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CHANGE OF ACCOUNTING PERIOD

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)

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB NO 1545-0047
2009
Open to Public Inspection

Α	For the	e 2009 calendar year, or tax year beginning APR 1, 2009 and ending	DEC 31, 200	9
В	Check if applicable	e Please use IRS C Name of organization	D Employer identi	fication number
	Addres change Name	e punt or RENTOCKI DISTILLERS ASSOCIATION		(0.2.2.6.0.0
Ļ	chang	Doing Business As		6033690
	return Termir	See Number and street (or P 0 box if mail is not delivered to street address) Room/su Specific Instruc-		er -875-9351
	Ameno	ded tions	G Gross receipts \$	613,712.
	Applic	FRANKFORT, KY 40601	H(a) Is this a group	return
	pendir	F Name and address of principal officer: ERIC GREGORY	for affiliates?	Yes X No
		302 SHELBY STREET, FRANKFORT, KY 40601	H(b) Are all affiliates in	ncluded? Yes No
		empt status X 501(c) (6) ◀ (insert no.)		a list (see instructions)
		te: ► WWW.KYBOURBON.COM	H(c) Group exempt	
	Form of art I	organization X Corporation Trust Association Other ► L Yestammary	ar of formation 1940	M State of legal domicile KY
0	1	Briefly describe the organization's mission or most significant activities: TO PROMOT	TE THE HISTO	RY AND
Activities & Governance		GROWTH OF THE BOURBON INDUSTRY AND ITS MEMBER		
EL .	2	Check this box if the organization discontinued its operations or disposed of me	ore than 25% of its net	assets
ove.	3	Number of voting members of the governing body (Part VI, line 1a)	3	7
ড প্	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	
es	5	Total number of employees (Part V, line 2a)	5	
ΞΞ	6	Total number of volunteers (estimate if necessary)	6	
Act	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	78	
	b	Net unrelated business taxable income from Form 7970 T, line 34	71	
			Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII NIA) 7 2010	531,923 403,315	370,732. 241,412.
Revenue	9	Program service revenue (Party III) (III)	3,984	
æ	10	Investment income (Part VIII, column (A), lines 3, 4, and 76 (A)	3,304	1,500.
		Other revenue (Part VIII, column (A), (Ines 5-6d, 8c, 9c, 1.0c, and 11e) Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	939,222	613,712.
-	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3337222	013//12:
		Benefits paid to or for members (Part IX, column (A), line 4)		
s	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	212,956	. 188,243.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	·-	
ē	Ь	Total fundraising expenses (Part IX, column (D), line 25)		
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	341,993	
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	554,949	
	19	Revenue less expenses. Subtract line 18 from line 12	384,273	<56,255.>
Net Assets or	3		Beginning of Current Year	
Sset	20	Total assets (Part X, line 16)	520,133	363,879.
et A	21	Total liabilities (Part X, line 26)	F00 100	262 070
		Net assets or fund balances Subtract line 21 from line 20	520,133	. 363,879.
	art II	Signature Block	te and to the best of my knowle	adde and helief it is this correct
		Under penalties of penury, declare that I have examined this return, including accompanying schedules and statemen and complete. Declaration of preparer other than officer) is based on all information of which preparer has any knowled		
Sig		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5-3-	70
He	1	Signature of officer	Date	<u>, </u>
		ERIC GREGORY A PRESIDENT		
		Type or print name and title		
				arer's identifying number instructions)
Pai		signature of Las con 3/25/1.	self- employed > (see	
	parer's Only	Firm's name (or HARROD & ASSOCIATES, PSC	EIN ▶	
USE	only	self-employed), #2 HMB/CIRCLE - SUITE A		
_		ZIP+4 FRANKFORT KY 40601	Phone no 🕨	502-695-7300 C
Ма	y the IF	RS discuss this return with the preparer shown above? (see instructions)		X Yes No
932	001 02-0	4-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate in	nstructions.	Form 990 (2009)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_1_	L	X_
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	1		l
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	ļ		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	<u> </u>	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			17
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional X	7		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17_		<u>X</u> _
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			.,
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
20	complete Schedule G, Part III	19		<u>X</u>
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	990 (2	
		LOHII	J J U (2	_UUB)

Form 990 (2009) KENTUCKY DISTILLERS' ASSOCIATION

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current]		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1.	1	1,7
	Schedule K. If "No", go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
∠⊃a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05.		
	disqualified person during the year? If "Yes," complete Schedule L, Part I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a	\vdash	-
Þ	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	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	200		
-0	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X	
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30_		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?		l	 ,,
	If "Yes," complete Schedule N, Part I	31	<u> </u>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
20	Schedule N, Part II	32_	<u></u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	00] ,	X
24	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33_		Λ
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	24		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	34_		
33	If "Yes," complete Schedule R, Part V, line 2	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
55	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 (2009)

Form	990 (2009) KENTUCKY DISTILLERS' ASSOCIATION 61-6033	690	Р	age 5
.Pai	Statements Regarding Other IRS Filings and Tax Compliance		_	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable	'		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	}	ŀ	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c]	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	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)?	4a		X
b	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.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c]
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			
	provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7a		Х

h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?

Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings

> 11a 11b

10b

12b

Form 990 (2009)

7g

7h

9a

9Ь

12a

at any time during the year?

Section 501(c)(7) organizations. Enter:

11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders

amounts due or received from them.)

Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966?

a initiation fees and capital contributions included on Part VIII, line 12

b Did the organization make a distribution to a donor, donor advisor, or related person?

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

b Gross income from other sources (Do not net amounts due or paid to other sources against

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2_		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision		,	
	of officers, directors or trustees, or key employees to a management company or other person?	3		_X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following.			
а	The governing body?	8a	Х	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> X</u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	10b		<u> </u>
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11A				
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			ļ
	to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		,,	
	in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		v	
	The organization's CEO, Executive Director, or top management official	15a	<u>X</u>	v
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			Х
	taxable entity during the year?	16a		Λ_
Ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	466		
500	exempt status with respect to such arrangements?	16b		
	Let the states with which a copy of this Form 000 is required to be filed KY			
17 18	List the states with which a copy of this Form 990 is required to be filed ►KY Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
18	public inspection. Indicate how you make these available Check all that apply.	.01		
	Own website Another's website X Upon request			
10	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ncial	
19	statements available to the public	iu iiiid	iiciai	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion:	•	
20	OFFICE - 502-875-9351			
	SAME, FRANKFORT, KY 40601			<u></u> -
	DIMILY TIMENTONLY NI TOUGH			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order. Individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons

	per week	۱ 🛌	(C) Position check all that apply)				ly)	Reportable compensation from	(E) Reportable compensation from related	Estimated amount of other
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
ERIC GREGORY								106 100		4 500
PRESIDENT	60.00	X			<u> </u>	X		126,100.	0.	4,500
ANDREA WILSON	10.00			 , ,						•
CHAIRMAN	10.00		_	X				0.	0.	0.
CHRIS MORRIS	10.00			Ι,,				0.	0.	0
VICE-CHAIRMAN JOHN RHEA	10.00	├-		Х	_	-		0.	<u> </u>	0.
SECRETARY/TREASURER	10.00			Х				0.	0.	0
JEFF CONDER	10.00	<u> </u>		Λ		-			<u> </u>	0.
BOARD MEMBER	10.00			X				0.	0.	0 .
DAVID HOBBS	10.00	-	_	Λ	<u> </u>	ļ		0.	0.	
BOARD MEMBER	10.00	Ì		Х				0.	0.	0.
TOM KREKELER	10.00	┝╌		A		<u> </u>				
BOARD MEMBER	10.00			X				0.	0.	0.
MEREDITH MOODY	1000	-								
BOARD MEMBER	10.00	-		X		-		0.	0.	0.
		} 								
						<u> </u>				

(A) Name and title	(B) (C) Average Position							(D) Reportable	(E) Reportable		Es	(F) timate	ed
	hours per week	Individual trustee or director			that	Highest compensated do employee		compensation from the organization (W-2/1099-MISC)	compensa from relat organizati (W-2/1099-N	ition ted ons	com fr org	nount other pensa om tha anizat d relat	ation e lion ed
		24	<u> </u>	5	3	Ĭ, į	- G						
			-		: -						-		
 Total Total number of individuals (including but compensation from the organization 	not limited to ti	hose	liste	ed al	bove	e) wi	no re	126,100. ecclyed more than \$100		0. able		4,5	00
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for	such individua	1									3	Yes	No X
 For any individual listed on line 1a, is the and related organizations greater than \$1 Did any person listed on line 1a receive or 	50,000? <i>If</i> "Yes r accrue compe	," co nsat	mpl Ion 1	ete S	Sche	edul	e J f	or such individual		ļ	4		X
the organization? If "Yes," complete Sche Section B. Independent Contractors									A 400.000 (5		<u> </u>
Complete this table for your five highest of the organization NONE	compensated in	depe	ende	ent c	onti	racto	ors t		\$100,000 of co	ompens:			
(A) Name and busines	s address		_				-	(B) Description of s	services	С	(C ompe		on ——
					-		1						
			<u>. </u>							-			
Total number of independent contractors	(including but a	not lu	mite	d to	the	Sp 11	sted	Jahove) who received o	nore than		~		
\$100,000 in compensation from the organ	2	iot ili		<u> </u>		0					Form !	000 (

