

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# Form **990-EZ**

## Short Form Return of Organization Exempt From Income Tax

2009

OMB No 1545-1150

1 M-9901 Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Sponsoning 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

Open to Public inspection

Α	For th	he 2009 calendar year, or tax year beginning	, 2009, and e	nding		
В	Check	if applicable C	<del> </del>		Employer i	dentification number
		ss change   Please use IRS   ROAD GEMS CAR CLUB, INC		1	36-40	21353
	Name o	change label or C/O DAVID FISCHER 1139 E GROVE		ĮĘ.	Telephone	
	Initial re	return bype. WEST POINT, NE 68788			,	
	Termin	nation Specific				
=		ded return tons.		F	Group E	kemption
Ш		ation pending		<u></u>	Number	
		<ul> <li>Section 501(c)(3) organizations and 4947(a)(1) nonexempt chantable must attach a completed Schedule A (Form 990 or 990-EZ).</li> </ul>	trusts	G Accounting m Other (specify		Cash Accrual
				H Check ► X		ganization is <b>not</b>
1	Webs	site: N/A			tach Sche	dule B (Form 990,
j	Tax-ex	xempt status (check only one) — X 501(c) (7) ◄ (insert no.) 4947(a)(	1) or 527	990-EZ, or 99	0-PF)	
	Check			ross receipts are r	normally no	ot more than
	\$25,0	000. A Form 990-EZ or Form 990 return is not required, but if the organi	zation choose	s to file a return, b	e sure to fi	le a complete return.
L	Add I	lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or	more, file Fo	rm 990		
	ınstea	ad of Form 990-EZ			<b>►</b> \$	34,716.
Pa		Revenue, Expenses, and Changes in Net Assets or	Fund Balar	nces (See the i	<u>nstructic</u>	ons for Part I.)
		Contributions, gifts, grants, and similar amounts received			1	
		Program service revenue including government fees and contracts			2	
	3	Membership dues and assessments			3	416.
	4	Investment income	1 - 1		4	
		Gross amount from sale of assets other than inventory	5a		—144	
_		Less: cost or other basis and sales expenses	5b			
E		Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a)			5c	
KE>E20E		Special events and activities (complete applicable parts of Schedule G) If any amount is f		ck nere	J	
N		Gross revenue (not including \$ of contribution:		20. 20		
Ε		reported on line 1)	6a	28,30		
0		Less: direct expenses other than fundraising expenses	6b	25,06		2 245
2010		Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	1 - 1	E 00	6c	3,245.
		Gross sales of inventory, less returns and allowances	7a	5,99		
		Less: cost of goods sold	7b	6,29		-300.
-		Gross profit or (loss) from sales of inventory (Subtract line 7b from line	7a)		7c	-300.
₹		Other revenue (describe			8	2 261
SEMBER JUN 1		Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		<del></del> -		3,361.
ا ن		Grants and simila and ints van (attach schedule)			10	
) E		Benefits paid to or for members			11	
₹ <b>2</b>	12	Salaries other compensation, and emproyee benefits			12	400.
; E , N		Professional fees and other payments to independent contractors	•		13	400.
~ -		Occuparcy, rent, utilities, and maintenance			14	218.
) s	15 16	Printing, publications resistage, jand-shipping Other expenses (describe - SRB STATEMENT 1		,	16	2,019.
		Total expenses. Add lines 10 through 16			► 17	2,637.
		Excess or (deficit) for the year (Subtract line 17 from line 9)	<del> </del>	····-	18	724.
А					7333337.3	724.
N S E E T E	19	Net assets or fund balances at beginning of year (from line 27, column figure reported on prior year's return)	(A)) (must ag	ree with end-of-yea	ar 19	5,934.
ŦĘ	20	Other changes in net assets or fund balances (attach explanation)			20	3,334.
Ś		Net assets or fund balances at end of year. Combine lines 18 through 2	PO .		▶ 21	6,658.
D.	Ā III	Balance Sheets. If Total assets on line 25, column (B) are \$1,2		re file Form 990 in		
1.188	<del>674</del> .8 <del>8</del> 73	(See the instructions for Part II.)	.50, <u>000</u>	(A) Beginning o		(B) End of year
22	Cas	sh, savings, and investments			34. 22	6,658.
23		nd and buildings			23	
24		er assets (describe ► )			24	
25		al assets		5,9		6,658.
26		al liabilities (describe ► )		7,3	0. 26	0.
27		assets or fund balances (line 27 of column (B) must agree with line 21)	•	5.9	34. 27	6,658.
_		Privacy Act and Paperwork Reduction Act Notice, see separate instruc			- 1 1	Form <b>990-EZ</b> (2009)

