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## 990-EZ

## **Short Form Return of Organization Exempt From Income Tax**

2009

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black tung benefit trust or private foundation)

Sponsonng organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

Open to Public Inspection

A	For the	r the 2009 calendar year, or tax year beginning April 1 , 2009, and ending				M	arch	, 20 10			
В			Please	C Name of organization				D Employer identification		ication number	
	Address c	hange	ange use IRS label or Kettle Moraine Kennel Club Inc				39-6088048				
H	Name cha	_	ge print or Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Tel				E Telep	hone r	umb	er	
H	Initial returnate	13900 Pleacant Valley Pd				262-677-2213					
Ħ	Amended	return	Specific Instruc-	City or town, state or country, and	ZIP + 4			F Grou	F Group Exemption		
百		n pending	tions.	West Bend, WI 53095-9272				Num	ber	<b>▶</b>	
										<b>√</b>	Cash Accrual
a completed Schedule A (Form 990 or 990-EZ).  Other (specify									<b>&gt;</b>		
								<b>→</b> 🗸	if the organization is not		
										_	dule B (Form 990,
J Tax-exempt status (check only one) — ☐ 501(c) ( 4 ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 990-EZ, or 99									)-PF).		
K	K Check ▶ ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally <b>not</b> more than \$25,000. A									han \$25,000. A	
	Form 99	90-EZ or Form	n 990 rei	turn is not required, but if the o	rganization chooses to file a	a return, b	e sure to file	a compl	ete re	turn.	
L	Add lines	s 5b, 6b, and 7	b, to line	9 to determine gross receipts; if	\$500,000 or more, file Form 9	990 instea	d of Form 990	-EZ ▶		3	29709.94
Р	art I	Revenu	е, Ехр	enses, and Changes in	Net Assets or Fund E	Balance	s (See the	instruc	ction	s fo	r Part I.)
	1	Contribution	ons, gift	ts, grants, and similar amour	nts received				1		
	2	Program s	ervice r	evenue including governme	nt fees and contracts			[	2		29459.94
	3	Membersh	ip dues	and assessments				[	3		250.00
	4	Investment	t incom	e				[	4		
	5a	Gross amo	ount fro	m sale of assets other than i	inventory	5a		ſ			
	b	Less: cost	cost or other basis and sales expenses								
_	C	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here Gross revenue (not including freported on line 1)							5c		
Ĕ	6										
Revenue	а										
ě											
	b										
	С										
	7a										
	b	Less: cost	of good	ds sold		7b					
	С	France (1999) 11 11 11 11 11 11 11 11 11 11 11 11 11									
	8	Other revenue (describe ▶)							8		
	9	Total reve	nue. Ac	dd lines 1, 2, 3, 4, 5c, 6c, 7c	, and 8	<u> </u>		. ▶	9		29709.94
	10	Grants and similar amounts paid (attach schedule)							10		
	11	Benefits paid to or for members							11		
98	12	Salaries, other compensation, and employee benefits							12		
Bue	13	Professional fees and other payments to independent contractors							13		
Expenses	14	Occupancy, rent, utilities, and maintenance						SI - [	14		
Ш	''	Frinting, publications, postage, and shipping						위 . [	15		
	16	Other expenses (describe ► Annual show expenses, see Exhibit.1 (%)  Total expenses. Add lines 10 through 16						21)	16		33737.45
	17	Total expe	enses.	Add lines 10 through 16 .	<u> </u>	DEM	117	₹ ▶	17		
\$	18	EVC622 OI	(uencii)	TOT THE YEAR (SUBTRACT THE T	<i>i</i> iioiii iiile 5)			ا ، إ	18		(4027.51)
988	19	2 y 2 y 2 y 2 y 2 y 2 y 2 y 2 y 2 y 2 y									
Ž	end-of-year figure reported on prior year's return)								19		29906.22
Net Assets	20 Other changes in net assets or fund balance				s (attach explanation)		[	20			
	21			balances at end of year. Co			· · · · ·		21		25878.71
Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990								ad o			
_	(See the instructions for Part II.)  (A) Beginnin					·		(B) End of year			
2		Cash, savings, and investments				2990	6.22		25878.71		
2		Land and buildings						23			
24								24	0		
	<del></del>						6.22	_	25878.21		
21	· · · · · · · · · · · · · · · · · · ·							26	0		
2	, NE	: 4558(5 OF	runa D	manues une 27 of column (	D) must agree with line 2	<u> </u>	•	2990	6.22	27	25878.21