		_	2009) 101111		THEFTIC	DDOCIMITO	14	01 0000	O Tage S
Pa	rt'	VIII	Statement of Rever	nue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines Total. Add lines 1a-1f	tions) 1e ots, and ove 1f	370,732.	370,732.			
Program Service Revenue	2		BOURBON TRAIL,		Business Code 900099	241,412.	241,412.		
ď.		g	All other program service reversed. Add lines 2a-2f		>	241,412.			
Other Revenue	4 5	ŀ	Investment income (including other similar amounts) Income from investment of ta Royalties	•	>	1,568.			1,568.
		c d	Gross Rents Less rental expenses Rental income or (loss) Net rental income or (loss) Gross amount from sales of	(i) Securities	(II) Personal				
		b c d	assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraisin including \$	g events (not					
	g	c a b	contributions reported on line Part IV, line 18 Less direct expenses Net income or (loss) from fund Gross income from gaming ad Part IV, line 19 Less direct expenses	a 1c) See a b draising events ctivities. See a b	>				
	10) a b	Net income or (loss) from gam Gross sales of inventory, less and allowances Less' cost of goods sold Net income or (loss) from sale Miscellaneous Revenu	returns a b s of inventory					
	11	a b c d	All other revenue Total. Add lines 11a-11d		>				
	12	2	Total revenue. See instructions		▶ [613.712.	241,412.	0.	1,568.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total oxpolices	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	105 100			
	trustees, and key employees	126,100.			
8	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	35,474.			
3	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	1,946.			
9	Other employee benefits	15,618.			
0	Payroll taxes	9,105.			
1	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
9	Other				
2	Advertising and promotion	26,506.			
3	Office expenses	78,256.			
4	Information technology				
5	Royalties				
6	Occupancy				
7	Travel	15,076.			
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				_
9	Conferences, conventions, and meetings	1,213.			
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	1,247.			
3	Insurance	5,405.			
4	Other expenses Itemize expenses not covered				
	above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total				
	expenses shown on line 25 below)				
а	KY BOURBON TRAIL/TEAM B	170,095.			
b	SPECIAL PROJECTS	146,451.			
С	STRATEGIC PLAN	25,000.			
d	GOVERNMENT AFFAIRS	6,658.			
e	MEALS	3,130.			
f	All other expenses	2,687.			
5	Total functional expenses Add lines 1 through 24f	669,967.			
6	Joint costs. Check here		_		
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

4

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	403,331.	1	332,251.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	107,028.	4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			The State of the s
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L		6	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
₹	9	Prepaid expenses and deferred charges		9	22,226.
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 12,	109.		
	b	Less: accumulated depreciation 10b 2,	707. 9,774.	10c	9,402.
	11	Investments · publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments · program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	520,133.	16	363,879.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employee	es,		
jab		highest compensated employees, and disqualified persons Complete Pa	rt II		
_		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
		Organizations that follow SFAS 117, check here X and compl	ete		
es		lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets	306,387.	 	214,257.
Bal	28	Temporarily restricted net assets	213,746.	28	149,622.
5	29	Permanently restricted net assets	- 	29	
F		Organizations that do not follow SFAS 117, check here and	d		
ō		complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et	32	Retained earnings, endowment, accumulated income, or other funds		32	
~	33	Total net assets or fund balances	520,133.	33	363,879.
	34	Total liabilities and net assets/fund balances	520,133.	34	363,879.

Form **990** (2009)

Pa	rt XI Financial Statements and Reporting				
			Yes	No	
1	Accounting method used to prepare the Form 990. X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X		
b	Were the organization's financial statements audited by an independent accountant?	2b		X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,				
	review, or compilation of its financial statements and selection of an independent accountant?				
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			i	
đ	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			į	
	consolidated basis, separate basis, or both:			ĺ	
	X Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit				
	Act and OMB Circular A-133?	3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b			