Form	1 990-EZ (2009) ROAD GEMS CAR	CLUB, INC			36	5-402	21353	Page 2
	Statement of Program S		ment	s (See the instruct	ions.)		Expenses	
Desc	is the organization's primary exempt purpose? Tribe what was achieved in carrying out ribe the services provided, the number	EE STATEMENT 2 the organization's exem of persons benefited, or	pt purpo other r	oses In a clear and cor elevant information for	ncise manner, each	(Reg 501(d orga 4947	uired for section (3) and (4) nizations and (a) (1) trusts, c	on section optional
prog	ram title	<u> </u>				for o	thérs.)	<u> </u>
28			 		 	-		
	(Grants \$ ) It	this amount includes for	eign gr	ants, check here		28 a		
29						1		
			<del>-</del> -					
	(Grants \$ ) It	this amount includes for	eign gr	ants, check here	<u> </u>	29 a		
30								
	(Grants \$ ) II	this amount includes for	elan ar	ants check here		30 a		
31	Other program services (attach sched	<del></del>	eigit gr	ants, check here	· L	30 a		
٠.	. •	this amount includes for	eian ar	ants, check here	▶ [	31 a		
32	Total program service expenses (add		<u></u>		-	32		
	List of Officers, Directo		ey En	1ployees. List each o	ne even if not co	mpens	ated (See the	instrs.)
<u> </u>		(b) Title and average	hours	(c) Compensation (If	(d) Contribution	s to	(e) Expense	account
	(a) Name and address	per week devote to position	d	not paid, enter -0)	employee benefit pla deferred compens	ins and	and other all	owances
T.ΔR	RRY L. FEYERHERM	PRESI	DENT	0.	deterred compens	0.		0.
	TONWOOD CHIMES BOX 23		0	· ·		٥.		٠.
	ST POINT, NE 68788		Ū					
	M PETERSEN	VICE PRESI	DENT	0.		0.		0.
	CANFIELD PO BOX 304	VICH INDO	חווםם.			٥.		0.
	MER, NE 68716		U					
	LY PERCHAL	SECRE	TARY	0.		0.		0.
	4 N. MAIN		0	·		٠.		٠.
	T POINT, NE 68788							
	ID P. FISCHER	TREAS	URER	0.	-	0.		0.
	9 E GROVE		0					
WES	T POINT, NE 68788	-						
WES	LEY SCHULZKUMP	SGT AT	ARMS	0.		0.		0.
780	EAST WILLOW	- 1	0					
WES	T POINT, NE 68788	- 1						
		_						
							<del></del>	
						-	<del></del>	
		1	Į.					

