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**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)

2009

Department of the Treasury
Internal Revenue Service

▶ 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.

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning _____, **2009, and ending** _____

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization THE WAYNE-DUPAGE HUNT, INC.	D Employer identification number 36-6110020
		Number and street (or P.O. box, if mail is not delivered to street address) Room/suite P.O. BOX 163	E Telephone number (630) 665-5201
		City or town, state or country, and ZIP + 4 WAYNE IL 60184	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: ▶ N/A

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

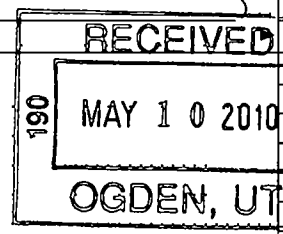
J Tax-exempt status (check only one) — 501(c) (7) ◀ (insert no) 4947(a)(1) or 527

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. ▶ \$ 93,827.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

		1	2	3	4			5a	5b			5c			6a	6b			6c			7a	7b			7c			8	9		
REVENUE	1 Contributions, gifts, grants, and similar amounts received																													1,250.		
	2 Program service revenue including government fees and contracts																													1,200.		
	3 Membership dues and assessments																													79,000.		
	4 Investment income																													718.		
	5a Gross amount from sale of assets other than inventory																															
	b Less cost or other basis and sales expenses																															
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)																															
	6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>																															
	a Gross revenue (not including \$ _____ of contributions reported on line 1)																															
b Less direct expenses other than fundraising expenses																																
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)																																
7a Gross sales of inventory, less returns and allowances																																
b Less cost of goods sold																																
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)																																
8 Other revenue (describe ▶ See Other Revenue Statement)																																
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8																																
EXPENSES	10 Grants and similar amounts paid (attach schedule)																															
	11 Benefits paid to or for members																															
	12 Salaries, other compensation, and employee benefits																															
	13 Professional fees and other payments to independent contractors																															
	14 Occupancy, rent, utilities, and maintenance																															
	15 Printing, publications, postage, and shipping																															
	16 Other expenses (describe ▶ See Other Expenses Statement)																															
	17 Total expenses. Add lines 10 through 16																															
18 Excess or (deficit) for the year (Subtract line 17 from line 9)																																
NET ASSETS	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)																															
	20 Other changes in net assets or fund balances (attach explanation) See L-20 Stmt.																															
	21 Net assets or fund balances at end of year Combine lines 18 through 20																															



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				107,500.	96,087.
23 Land and buildings				0.	0.
24 Other assets (describe ▶ See L-24 Stmt)				23,561.	23,561.
25 Total assets				131,061.	119,648.
26 Total liabilities (describe ▶ See L-26 Stmt)				23,561.	23,741.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)				107,500.	95,907.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

99

Part V Other Information (Note the statement requirements in the instrs 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		X
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes		X
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.		
35a	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?		X
35b	b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
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		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 0.		
37b	b Did the organization file Form 1120-POL for this year?		X
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?		X
38b	b If 'Yes,' complete Schedule L, Part II and enter the total amount involved		
39	Section 501(c)(7) organizations Enter.		
39a	a Initiation fees and capital contributions included on line 9	80,250.	
39b	b Gross receipts, included on line 9, for public use of club facilities	13,577.	
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____		
40b	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		
40c	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 ▶ _____		
40d	d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
40e	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		X
41	List the states with which a copy of this return is filed ▶ _____		

42a The organization's books are in care of ▶ STEPHEN HUBER Telephone no ▶ (630) 497-9278
 Located at ▶ P.O. BOX 0758 WAYNE IL ZIP + 4 ▶ 60184

		Yes	No
42b	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 ▶ _____		X
42c	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: ▶ _____		X

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** _____

		Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X
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		X

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 | | |
| 47 | | |
| 48 | | |
| 49a | | |
| 49b | | |
- 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 .
- 47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II
- 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E
- 49a Did the organization make any transfers to an exempt non-charitable related organization?
- b If 'Yes,' was the related organization a section 527 organization?

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 and deferred compensation	(e) Expense account and other allowances

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 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.

Sign Here

Signature of officer: *Stephen J. Huber* Date: 5/1/10

Type or print name and title: TREASURER STEPHEN J. HUBER

Paid Preparer's Use Only

Preparer's signature: *Robert J. Heinz CPA* Date: 04/20/10 Check if self-employed: Preparer's Identifying Number (See instructions): P00655701

Firm's name (or yours if self-employed), address, and ZIP + 4: HEINZ & ASSOCIATES
200 W. BURLINGTON AVENUE
CLARENDON HILLS IL 60514-1137 Phone no: (630) 986-0475

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

Form 990-EZ
Part II

Other Assets and Liabilities

2009

Name as Shown on Return THE WAYNE-DUPAGE HUNT, INC.	Employer Identification No. 36-6110020
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	Beginning of Year	End of Year
Line 24 - Other Assets:		
2008 CHEVY C1500 MEDIUM DUTY TRUCK	23,561.	23,561.
Totals to Form 990-EZ, Part II, line 24	23,561.	23,561.
Line 26 - Total Liabilities:		
GMAC 5 YEAR FLEXIBLE FINANCE PLAN	23,561.	23,561.
IL STATE WITHHOLDING	0.	180.
Totals to Form 990-EZ, Part II, line 26	23,561.	23,741.