Form **990** (2009)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

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

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only

Section 501(c)(4), (5), or (6) organizations: Complete Part III

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

Nar	ne of organization			Empl	oyer identification number
	KENTUCK	Y DISTILLERS' A	SSOCIATION		61-6033690
P	art I-A Complete if the org	anization is exempt un	der section 501(c) or is a section 527 o	rganization.
1	Provide a description of the organiz				
2	Political expenditures	·		▶ \$	
	Volunteer hours				
Pε	ert I-B Complete if the org	anization is exempt un	der section 501(c)(3).	
1	Enter the amount of any excise tax			▶ \$	
2	Enter the amount of any excise tax	incurred by organization mana	gers under section 495	5 5 ▶ \$	
3	If the organization incurred a section	n 4955 tax, did it file Form 472	0 for this year?		Yes No
48	Was a correction made?				Yes No
<u> </u>	If "Yes," describe in Part IV.				
PE	art I-C Complete if the org	anization is exempt un	der section 501(c), except section 501(c)(3).
1	Enter the amount directly expended	by the filing organization for s	ection 527 exempt fun	ction activities >\$	
2	Enter the amount of the filing organ	zation's funds contributed to d	other organizations for	section 527	
	exempt function activities			▶ \$	
3	Total exempt function expenditures	. Add lines 1 and 2. Enter here	and on Form 1120-PO	L,	
	line 17b			▶\$	
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	Enter the names, addresses and en	nployer identification number (l	EIN) of all section 527 p	political organizations to which	h payments were made.
	For each organization listed, enter t	he amount paid from the filing	organization's funds A	lso enter the amount of polit	ical contributions received
	that were promptly and directly deli	· ·	•	eparate segregated fund or a	a political action committee
	(PAC). If additional space is needed	, provide information in Part IV	<u>. </u>		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds. If none, enter ·0·	promptly and directly delivered to a separate
					political organization.
					If none, enter -0
		<u></u>			
				}	

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009	KENTU	JCKY D	ISTILLERS'	ASSOCIATION	61-6	5033690 Page 2
Part II-A Complete if the org	anizatio	n is exer	npt under section	on 501(c)(3) and file	ed Form 5768	
(election under sec	tion 501	(h)).				
A Check 🕨 🖳 if the filing organiza	tion belong	s to an affi	liated group.			
B Check 🕨 📖 if the filing organiza	tion checke	ed box A ar	nd "limited control" pr	ovisions apply		
	ts on Lobb ditures" me		nditures ints paid or incurred	,	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	Jence publi	c opinion (grass roots lobbying)			
b Total lobbying expenditures to infli	•	•			· -	
c Total lobbying expenditures (add li	_		, , ,	Ī		
d Other exempt purpose expenditure		٠.		Ī		
e Total exempt purpose expenditure		1c and 1c	d)			
f Lobbying nontaxable amount Ente	-			th columns	<u> </u>	
If the amount on line 1e, column (a) o			bying nontaxable an		-	
Not over \$500,000	`		the amount on line 1e	11		
Over \$500,000 but not over \$1,000	0,000	\$100,00	00 plus 15% of the ex	cess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000	\$175,00	00 plus 10% of the ex	cess over \$1,000,000		
Over \$1,500,000 but not over \$17			00 plus 5% of the exce			
Over \$17,000,000		\$1,000,	000.			
g Grassroots nontaxable amount (er	ter 25% of	line 1f)				
h Subtract line 1g from line 1a. If zer						
i Subtract line 1f from line 1c If zero	or less, en	ter -0-		[
j If there is an amount other than ze	ro on eithei	line 1h or	line 1i, did the organiz	zation file Form 4720		
reporting section 4911 tax for this	year?					Yes No
	ations tha	t made a s		r Section 501(h) In do not have to comp es 2a through 2f on pa		
	Lobb	ying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))	,,,,,,,					
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2009