Yes   No   33   Que the organization engage in any activity not previously reported to the IRS? If Yes, attach a detailed description of eight activity			6-4021353	Ρ	age 3
33	Pa	Other Information (Note the statement requirements in the instrs for Part V.)			
sebot activity  4 Were any changes made to the organizing or governing documents? If Yes,* attach a conformed copy of the changes  55 If the organization had recome from business subvites, such as those reported on line 2 (s. p. and 7a (emong others), but not reported on Form 999-T, attach a stituted subsanies byte to expect the content of press 11.  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?  b if "Yes,* has it field a tax return on Form 990-T for this year?  5 Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, and the present of the present of Schedula (h. p. 1745).  b if "Yes,* complete spinicable parts of Schedula (h. p. 1745).  5 Did the organization file Form 1120-POL for this year?  5 Did the organization file Form 1120-POL for this year?  5 Sa Did the organization between form, or make any loans to, any officer, director, furstee, or key employee or were any such loans made in a prory year and still outstanding at the end of the period covered by this return?  5 Section 501(c)(7) organizations. Enter amount of tax imposed on the organization during the year or is it sware that it engaged in an excess benefit transaction during the year or is it sware that it engaged in an excess benefit transaction during the year or is it sware that it engaged in an excess benefit transaction during the year or is it sware that it engaged in an excess benefit transaction during the year or is it sware that it engaged in an excess benefit transaction during the year or is it sware that it engaged in an excess benefit transaction during the year or is it sware that it engaged in an excess benefit transaction or during the year or is it sware that it engaged in an excess benefit transaction during the year or is it sware that it engaged in an excess benefit transaction or the properties of the year organization. Enter amount of tax impo				Yes	No
35 If the agreeation but accome from bouness stativing, such as flateness of the accome from 590 T, allock a stateness registering with the expension of the 1900 T, allock a stateness registering with the expension of the 1900 T, allock a stateness registering with the content of the 1900 T or this year?  36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 1905, complete applicable parts of Steducili N 1900 T or this year?  37 a Enter amount of political expenditures, direct or indirect, as described in the instructions    38 Did the organization between from your make any loans to, any officer, director, flustes, or levy employee or were any such flows made in a prior year and still official statement and the flow of the period covered by this return?  38 Did the organization between from your make any loans to, any officer, director, flustes, or levy employee or were any such flows made in a prior year and still official statement and still the period covered by the struin?  38 Did the organization between flustress and capital contributions included on line 9  39 Section 501(c)(7) organizations. Enter:  a initiation fees and capital contributions included on line 9  30 Gross receipts, included on line 9, for public use of club facilities.  39 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax minoced on organization during the year undersection of the gross of the period covered by the city of the period during the year undersection of the gross of this period of the period covered by the city of the period of the period of the period covered by the city of the period of the period of the period covered by the city of the period of the period of the period covered by the city of the period of	33				Х
ablish a statement explaining why the organization did not report the income on Form 990.T.  a Did the organization have unrealized business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tex requirements?  bit 1'Yes, it fails at six the data tax return on Form 990-T for this year?  35 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 1'Yes, complete spindle by the 5' streatule N  37 a Enter amount of political expenditures, direct or indirect, as described in the instructions  38 Did the organization file Form 1120-POL for this year?  38 Did the organization before whom, or make any lorans to, any officer, director, trustee, or key employee or were any such floars made in a prior year and still dustisationing at the end of the period covered by this return?  38 Did the organization before whom, or make any lorans to, any officer, director, trustee, or key employee or were any such floars made in a prior year and still dustisationing at the end of the period covered by this return?  38 Did N/A  38 Did the organization before whom, or make any lorans to, any officer, director, trustee, or key employee or were any such floars made in a prior year and still dustisationing at the end of the period covered by this return?  38 Did N/A  38 Did the organizations. Enter amount of tax imposed on the organization during the year under.  39 Did N/A  40 Section 501(c)(3) organizations. Enter amount of tax imposed on organization sprior forms 990 or 990-EZ? If a prior year, and that the transaction has not been reported on any of the organization's prior forms 990 or 990-EZ? If a prior year, and that the transaction has not been reported on any of the organization's prior forms 990 or 990-EZ? If a prior year, and that the transaction has not been reported on any of the organization is prior organization.  40 Did the organization is for exceptions and filing requirements for Form 104 organization	34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the	changes 34		Χ
