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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 **01/01**, 2009, and ending **12/31**, 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**WINDY CITY SOARING INC**

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

38W742 Foxwood Ln

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

Saint Charles, IL 60175**D** Employer identification number**30-0057920****E** Telephone number**630-797-5021****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.windycltysoaring.org****J** Tax-exempt status (check only one) — ☒ 501(c) (**7**) ◀ (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 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 ► \$ **114,793****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	2,458
	2	Program service revenue including government fees and contracts	2	0
	3	Membership dues and assessments	3	82,673
	4	Investment income	4	473
	5a	Gross amount from sale of assets other than inventory	5a	20,454
	b	Less: cost or other basis and sales expenses	5b	9,729
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	10,725
	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 ► See Statement 1)	8	8,735	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	105,064	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	2,111
	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
	14	Occupancy, rent, utilities, and maintenance	14	37,229
	15	Printing, publications, postage, and shipping	15	261
	16	Other expenses (describe ► See Statement 2)	16	65,820
17	Total expenses. Add lines 10 through 16	17	105,421	
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-357
	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	7,966
	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	7,609

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	69,812	72,542
23 Land and buildings	0	0
24 Other assets (describe ► See Statement 3)	173,481	134,630
25 Total assets	243,293	207,172
26 Total liabilities (describe ► See Statement 4)	235,327	199,563
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	7,966	7,609

Part III	Statement of Program Service Accomplishments (See the instructions for Part III.)
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What is the organization's primary exempt purpose? The mission of Windy City Soaring Association is to advance
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, and other relevant information for each program title.

Expenses

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

- | | | | |
|----|---|-----|----------|
| 28 | Youth Development Programs, General/Other: Development of scholarship youth program that encourages young adult to participate in and develop skills in controlling non-powered aircraft. (2 Members) | | |
| | (Grants \$ _____ \$0) If this amount includes foreign grants, check here ☐ | 28a | \$3,337 |
| 29 | Recreation & Sports Programs, General/Other: Initial and advanced flight through a program of oral, written and practical flight instruction and examinations. Developed flight training program and trained several members. (57 Members) | | |
| | (Grants \$ _____ \$0) If this amount includes foreign grants, check here ☐ | 29a | \$95,109 |
| 30 | Unknown/Unclassified: Technical advancement of soaring through testing of new method and equipment in competitions. Planning for this took place in 2008 and began in 2009. (2 Members) | | |
| | (Grants \$ _____ \$0) If this amount includes foreign grants, check here ☐ | 30a | \$3,337 |
| 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 | 101,783 |

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 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		
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 39a 0		
b Gross receipts, included on line 9, for public use of club facilities 39b 0		
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 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 ▶		
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.	40e	✓
41 List the states with which a copy of this return is filed. ▶ IL		
42a The organization's books are in care of ▶ Mike Kraus Telephone no. ▶ 630-797-5021 Located at ▶ 38W742 Foxwood Lane, Saint Charles, IL 60175 ZIP + 4 ▶ 60175		
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: ▶ 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: ▶		
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		
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.

- 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 **46 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**
- 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."

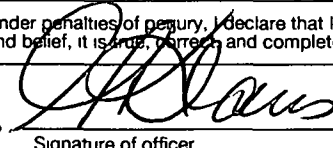
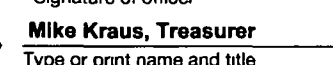
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

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
None		

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		Date <u>6/6/2010</u>	
Paid Preparer's Use Only	 Mike Kraus, Treasurer Type or print name and title			
	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

Statement 1 : Other Revenue Schedule

Statement 2 : Other Expenses Schedule

Statement 3 : Other Assets

Statement 4 : Liabilities Schedule

Statement 5 : Officers, Directors, Trustees and Key Employees Compensation

Statement 1

Form. 990-EZ

Page 1

Line Number Part I Line 8

WINDY CITY SOARING INC**30-0057920****Other Revenue Schedule**

Description	Amount
Hanger Rental	\$6,260
Field Use Fees	\$2,475
Total:	\$8,735

Other Expenses Schedule

Description	Amount
Depreciation	\$26,544
Insurance	\$11,610
Aircraft Fuel	\$7,227
SSA/CLGC Dues Paid	\$4,400
PIC Field Use Fees	\$3,025
Marketing and Promotion	\$2,587
Offices Expenses	\$1,019
Auto & Travel	\$879
Club Meetings	\$378
License Renewals	\$106
Interest	\$8,045
Total:	\$65,820

Statement 3

Form. 990-EZ

Page 1

Line Number Part II Line 24

WINDY CITY SOARING INC**30-0057920****Other Assets**

Description	BOY	EOY
	Amount	Amount
Aircraft & Ground Equipment	\$165,976	\$130,256
Undeposited Funds	\$3,316	\$460
Prepaid Expenses	\$2,430	\$2,430
Accounts Receivable	\$1,759	\$1,484
Total:	\$173,481	\$134,630

Statement 4

Form: 990-EZ

Page: 1

Line Number: Part II Line 26

WINDY CITY SOARING INC**30-0057920****Liabilities Schedule**

Description	BOY	EOY
	Amount	Amount
Bank Loans	\$78,663	\$64,510
Member Loans	\$65,933	\$47,420
Maintenance Reserve	\$62,376	\$60,646
Member Deposits	\$12,886	\$9,939
Deferred Revenue	\$7,896	\$8,958
Accounts Payable & Accrued Expenses	\$7,573	\$8,090
Total:	\$235,327	\$199,563

Statement 5

Form. 990-EZ

Page 2

Line Number Part IV

WINDY CITY SOARING INC**30-0057920****Officers, Directors, Trustees and Key Employees Compensation**

Name and address	Title and Hours	Compensation	Benefits	Expense
Mark Akerley 225 N Spring Ave La Grange, IL 60525	President 15	\$0	\$0	\$0
Mike Kraus 38W742 Foxwood Ln Saint Charles, IL 60175	Treasurer 25	\$0	\$0	\$0
Chuck Spreitzer 7316 Larchwood Ln Woodridge, IL 60517	Secretary 20	\$0	\$0	\$0
John Ehnsmann 1243 Redfield Road Naperville, IL 60563	Director 10	\$0	\$0	\$0
John Kamis 826 W Kathleen Dr Palatine, IL 60067	Director 10	\$0	\$0	\$0
John O'Brien 6538 N Nordica Chicago, IL 60631	Director 10	\$0	\$0	\$0
Total:		\$0	\$0	\$0