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)	(t	o)
	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter		1		
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities? If "Yes," describe in Part IV				
j Total Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912		***************************************		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		Ī		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
art III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)	5), or se	ction	
501(c)(6).				
			Yes	No
Were substantially all (90% or more) dues received nondeductible by members?				Х
· , , , , , , , , , , , , , , , , , , ,		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?		2	Х	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), section		2 3 5), or se	ction	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 1 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 1 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 and 1 are answered "No" OR if Part III-A, lines 1 and 1 are answered "No" OR if Part III-A, lines 1 are answered "No" OR if Part III-A, lines III-A, lin		2 3 5), or se	ction	
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."		2 3 5), or se	ction swered	Х
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes." Dues, assessments and similar amounts from members	t III-A, lir	2 3 5), or se	ction swered	Х
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? The complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	t III-A, lir	2 3 5), or se	ction swered	Х
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? The Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	t III-A, lir	2 3 5), or sene 3 is ar	ction nswered	X),732
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? The complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	t III-A, lir	2 3 5), or sene 3 is ar	ction nswered 370	X 0,732
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total	t III-A, lir	2 3 5), or sene 3 is ar 1 2a 2b 2c	370 15 17 32	X 0,732 0,544 7,355
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? The complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	t III-A, lir	2 3 5), or sene 3 is ar	370 15 17 32	X 0,732 0,544 7,355
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? The Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	al	2 3 5), or sene 3 is ar 1 2a 2b 2c	370 15 17 32	X 0,732 0,544 7,355
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? The Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pare "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excitions the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	al	2 3 5), or sene 3 is ar 1 2a 2b 2c 3	370 370 15 17 32	X 0,732 0,544 7,355 1,899 8,882
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? The Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pare "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excitions the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p expenditure next year?	al	2 3 5), or sene 3 is ar 1 2a 2b 2c 3	370 370 15 17 32	X 0,732 0,544 7,355 1,899 8,882
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	al	2 3 5), or sene 3 is ar 1 2a 2b 2c 3	370 370 15 17 32	X 0,732 0,544 7,355 1,899 8,882
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Schedule D

(Form 990)

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Attach to Form 990. ▶ See separate instructions.

Employer identification number

	KENTUCKY DISTILLER	S' ASSOCIATION	61-6033690
Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
_	organization answered "Yes" to Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose of	conferring
,	ımpermissible private benefit?		Yes No
Par	TELL Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, P	art IV, line 7
1	Purpose(s) of conservation easements held by the organizat	ion (check all th <u>at a</u> pply).	
	Preservation of land for public use (e.g., recreation or p	pleasure) Preservation of an his	torically important land area
	Protection of natural habitat	Preservation of a certi	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of	of a conservation easement on the last
	day of the tax year.		FIDELITY
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	organization during the tax
_	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		Yes No
_	violations, and enforcement of the conservation easements		
6	Staff and volunteer hours devoted to monitoring, inspecting,	-	-
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section 170(Yes No
9	In Part XIV, describe how the organization reports conservat	ion escaments in its revenue and expense	
9	include, if applicable, the text of the footnote to the organization		
	conservation easements.	tion's inarola statements that describes	are organization o doodshang for
Pa	常脚 Organizations Maintaining Collections o	of Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and ba	alance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of put	olic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these	items.	
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and balance	ce sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service	, provide the following amounts relating to
	these items		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre		l gain, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items.	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		► \$ ► \$

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back

to Contributions

c Net investment earnings, gains, and losses
d Grants or scholarships
e Other expenditures for facilities
and programs
f Administrative expenses
g End of year balance

2 Provide the estimated percentage of the year end balance held as:
a Board designated or quasi-endowment

(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back

(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back

(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back

(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back

(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back

(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back

(b) Prior year (c) Two years back (d) Three years back (e) Four years back

(e) Four years back

(e) Four years back

(e) Four years back

(e) Four years back

(e) Four years back

(e) Four years back

(e) Four years back

(e) Four years back

(e) Four years back

(e) Two years back

(f) Two years back

(g) Four years back

(h) Prior year (c) Two years back

(g) Two years back

(h) Prior year (h) Pr

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
 Describe in Part XIV the intended uses of the organization's endowment funds.

Pa	rt VI Investments - Land, Buildi	ngs, and Equipment. Se	ee Form 990, Part X, line 1	10	
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land				
b	Buildings				
c	Leasehold improvements				
d	Equipment		12,109.	2,707.	9,402.
e	Other				
Total	l. Add lines 1a through 1e. (Column (d) musi	equal Form 990, Part X, colun	mn (B), line 10(c))	—	9,402.

Schedule D (Form 990) 2009

Part VII Investments - Other Securities.	See Form 990, Part X, line	12.		
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuatest or end-of-year mark	
Financial derivatives				
Closely-held equity interests				
Other				·
-			· · · · · · · · · · · · · · · · · · ·	
				
				
	+			
				
				···
Total (Col (b) must equal Form 990, Part X, col (B) line 12)				······································
Part VIII Investments - Program Related.	See Form 990, Part X, line	e 13.		
			(c) Method of valua	tion
(a) Description of investment type	(b) Book value	Cos	st or end-of-year mark	ret value
T-1-1 (0-1/1)				······································
Total (Col (b) must equal Form 990, Part X, col (B) line 13) ▶ Part IX Other Assets. See Form 990, Part X, lir	. 15			
	a) Description			(b) Book value
<u> </u>	,			(1)
		 _		
				<u></u>
				
R				
				
Total. (Column (b) must equal Form 990, Part X, col (B) II	ne 15)	· · · · · · · · · · · · · · · · · · ·		
Part X Other Liabilities. See Form 990, Part X 1. (a) Description of liability	X, line 25	(b) Amount		
		(b) Amount		
Federal income taxes				
				
Total, (Column (b) must equal Form 990, Part X, col (R) II	ne 25.)			