seporting, and priory tax requirements? bit Yes, hast filled a tax return on Form 990-T for this year?  56. Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year?  57. Either amount of potitical expenditures, direct or indirect, as described in the instructions  58. X  57. Either amount of potitical expenditures, direct or indirect, as described in the instructions  58. X  58. Did the organization file Form 1129-POL for this year?  58. Did the organization file Form 1129-POL for this year?  58. Did the organization file Form 1129-POL for this year?  58. Did the organization file Form 1129-POL for this year?  58. Did the organization file Form 1129-POL for this year?  58. Did the organization file Form 1129-POL for this year?  58. Did the organization file Form 1129-POL for this year?  58. Did the organization file Form 1129-POL for this year?  58. Did the organization file Form 1129-POL for this year?  58. Did the organization file Form 1129-POL for this year?  59. Did the organization file Form 1129-POL for this year?  59. Did the organization file Form 1129-POL for this year?  59. Did the organization file Form 1129-POL for this year?  59. Did the organization file Form 1129-POL for this year?  59. Did the organization file Form 1129-POL for this year?  59. Did the organization file Form 1129-POL for this year?  59. Did the organization file Form 1129-POL for this year?  59. Did the organization file Form 1129-POL F	35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported on Fattach a statement explaining why the organization did not report the income on Form 990-T.	Form 990-T,		
35 Did the organization undergo a liquidation, desolution, termination, or significant disposition of net assets during the year? If Yes, complete applicable parts of Schedule N. 200 Did the organization of policida dependence, direct or indirect, as described in the instructions    36		reporting, and proxy tax requirements?	35a		X
year? If Yes, 'complete applicable parts of Schedule N 75 a Enter amount of political sependulers, director indirect, as described in the instructions.  b Did the organization file Form 1120-POL for this year?  38a Did the organization file Form 1210-POL for this year?  38a Did the organization file Form 1210-POL for this year?  38b N/A  38b N/A  38b N/A  38b N/A  38b N/A  38b N/A  39 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  b Gross receipts, included on line 9, for public use of club facilities  b Gross receipts, included on line 9, for public use of club facilities  b Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under.  section 4911 > N/A; section 4912 > N/A; section 4955 > N/A  b 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 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 discussified 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 Forms 4912 or is stayled the organization and 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 Forms 4912 or year and the first and the prior of the organization or organization and prior year. A transaction of the organization is prior Forms 990 or 990-EZ? If Yes, complete Forms 9886-1  40c   X  42c   The organization or active the prior organization has a bank account, securities account, or other financial account)?  If Yes, enter the name of the foreign country   Yes, complete Form 1990-EZ in lieu of Form 1041 — Check here  and enter the amount o					
38a 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 outstanding at the end of the period covered by this return?  38b I N/A  38b I N/A  38c X  38b I N/A  39 Section 501(c)(7) organizations. Enter:  a initiation fees and capital contributions included on line 9  b Gross recepts, 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 undersection 4911 ► N/A; section 4912 ► N/A; section 4915 ► N/A  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 insaction has not been reported on any of the organization forms 990 or 990-EZ? II Post Post Post Post Post Post Post Post		year? If 'Yes,' complete applicable parts of Schedule N	36		X
any such loans made in a prior year and still outstanding at the end of the period covered by this return?  B If Yes, complete Schedule L, Part II and enter the total amount involved  38b N/A  38ction 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 b Gross receipts, included on line 9, for public use of club facilities section 4911 * N/A; section 4912 * N/A; section 4958 * variety in the section 4911 * N/A; section 4912 * N/A; section 4958 * N/A  b Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under.  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 disciplinating 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  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization amanagers 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 e All organizations. At any time during the lax year, was the organization a party to a prohibited tax selfetir transaction? If Yes, complete Form 8886.1  Loaded at * WEST POINT, NEBRASKA					X
amount involved 38 Section 501(c)/O graphizations. Enter: a Initiation fees and capital contributions included on line 9 a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under. section 4911 \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^{1}\) \(^	38 a	a 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?			X
a initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities  40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under. section 4911 \times \frac{N/A}{1}; section 4912 \times \frac{N/A}{1}; section 4955 \times \frac{N/A}{1}; section 4915 \times \frac{N/A}{1}; section 4916 \ti	ŀ	b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b	N/A		
b Gross receipts, included on line 9, for public use of club facilities  40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under.  8 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 if 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 organizations prior Forms 990 or 990-E27 if Yes, complete Schedule I, Part I  8 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization from sections 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  9 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  10 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified person in a solid for the organization of the complete form 8885. The section of the complete form 8885-The part of tax in the foreign country of the organization aparty to a prohibited tax shelter transaction? If 'Yes,' complete Form 8865-The located at Pieze for the organization for the prohibited tax of Form 101 for the organization for the organization for the organization of the organization of the organization for the organization of the organization for the organization for the organization of the organization organization maintain and office outside of the U.S.?  10 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.  11 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here and enter the amount of tax-exem		,,,,,,,,,			
