0	0
Middleton	Beryle	3002 White Oak Lane	Eau Claire, WI	54701	Director	1	0	0
Peters	Dale	City Hall 203 S Farwell St	Eau Claire, WI	54701	Director	1	0	0
Rauckman	Shawn	402 Graham Ave	Eau Claire, WI	54701	Director/Treasurer	1	0	0
Richgruber	Ben	316 Eau Claire St	Eau Claire, WI	54701	Director	1	0	0
Rindo	Mike	UWEC/Schofield/204B	Eau Claire, WI	54703	Director	1	0	0
Soltis-Schroeder	Linda	216 William Street	Eau Claire, WI	54703	Director	1	0	0
Van Es	Ken	700 Graham Ave	Eau Claire, WI	54701	Director/Pres. Appointee	1	0	0
Wildenberg	Janine	131 S Barstow St	Eau Claire, WI	54701	Director	1	0	0