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 932053 02-01-10

SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,

or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

2009

Open To Public Inspection

Excess Benefit Transactions (section 501 (c))4 organizations only). Complete if the organization answered 'Yes' on Form 930, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b	Name of the organization								E	mployer	identif	ication r	number
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (a) Name of disqualified person (b) Description of transaction (c) Corrected? Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Complete if the organization answered 'Yes' on Form 990, Part IV, line 25, or Form 990-EZ, Part V, line 38a (a) Name of interested Dersons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 25, or Form 990-EZ, Part V, line 38a (b) Cannot or from the organization? To From (c) Organization answered 'Yes' on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the organization of transaction of tr										<u> 51–60</u>	3369	0	
(a) Name of disqualified person (b) Description of transaction (c) Corrected? Yes No													
(a) Name of disqualified person (b) Description of transaction Yes No Y		organization ans	wered "Yes	on Form	990, Part IV,	line 25a or	25b, or Fo	rm 990-E	Z, Part	V, line 40)b	(a) Cor	
2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II	(a) Name of	disqualified pe	rson			(b) D	escription	of transa	action				Г
Section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II												1.00	-110
Section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II													
Section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II													<u> </u>
Section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II					<u> </u>								
Section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II					-					 -			<u> </u>
Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (a) Name of interested person and purpose (b) Loan to or from the organization? (c) Original principal amount (d) Balance due (e) In default? (g) Written organization? (g) Written (he organization? (e) Original principal amount (e) In default? (2 Enter the amount of tax i	mposed on the	organizatio	n manager	s or disqualifi	ed persons	during the	e year un	der			·	
Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a	section 4958									▶ \$			
Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (a) Name of interested person and purpose (b) Loan to or from the organization? To From To From To From To From To From To Battili Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c (a) Name of interested person (b) Relationship between interested person and the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c (c) Amount of transaction (d) Description of transaction (e) Sharing of organizations revenues? (e) Sharing of organization (e) Sharing of organization (e) Sharing of organizations revenues? (e) Sharing of organization (e) Sharing of organization (e) Sharing of organizations revenues? (e) Sharing of organization (e) Sharing of organization (e) Sharing of organizations revenues? (e) Sharing of organization (e) Sharing of organization (e) Sharing of organizations revenues? (e) Sharing of organization (e) Sharing organizatio	3 Enter the amount of tax,	ıf any, on lıne 2	, above, rein	nbursed by	y the organiza	tion				▶ \$			
Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (a) Name of interested person and purpose (b) Loan to or from the organization? To From To From To From To From To From To Battili Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c (a) Name of interested person (b) Relationship between interested person and the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c (c) Amount of transaction (d) Description of transaction (e) Sharing of organizations revenues? (e) Sharing of organization (e) Sharing of organization (e) Sharing of organizations revenues? (e) Sharing of organization (e) Sharing of organization (e) Sharing of organizations revenues? (e) Sharing of organization (e) Sharing of organization (e) Sharing of organizations revenues? (e) Sharing of organization (e) Sharing of organization (e) Sharing of organizations revenues? (e) Sharing of organization (e) Sharing organizatio	Part II Loans to and	Vor From In	torostad	Derson									
(a) Name of interested person and purpose (b) Loan to or from the organization? To From Total T	t					line 26 or l	Form 990-F	7 Part \	/ line 3	Ra.			
To From Person and purpose the organization amount Oceratific Committee? Agreement? To From Prom Prom Prom Prom Prom Prom Prom P										(f) Apr	proved	(g) W	ritten
Total Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the organization (c) Amount and type of assistance	person and purpose			aı	mount			defa	ault?			agree	ment?
Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the organization (c) Amount and type of assistance (d) Amount and type of assistance Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c (a) Name of interested person (b) Relationship between interested (c) Amount of transaction (d) Description of organization's revenues? Yes No		То	From	 		-		Yes	No	Yes	No	Yes	No
Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the organization (c) Amount and type of assistance (d) Amount and type of assistance Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c (a) Name of interested person (b) Relationship between interested transaction (c) Amount and type of assistance (c) Amount and type of assistance (d) Description of transaction organization organization organization organization organization organization organization.	-		-	-				 -		-			
Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the organization (c) Amount and type of assistance (d) Amount and type of assistance Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c (a) Name of interested person (b) Relationship between interested (c) Amount of transaction (d) Description of organization's revenues? Yes No				+						-	_		
Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the organization (c) Amount and type of assistance (d) Amount and type of assistance Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c (a) Name of interested person (b) Relationship between interested (c) Amount of transaction (d) Description of organization's revenues? Yes No	·			 						 			
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person and the organization transaction transaction organization's revenues? Yes No												(e) Sha	aring of
Yes No	(a) Name of Interest	•				(d)			organiz	zation's			
		person a									-,.		
	JULIE GREGORY		SI	STER			26	,886	.JUI	IE G	REGO		
												-	<u> </u>
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2009