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:  \$\$section 4911 \times \frac{N/A}{N/A}\$; section 4912 \times \frac{N/A}{N/A}\$; section 4955 \times \frac{N/A}{N/A}\$\$  \$\$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 switch that the degree of the transaction during the year or is it switch that the degree of the transaction with a disqualified person on a prior year, and that the transaction has not been reported on any of the organization in a disqualified person on a prior year, and that the transaction has not been reported on any of the organization or Forms 990 or 990-E2? If year, organizations or organizations are described by the organizations or disqualitied persons during the year under sections 4912, 4955, and 4958  \$\$\frac{40}{40}\$ = \$\frac{1}{40}\$ = \$1		•			
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 and stocyalified 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 I, 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 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 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 imposed on organization managers or disqualified persons during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 8885-T  All entire transaction? If Yes, complete Form 8885-T  MONE  12			<u>0.</u>		
transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prory 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  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization analogers 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 organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 888-51  List the states with which a copy of this return is filed > NONE   42a The organization's books are in care of > DAVID_FISCHER			<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  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  41. List the states with which a copy of this return is filed ► NONE  42a The organization's books are in care of ► DAVID_FISCHER Located at ► WEST_POINTNEBRASKA  5 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)?  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a 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  42b	ŀ	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified property and that the transaction has not been reported on any of the organization's prior Forms 990 or 990	erson in a I-EZ? If		
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  40 List the states with which a copy of this return is filled NONE  42a The organization's books are in care of NONE  42a The organization's books are in care of NONE  5 DAVID FISCHER  Located at NEST POINT, NEBRASKA  5 DAVID FISCHER  Telephone no None to the form 10 DAVID FISCHER  If 'Yes,' enter 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 a 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  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  44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	(	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	0.		
shelter transaction? If 'Yes,' complete Form 8886-T  1 List the states with which a copy of this return is filed > NONE  1 Located at P WEST FOINT, NEBRASKA  1 DAVID FISCHER 1 Located at P WEST FOINT, NEBRASKA  1 DAVID FISCHER 1 Located at P WEST FOINT, NEBRASKA  2 IP + 4 + 68788  1 List the states with which a copy of this return is filed > NONE  1 DAVID FISCHER 2 IP + 4 + 68788  3 Section 42b	(		0.		
42 a The organization's books are in care of PONTD FISCHER Located at WEST POINT, NEBRASKA  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 filling requirements for Form TD F 90-22.1, Report of a 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  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  44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		shelter transaction? If 'Yes,' complete Form 8886-T	40 e		X
books are in care of PONTD FISCHER  Located at NEST POINT, NEBRASKA  Discrete data Nest Point, Nebraska  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 a Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside of the US?  If 'Yes,' enter the name of the foreign country  As 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  As Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	41	List the states with which a copy of this return is filed NONE			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a 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 a 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  A3 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  A42 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	42 a	books are in care of PDAVID_FISCHER		. <b></b>	 
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a 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  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  Yes No  44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	ŧ	b At any time during the calendar year, did the organization have an interest in or a signature or other authority financial account in a foreign country (such as a bank account, securities account, or other financial account)?	overa ———	Yes	
the calendar year, did the organization maintain an office outside of the U.S.?  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  Yes No  144 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		If 'Yes,' enter the name of the foreign country .			
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  Yes No  144 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ					
and enter the amount of tax-exempt interest received or accrued during the tax year  Yes No  144 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	Č				Δ_
Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ  44 X	43		43		N/A
<del></del>	44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990.F7	44	Yes	
	45				