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

Part	Other Information (Note the statement requirements in the instructions for Part V.)					
			Yes	No		
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		1		
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes					
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.					
а	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		1		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		1		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36				
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0					
b	Did the organization file Form 1120-POL for this year?	37ь		✓		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	Į.		_		
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		<b>✓</b>		
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	1	j	1		
39	Section 501(c)(7) organizations. Enter:		}			
a	Initiation fees and capital contributions included on line 9	4				
b	Gross receipts, included on line 9, for public use of club facilities	4				
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶					
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		✓		
С	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					
е	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		1		
41	List the states with which a copy of this return is filed. ▶ None					
42a	The organization's books are in care of ▶ Tom Rich  Telephone no. ▶	262-67	7-221	3		
	Located at ► 3800 Pleasant Valley Rd, West Bend, WI ZIP + 4 ►	53095	-9272			
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		Yes	No		
	account)?	42b	ļ	✓		
	If "Yes," enter the name of the foreign country: ►  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		✓		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. 1	▶ □		
	and enter the amount of tax-exempt interest received or accrued during the tax year	-				
			Yes	No		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	. 53			
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		1		
		_ <del>70</del>	\ <u></u>			

Page	4

Part VI

cand 47 Did t 48 Is the 49a Did t b If "Ye 50 Comemple	501(c)(3) organizations and section 494 and complete the tables for lines 50 and the organization engage in direct or indirect didates for public office? If "Yes," complete the organization engage in lobbying activities e organization a school as described in section the organization make any transfers to an extes," was the related organization a section 5 applete this table for the organization's five his ployees) who each received more than \$100,000	political campaign activi Schedule C, Part I	ities on behalf of o	or in opposition to	46 47 48 49a 49b trustees	res s and	No
47 Did t 48 Is the 49a Did t b If "Ye 50 Comemple	the organization engage in lobbying activities e organization a school as described in section the organization make any transfers to an extens," was the related organization a section 5 applete this table for the organization's five his loyees) who each received more than \$100,0 lame and address of each employee paid more	s? If "Yes," complete Sch in 170(b)(1)(A)(ii)? If "Yes," empt non-charitable relat 27 organization? ghest compensated empl 000 of compensation fron (b) Title and average hours per week	complete Schedule ted organization?	officers, directors,	47 48 49a 49b trustees		
48 Is the 49a Did t b If "Ye 50 Com empl	e organization a school as described in section the organization make any transfers to an extes," was the related organization a section 5 aplete this table for the organization's five his loyees) who each received more than \$100,0 arms and address of each employee paid more	n 170(b)(1)(A)(ii)? If "Yes," empt non-charitable relat 27 organization? ghest compensated empl 000 of compensation fron (b) Title and average hours per week	complete Schedule ted organization?	officers, directors,	48 49a 49b trustees		
49a Did t b If "Ye 50 Com empl	the organization make any transfers to an exes," was the related organization a section 5 aplete this table for the organization's five his loyees) who each received more than \$100,0 are and address of each employee paid more	empt non-charitable related 27 organization? ghest compensated employo of compensation from (b) Title and average hours per week	ted organization?loyees (other than on the organization.	officers, directors,	49a 49b trustees		_
b If "Ye 50 Com empl	es," was the related organization a section 5 applete this table for the organization's five his alloyees) who each received more than \$100,0 lame and address of each employee paid more	27 organization? ghest compensated empl 000 of compensation fron (b) Title and average hours per week	loyees (other than on the organization.	officers, directors, t	49b trustees		<u> </u>
50 Com empl	replete this table for the organization's five his ployees) who each received more than \$100,0 lame and address of each employee paid more	ghest compensated empl 000 of compensation fron (b) Title and average hours per week	loyees (other than not the organization.	officers, directors,	trustees		<del>.                                    </del>
emp	oloyees) who each received more than \$100,0 larne and address of each employee paid more	000 of compensation from (b) Title and average hours per week	n the organization.				KA
	arme and address of each employee paid more	(b) Title and average hours per week			LCI IVU	116.	
		devoted to position			(e) Expense account and		
	al number of other employees paid over \$100						
	nplete this table for the organization's five I 0,000 of compensation from the organization (a) Name and address of each independent contractor	n. If there is none, enter "l	None."	ype of service	(c) Comp		
d Total	Il number of other independent contractors e	each receiving over \$100,0	000				
	Under penalties of perjury, I declare that I have examine and belief, it is true, correct, and complete. Declaration	ed this return, including accompa of preparer (other than officer) is	anying schedules and states to a seed on all information	atements, and to the bes	any know	:nowled	ige
ign	Signature of officer  Date  Tom Rich, Treasurer  8-13-201						
	Tom Rich, Treasurer			8-13-2010			
lere	Type or print name and title Preparer's	Date	Check if	8-13-2010 Preparer's identifying num	nber (See n	nstruction	ons)
lere Paid Preparer's	Type or print name and title  Preparer's signature  Firm's name (or	Date	self- employed ▶ [	1	nber (See a	nstructi	ons)
lere aid	Type or print name and title  Preparer's signature	Date	self- employed ▶ ☐	Preparer's identifying nun	nber (See r	nstructi	ons)

## Kettle Moraine Kennel Club Inc EIN: 39-6088048 Form 990 EZ

Part I, Line 16 Exhibit 1 Other Expenses

EX	D		ıc	=0	٠.
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Judges	\$10,785.32
Show Building Rental	14,808 60
Other Show Expenses	5,447.81
Insurance	600.00
AKC Delegate	814.62
General Administrative	1,281.10
Total Expenses	\$33,737.45