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990. Department of the Treasury Internal Revenue Service

OMB No 1545-0047 Open to Public Inspection

Name of the organization

KENTUCKY DISTILLERS' ASSOCIATION

Employer identification number 61-6033690

FORM 990, PART VI, SECTION B, LINE 11: THE BOARD OF DIRECTORS IS PRESENTED
FORM 990 PRIOR TO FILING. THE BOARD REVIEWS AND APPROVES THE TAX RETURN
PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF DIRECTORS CLOSELY
MONITORS THE OPERATIONS OF THE ASSOCIATION AND PAYS CLOSE ATTENTION TO
BUSINESS TRANSACTIONS TO MAKE SURE NO INAPPROPRIATE CONFLICT OF INTEREST
EXISTS. IF ANY WAS TO BE FOUND IT WOULD BE CORRECTED IMMEDIATELY.
FORM 990, PART VI, SECTION B, LINE 15A: THE BOARD OF DIRECTORS REVIEWS THE
COMPENSATION FOR ALL STAFF, INCLUDING THE PRESIDENT ANNUALLY. RELEVANT
WAGE DATA IS USED TO EVALUATE COMPENSATION.
FORM 990, PART VI, SECTION C, LINE 19: THE ASSOCIATION MAKES GOVERNING
DOCUMENTS, FINANCIAL STATEMENTS, AND POLICY INFORMATION AVAILABLE TO THE
PUBLIC UPON REQUEST.
SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:
(A) NAME OF PERSON: JULIE GREGORY
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
SISTER
(C) AMOUNT OF TRANSACTION \$ 26886.
(D) DESCRIPTION OF TRANSACTION: JULIE GREGORY IS AN IP ATTORNEY AND
PARTNER IN MIDDLETON REUTLINGER, A LAW FIRM HIRED BY THE KENTUCKY
DISTILLERS' ASSOCIATION BOARD OF DIRECTORS. JULIE GREGORY IS THE SISTER
OF ERIC GREGORY, THE PRESIDENT OF KDA.

SCHEDULE O

Department of the Treasury

Internal Revenue Service

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

Employer identification number Name of the organization 61-6033690 KENTUCKY DISTILLERS' ASSOCIATION SHARING OF ORGANIZATION REVENUES? = NO

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions.

Attach to your tax return. Business or activity to which this form relates OMB No 1545-0172