Only

BAA

WEST POINT,

May the IRS discuss this return with the preparer shown above? See instructions

NE 68788

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 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? 49 a b If 'Yes,' was the related organization a section 527 organization? 49 b 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.' (e) Expense account and other allowances (b) Title and average (d) Contributions to employed benefit plans and deferred compensation (c) Compensation (a) Name and address of each employee paid more than \$100,000 hours per week devoted to position 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 d Total number of other independent contractors each receiving over \$100,000 Under penalties of penury, 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 Sign Here Signature of officer DAVID P FISCHER TREASURER Type or print name and title Dat /6/10 Preparer's Identifying Number (See instructions) Check if Preparer's Paid signature N/A employed Pre-OELKERS & ASSOCIATES, Firm's name (or yours if self-employed), address, and LLC parer's 203 N MAIN STREET, P.O. ► N/A Use EIN

Phone no ►

(402) 372-5427

►X Yes No

Form 990-EZ (2009)

### SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service

Complete if the organization answered'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Name of the organization						Employer identifica	ition number	_
ROAD GEMS CAR CLUB, INC						36-402135	3	
Fundraising Activities. Compl Form 990EZ filers are not requ	ete if the organ uired to comple	ization and te this par	swered 'Ye t	es' to Form 990, Part IV	, line 17	· .		_
1 Indicate whether the organization r	aised funds thr	ough any	of the follo	wing activities. Check a	II that a	pply		_
Mail solicitations				Solicitation of non-	governm	nent grants		
Internet and email solicitations				Solicitation of gover	_	-		
Phone solicitations				Special fundraising		J		
In-person solicitations				openial farial aloning	CVCING			
	r oral agreeme	nt with an	v individua	L/including officers dire	actors t	rustans or kov		
2a Did the organization have written or employees listed in Form 990, Part	t VII) or entity ii	n connecti	on with pro	ofessional fundraising se	ervices?	usices of key	Yes No	,
<b>b</b> If 'Yes,' list the ten highest paid incompensated at least \$5,000 by the	dividuals or enti e organization.	ities (fundr	aisers) pu	rsuant to agreements u	nder wh	ich the fundrais	er is to be	
					(v) Ar	mount paid to	, ,	_
(i) Name of Individual	(ii) Activity		fundraiser	(iv) Gross receipts	(or	retained by)	(vi) Amount paid to	
or entity (fundraiser)		of contr	dy or control l ibutions?	from activity	luliul	aiser listeď in col (i)	(or retained by) organization	
		Yes	No					-
		165	140					
		1						_
- •		ļ					·	_
								_
						_		_
								-
								-
								-
		<u> </u>						-
· · ·	_	ļ						-
		1						
	l .		<u> </u>					-
Takal			•					
Total  3 List all states in which the organiza	tion is register	od or ligan	- 1	at funds or has been no	atificad it	us avament from	registration	_
or licensing.	illoi i is registere	ed of ficers	seu to som	cit lulius of mas been in	Junea II	is exempt irom	registration	
3								
				· <b></b>		<del>-</del>		•
								•
	<del></del>		<del>-</del> -					
						<b></b> -		
						<b></b>		
			<del>-</del> -		<del>-</del>		<b></b>	
	<b></b> -				<b>-</b>			
	<b>-</b>							
				<b></b>	- <b>-</b> -			
					. <b></b> _			