Form 990-EZ, Part I, Line 8

Other Revenue Statement

Other revenue (describe)	
INSURANCE REFUND	130.
TAX REFUND	2,571.
Total	2,701.

Form 990-EZ, Part I, Line 16

Other Expenses Statement

Other expenses (describe)	
WORKMAN'S COMP INSURANCE	4,102.
INSURANCE	12,250.
DUES	2,585.
EQUIPMENT MAINT.	5,267.
HOUNDS (INCLUDING FEED, SUPPLIES, VET)	22,013.
KENNELS	4,125.
BANK FEES	32.
LANDOWNERS AMBOY	1,848.
MEETING EXPENSE	967.
PERMIT FEES	2,565.
TRAILER	72.
HUNT BALL EXPENSES	3,000.
HUNT SOCIAL EVENTS	5,901.
EMPLOYER PAYROLL TAXES	2,060.
REAL ESTATE TAX	2,019.
WEB SITE DESIGN	600.
Total	69,406.

Form 990-EZ, Page 1, Part I, Line 20

Other Changes in Net Assets or Fund Balances

Description	Amount
2008 ADJUSTMENT CASH TO ACCRUAL	-1,034.
Total	-1,034.

Supporting Statement of:

Form 990-EZ/Line 6a

Description	Amount
PUPPY AUCTION PICTURES INCOME	7,120.
FOREST PRESERVE DINNER INCOME	1,838.
Total	<u>8,958.</u>

Supporting Statement of:

Form 990-EZ/Line 6b

Description	Amount
PUPPY AUCTION PICTURES EXPENSES	1,718.
FOREST PRESERVE DINNER EXPENSES	155.
Total	<u>1,873.</u>

Wayne DuPage Hunt & Wayne Area Conservancy 2009 Board of Directors

Average
Hrs/ Wk

OFFICERS	NAME	ADDRESS	HOME PHONE	WORK PHONE	FAX	EMAIL
President	Carol P. Hancock	P.O. Box 543 Wayne, IL 60184	630/584-5171		630/584-4819	plumriver@sbcglobal.net
Vice President & Treasurer	James E. Bramsen	26 Ridge Rd. Barrington, IL 60010	847/381-1299	630/513-1122	847/381-0512	bramsenj@spray.com
Vice President	Stephen J. Huber	P.O. Box 0758 Wayne, IL 60184	630/497-9278		630/497-9277	shuber@mchutchison.com
Secretary & Horse Show	Patricia L. Spiroff	P.O. Box 127 Wayne, IL 60184	630/513-1452			patriciaspiroff@att.net
DIRECTORS						
Social	Elizabeth C. Bramsen	26 Ridge Rd. Barrington, IL 60010	847/381-1299		847/381-0512	bbramsen@spray.com
Joint Master & Forest Preserve	James A. Brown	34W675 Army Trail Rd. Wayne, IL 60184	630/377-7141	847/717-3700	847/888-5519	jim@setfast.net
Country	John Carlisle	P.O. Box 1201 Wayne, IL 60184	630/762-0796	cell 630/605-7939	630/529-3626	cowboycarlisle@gmail.com
Community	Kathie Connolly	P.O. Box 143 Wayne, IL 60184	630/513-5570	630/875-1037	630/513-9254	k.connolly@Henricksen.com
Social	Laurel Hendrickson	P.O. Box 267 Wayne, IL 60184	630/377-9140			vixen6n@aol.com
Master	Fred Iozzo	P.O. Box 354 Wayne, IL 60184	630/584-6515		630/762-9131	fredogden@sbcglobal.net
Membership	Marie Iozzo	P.O. Box 354 Wayne, IL 60184	630/584-6515		630/762-9131	"see Fred Iozzo"
Country	Frank Laskaris	6N158 Sulky Road Wayne, IL 60184	630/587-2624	630/355-2700		frank@napervillecadillac.com
Country/Jumps & Signs	Howard Levine	P.O. Box 754 Wayne, IL 60184	630/584-4563	630/482-3633 xt. 120 cell 630/632-3708	630/584-3774	tonlevine@hotmail.com
Pony Club & Country	Kenneth Malm	6N419 Dunham Road Wayne, IL 60184	630/584-9410			N/A
Grounds & Buildings	William Muenzenmay	11N575 Rohrsen Road Elgin, IL 60120	847/695-9846			wmmuenz@aol.com
Joint Master	Nikki Reed	P.O. Box 452 Wayne, IL 60184	630/584-9397			kckon23@sbcglobal.net
At Large	Pam Ruminiski*	4N781 Honey Hill Rd. Wayne, IL 60184	630/513-6990	630/377-3131 cell 630/740-1447	same as home	rumrun58@aol.com
Events & Website	Patricia Wheaton*	3N434 Maple Court West Chicago, IL 60185	630/231-8764	cell 630/240-3228		foaisofanjella@aol.com

* Ex Officio

FOR ALL OF THE OFFICERS SHOWN ABOVE :

- COMPENSATION
- EMPLOYEE BENEFIT PLAN CONTRIBUTIONS
- EXPENSE ACCOUNT

PART III

ORGANIZATIONS PRIMARY EXEMPT PURPOSE -
ALL ACTIVITIES CARRIED OUT BY THE CLUB ARE
SOCIAL IN NATURE AND BENEFIT ALL OF THE MEMBERS.

ATTACHMENT TO
990-EZ
#36-6110020
PAGE 2, PART III
PAGE 2, PART IV

2/13/2010