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A For the 2009 calendar year, or tax year beginning 01-01-2009 , and ending 12-31-2009				
B Check if applicable	Please use IRS label or print or type. See Specific Instructions.	C Name of organization Baltimore County Kennel Club Inc		D Employer identification number 52-6052463
☐ Address change		Number and street (or P O box, if mail is not delivered to street address) Room/suite 3719 Sue-Dan Drive		E Telephone number
☐ Name change		City or town, state or country, and ZIP + 4 Hampstead, MD 21074		F Group Exemption Number 
☐ Initial return				
☐ Terminated				
☐ Amended return				
☐ Application pending				

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) ▶
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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)(4) ☐ (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		▶ \$	102,922
Part I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)		

Revenue		1	2
1	Contributions, gifts, grants, and similar amounts received		102,827
2	Program service revenue including government fees and contracts		
3	Membership dues and assessments		
4	Investment income		95
5a	Gross amount from sale of assets other than inventory	5a	
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	
6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ☐		
a	Gross revenue (not including \$ _ 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	
b	Less cost of goods sold	7b	0
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8	Other revenue (describe ☐ _____)	8	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	102,922

Expenses	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	550
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe _____)	16	96,734
	17	Total expenses. Add lines 10 through 16	17	97,284

Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	5,638
	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	125,270
	20	Other changes in net assets or fund balances (attach explanation)	20	11,514
	21	Net assets or fund balances at end of year Combine lines 18 through 20	21	142,422

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	125,270	22 142,422
23	Land and buildings		23
24	Other assets (describe _____)		24
25	Total assets	125,270	25 142,422
26	Total liabilities (describe _____)		26
27	Net assets or fund balances (line 27 of column (B) must agree with line 21) .	125,270	27 142,422

Part III Statement of Program Service Accomplishments (See the instructions for Part III)		Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)	
What is the organization's primary exempt purpose? To further the advancement of all breeds of purebred dogs To do all in its power to protect and advance the interest of all breeds of purebred dogs and to encourage sportsmanlike competition at dog shows and obedience trials To conduct sanctioned matches, dog shows and obedience trials under the rules of the American Kennel Club and other AKC performance events			
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			
28 To further the advancement of all breeds of purebred dogs To do all in its power to protect and advance the interest of all breeds of purebred dogs and to encourage sportsmanlike competition at dog shows and obedience trials To conduct sanctioned matches, dog shows and obedience trials under the rules of the American Kennel Club and other AKC performance events (Grants \$) If this amount includes foreign grants, check here . . . ☐		28a	
29			
(Grants \$) If this amount includes foreign grants, check here . . . ☐		29a	
30			
(Grants \$) If this amount includes foreign grants, check here . . . ☐		30a	
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	

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)				
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

Part VOther 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	No
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	No
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	No
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	No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	
b	Did the organization file Form 1120-POL for this year?	37b	No
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	No
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	No
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	No
41	List the states with which a copy of this return is filed		
42a	The organization's books are in care of James Spies Telephone no (410) 374-0039 3719 Sue-Dan Drive Located at Hampstead, MD ZIP + 4 21074		
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 Foreign Bank and Financial Accounts.	42b	No
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	42c	No
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	No
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	No

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		
48	Is the organization a school 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?		
49b	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 & deferred compensation	(e) Expense account and other allowances
NONE				

50(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		

51(d) Total number of other independent contractors each receiving over \$100,000

Please 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		
Paid Preparer's Use Only	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
	Harris Professional Assoc				(410) 666-4290
	12 Galloway Ave Suite 2-A				
		Hunt Valley, MD 21030			
May the IRS discuss this return with the preparer shown above? See instructions					
Yes No					

Additional Data

Software ID:

Software Version:

EIN: 52-6052463

Name: Baltimore County Kennel Club Inc

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Sharon Spies 3719 Sue Dan Drive Hampstead, MD 21074	Director 0	0		
George Openhym 1406 Margarette Ave Towson, MD 21204	Director 0	0		
Herb Rosen 11404 Lhasa Lane Lutherville, MD 21093	Director 0	0		
James Spies 3719 Sue Dan Drive Hampstead, MD 21074	Treasurer 0	0		
Terry Fila 920 Renfrew Street Baltimore, MD 212215208	Secretary 0	0		
Carol Openhym 1406 Margarette Ave Towson, MD 21204	Secretary 0	0		
Donald Peacock 613 Paca Street Baltimore, MD 21201	Vice President 0	0		
Susan Berney 8310 Burning wood Road Pikesville, MD 21208	President & CEO 0	0		

TY 2009 Other Changes in Net Assets Schedule

Name: Baltimore County Kennel Club Inc

EIN: 52-6052463

Software ID: 09000047

Software Version: 2009v1.3

Description	Amount
Refund of Federal Corporate Taxes	11,514

TY 2009 Other Expenses Schedule**Name:** Baltimore County Kennel Club Inc**EIN:** 52-6052463**Software ID:** 09000047**Software Version:** 2009v1.3

Description	Amount
Trophies	2,632
Stewards	890
Specialties	403
Show superintendent	30,243
Security	2,086
Parking	2,573
Misc. show expenses	13,771
Match Expenses	2,605
Judge Fees	14,993
Dues and subscriptions	25
Corr. Sec. expenses	133
Concessions	400
Charitable Contributions	9,750
Catering	3,180
Business Meetings	10,284
AKC Delagates	1,966
Advertising and Promotion	550