777		G (Form 990 or 990-EZ) 2009 ROAD GE			36-40	
	<b>t III</b>	Fundraising Events. Complete in reported more than \$15,000 on F	f the organization a form 990-EZ, line (	answered 'Yes' to F 5a. List events with	form 990, Part IV, gross receipts gre	line 18, or eater than \$5,000.
_	ι	•	(a) Event #1 ANNUAL CAR SHO	<b>(b)</b> Event #2	(c) Other Events	(d) Total Events (Add col. (a) through col. (c))
R E V			(event type)	(event type)	(total number)	
REVENUE	1	Gross receipts	28,306.			28,306.
-	2	Less: Charitable contributions				
	3	Gross income (line 1 minus line 2)	28,306.			28,306.
	4	Cash prizes				
D	5	Noncash prizes				
DIRECT	6	Rent/facility costs			_	
	7	Food and beverages				
X P	8	Entertainment				•
EXPENSES	9	Other direct expenses	25,061.			25,061.
S	10	Direct expense summary. Add lines 4- th	nrough 9 in column (d)		<b>&gt;</b>	25,061.
	11	Net income summary. Combine lines 3, c			<b>&gt;</b>	3,245.
Pai	<b>C</b>	Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a	ation answered 'Yo	es' to Form 990, Pa	art IV, line 19, or re	
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
Ë	1	Gross revenue				
F	•					
D X I P R E	2	Cash prizes				
D I P E N S E S	3	Non-cash prizes				
3	4	Rent/facility costs				
	5	Other direct expenses				
;	6	Volunteer labor	Yes %	Yes%	Yes% No	<del>_</del>
	7	Direct expense summary. Add lines 2 thro	ough 5 in column (d)		•	
	8	Net gaming income summary. Combine li	nes 1, column (d) and I	ıne 7	<b>-</b>	
9		er the state(s) in which the organization op-				YES NO
		o,' explain:				
		e any of the organization's gaming licenseses,' explain:	s revoked, suspended o	or terminated during the	tax year <sup>?</sup>	10a
11	Does	s the organization operate gaming activities	s with nonmembers?			11
12	Is th adm	e organization a grantor, beneficiary or tru inister charitable gaming?	stee of a trust or a men	nber of a partnership or	other entity formed to	12
DAA			TE 12700 0		Cabadala C /Ca	- 000 or 000 E7\ 2000

, .

Page 2

Schedule G (Form 990 or 990-EZ) 2009 ROAD GEMS CAR CLUB, INC	36-4021353	Page 3
•	YE	S NO
13 Indicate the percentage of gaming activity operated in:		
a The organization's facility		
b An outside facility 13b	8	
14 Enter the name and address of the person who prepares the organization's gaming/special events books an	id records:	
Name: •		
Address: •		
15a Does the organization have a contact with a third party from whom the organization receives gaming revenu		
<b>b</b> If 'Yes,' enter the amount of gaming revenue received by the organization \$ and th	e amount	
of gaming revenue retained by the third party \$		
c If 'Yes,' enter name and address of the third party:		
Name •	. <b>-</b>	
Address: ►		
16 Gaming manager information		
Name: ►		
Gaming manager compensation ► \$		
Description of services provided		
Director/officer Employee Independent contractor		
17 Mandatory distributions		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to restate gaming license?	17a	ni ini
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or	spent in the	
organization's own exempt activities during the tax year 🕨 \$		A (4).

TEEA3703L 02/05/10

Schedule **G** (Form 990 or 990-EZ) 2009

4 . . . . .

BAA

2009	FEDERAL STATEMENTS		PAGE 1
CLIENT M-9901	ROAD GEMS CAR CLUB, INC		36-4021353
5/04/10  STATEMENT 1 FORM 990-EZ, PART I, LINE 16 OTHER EXPENSES			04 26PM
BANK CHARGES DUES INSURANCE OFFICE EXPENSES TAXES WEB DOMAIN		\$ TOTAL \$	17. 100. 952. 616. 227. 107. 2,019.

#### STATEMENT 2 FORM 990-EZ, PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE

TO ORGANIZE THE LAST FLING TILL SPRING CAR SHOW TO HELP BRING PEOPLE TOGETHER THAT HAVE AN APPRECIATION OF MOTOR VEHICLES. THE CAR SHOW ALSO HELPS THE COMMUNITY OF WEST POINT NEBRASKA BY BRINGING IN THOUSANDS OF PEOPLE ON ONE WEEKEND FOR THE CAR SHOW.