Attachment Sequence No 67

Identifying number

KENTUCKY DISTILLERS' ASSOCIATION

FORM 990 PAGE 10

990

61-6033690

PE	Election To Expense Certain Prop	erty Under Section 1		listed prop		mplete Part	V be	fore vo	ou complete Part I.			
	Maximum amount. See the instruction			<u>.</u>				1	250,000.			
	Total cost of section 179 property pla							2	<u> </u>			
3	Threshold cost of section 179 proper	ty before reduction	ın İlmitation					3	800,000.			
	Reduction in limitation Subtract line 3	•						4				
_	Dollar limitation for tax year Subtract line 4 from li		,	see instruction	ns			5				
6	(a) Description of			isiness use on		(c) Elected	d cost					
7	Listed property Enter the amount fro	m line 29			7							
8	Total elected cost of section 179 prop	perty. Add amounts	s in column (c), lines 6 a	nd 7				8				
9	Tentative deduction. Enter the small	er of line 5 or line 8	• •				Ì	9				
10	Carryover of disallowed deduction fro	rryover of disallowed deduction from line 13 of your 2008 Form 4562										
	•	siness income limitation. Enter the smaller of business income (not less than zero) or line 5										
	Section 179 expense deduction Add		•	•			- [12				
	Carryover of disallowed deduction to	•			13				······································			
	e: Do not use Part II or Part III below t											
Pε	art II Special Depreciation Allow	ance and Other D	epreciation (Do not Inc	lude listed	propert	y)						
14	Special depreciation allowance for qu	alified property (ot	her than listed property)	placed in s	service (durina						
	the tax year			J				14				
	Property subject to section 168(f)(1) e	election					İ	15				
	Other depreciation (including ACRS)											
	art 腓 MACRS Depreciation (Do r	not include listed p	roperty) (See instruction	າຣ.)	_			16	1,200.			
	· · · · · · · · · · · · · · · · · · ·	·	Section A		**.							
17	MACRS deductions for assets placed	In service in tax ye	ears beginning before 20	009				17				
	If you are electing to group any assets placed in se	•	• •		k here							
			e During 2009 Tax Yea			ral Deprecia	ation	Syste	·m			
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Red per		(e) Convention	(f) M	ethod	(g) Depreciation deduction			
19a	3-year property						1 -					
b	5-year property											
С	7-year property		875	. 7 Y	EARS	HY	S/	L	47.			
ď	10-year property	\neg					T					
е	15-year property											
f	20-year property											
8	25-year property	\exists		25)	/rs		S	S/L				
		/		27 5		ММ		5/L				
h	Residential rental property	/		27.5	•	ММ		5/L				
		/		39)		ММ	1	5/L				
i	Nonresidential real property	/			-	ММ	1	7L				
	Section C - Assets	Placed in Service	During 2009 Tax Year	Using the	Alterna				tem			
20a	Class life						S	5/L				
b				12)	/rs.			/L				
С		/	-	40)		ММ		/L	-			
	ert IV Summary (See instructions.))			-							
	Listed property. Enter amount from lin						\neg	21				
	Total. Add amounts from line 12, lines		es 19 and 20 in column	(a), and line	e 21.		ľ		<u> </u>			
	Enter here and on the appropriate line							22	1,247.			
	For assets shown above and placed in			_	7 11341							
	portion of the basis attributable to sec	_	Journal Four Giller the		23							
91625		2.1011 E00/1 00010	-						F 4500 (0000)			

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, completeonly 24a, 24b, columns (a)

	Section A	- Depreciati	on and Other In	formation (Cau	tion: See t	he instruc	ctions for li	mits for p	asseng	er automobiles)		
24a	Do you have evidence to s	support the bu	siness/investment	use claimed?	Yes	☐ No	24b If "Ye	es," is the	eviden	ce written?	Yes	No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only) (f) Recovery period Method Convention) od/	(h) Depreciation deduction	(i) Elected section 17 cost			
25	Special depreciation alle	owance for c	ualified listed pro	perty placed in	service du	ring the t	ax year an	ď				
	used more than 50% in	a qualified b	usiness use						25			
26	Property used more that	n 50% in a c	qualified business	s use:								
			%									
			%									
			%									
27	Property used 50% or le	ess in a qual	ified business us	e:								
			%	•	T			S/L·				
_			%	<u> </u>				S/L·				
			%					S/L·				
28	Add amounts in column	(h), lines 25	through 27. Ente	er here and on lir	ne 21, pag	e 1			28]	
29	Add amounts in column	(i), line 26. E	nter here and on	line 7, page 1						29		
				tion B - Informa	ation on U	se of Vel	nicles			· · · · · · · · · · · · · · · · · · ·		
Cor	nplete this section for ve	hicles used	by a sole proprie	tor, partner, or c	ther "more	than 5%	owner," c	r related	person	·		

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30	Total business/investment miles driven during the	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
	year (do not include commuting miles)	-											
31	Total commuting miles driven during the year	<u> </u>		}		<u> </u>	_	-					
32	Total other personal (noncommuting) miles	Ì											
	driven												
33	Total miles driven during the year.	l		l		{						{	
	Add lines 30 through 32												
34	Was the vehicle available for personal use	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-duty hours?												
35	Was the vehicle used primarily by a more										-		
	than 5% owner or related person?												
36	Is another vehicle available for personal					ļ				[[
	use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	Yes	No
	employees?		
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your		
	employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39	Do you treat all use of vehicles by employees as personal use?		
40	Do you provide more than five vehicles to your employees, obtain information from your employees about		
	the use of the vehicles, and retain the information received?		
41	Do you meet the requirements concerning qualified automobile demonstration use?		
	Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		
P	art VI Amortization		

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
2 Amortization of costs that begins duri	ng your 2009 tax year				
		····	<u></u>		
3 Amortization of costs that began before	43				
4 Total. Add amounts in column (f) See	44				