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#### 990 Form

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

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

OMB No 1545-0047

2009

Department of the Treasury

3 9 2010

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SCANNED

Open to Public Inspection

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				tax year beginning	EV TTONE CTUD	07-01 , 20	us, and end	ıııy		<del></del>			
		applicable	Please use IRS	C Name of organizationRAMSI	EI LIONS CLUB		<del></del>	- <u>-</u> -	[	Employer identification no.			
=	ddress o	-	label or	Doing Business As				<u></u>		23-7333631			
	ame cha	-	print or type.	Number and street (or P O b	ox if mail is not delivered	to street address)		Room/suite	l <sup>e</sup>	Telephone number (763) 422-9690			
	ntial retu		See Specific	P.O. BOX 771		<del> </del>							
_	erminate		Instruc- tions.	City or town, state or country,					ľ	Gross receipts			
一	mended			ANOKA, MN 55303-0			<del></del>	<del>.,</del>		\$ 6,035,731			
^	pplicatio	on pending		and address of principal officer OX 771, ANOKA, MN		AD		H(a) Is this	a group re	turn for Yes X No			
			<u> </u>	. 4	<u> </u>			7					
	ax-exem Vebsite:	-		LIONS.ORG	947(a)(1) or 527	· · · · · · · · · · · · · · · · · · ·		☐ If "No	ll affiliates ir o," attach a l	st (see instructions)			
		·		<del></del>	lou N		10	H(c) Group	· · · · · · · · · · · · · · · · · · ·	101			
_		organization X		Trust Association	Other •	L Year of f	formation ±3	77 M	State of lega	il domicile 224			
Pa		Summar Briefly descr		ganization's mission or mos	t significant activities	SERVICE	з то тне	COMMINI	יע אי	PROMOTING THE			
	'	•		TICE OF THE THEORY	<del>-</del>	-							
A C G		CITIZENS				<u> </u>							
t o													
l y V e	2	Check this b	oox 🏲 🗆 r	f the organization discontinu	ied its operations or	disposed of more	than 25% of	f its net asse	ets				
i r t n				bers of the governing body	-				1	35			
i a	4		_	nt voting members of the go	•	/I. line 1b)			<u> </u>	35			
e n s c	5		•	yees (Part V, line 2a) • •	• • •	•			5	48			
& e	6			eers (estimate if necessary					6				
_	1			ousiness revenue from Part	•				· · 7a	15,707			
	1	•		s taxable income from Form					7b	0			
	+							Pnor Ye		Current Year			
R e	8	8 Contributions and grants (Part VIII, line 1h)								3,564			
٧	9		_	nue (Part VIII, line 2g)					· · ·	0			
e n	10	<del>-</del>		art VIII, column (A), lines 3,			<b>⊢</b>		1,103	545			
u													
·	12			es 8 through 11 (must equa									
	13			ounts paid (Part IX, column					•	0			
_	14									0			
E x	15									0			
P e	16a	Professional	l fundraisir	ng fees (Part IX, column (A)	, line 11e) • • • •					0			
n	b	Total fundra	ising expe	nses (Part IX, column (D), I	ıne 25) ▶		0		. <u>.</u> ,				
s e	17	Other expen	ses (Part	IX, column (A), lines 11a-11	d, 11f-24f)		• • • •	17,420		12,861			
S	18	Total expens	ses Add I	ines 13-17 (must equal Par	t IX, colum <b>p</b> (A)(In	SED · · · ·		17,420		12,861			
	19	Revenue les	ss expense	es Subtract line 18 from lin	e 2		• • • •		(24,934	26,061			
Net					10 May 0	2 2010	В	eginning of Cu	rrent Year	End of Year			
Asset	5 20	Total assets	(Part X, Iı	ne 16) • • • • • • • • •	. I욱] .NOV .Q	8. KUIY. 131	• • • •		95,952	121,755			
Fund	21	Total liabilitie	•	•	·   ·   · · · · · · ·	······································				0			
Bal- ances	22	Net assets of	or fund bal	ances Subtract line 21 fror	n line 20 <b>OGD</b>	N.UT.			95,952	121,755			
Pa	rt II	Signatu	re Bloc	k									
				y, I declare that I have examined to ect, and complete. Declaration of p									
		and belief, it	is true, come	2	preparer (other than onc	er) is based on all mior	imation of white	on preparer na		•			
Sig	n	71	~ 8.	My/m	<del>-</del>					11-3-10			
Her	е	Signatu	re of officer						Da	te			
			hom	AS P. Kuj	AWA	64mb	18mg	MANA	90-				
		Type o	r print name	and title									
		Preparer's				Date	Check i		reparer's ide	entifying number			
Paid		signature self- employed					ed 🚩 🗀 🗎	_	_				
	arer's		/	April		10-27-2010			1006	13/80			
Use		Firm's name	e (or yours	JAMES L FRASER	<del></del>			EIN D		_			
	•	if self-employ	yed), //	7600 BASS LAKE					-1843				
				NEW HOPE, MN 55				T HOTE NO V	763-97				
May	the IRS	S discuss this	return wit	h the preparer shown above	e? (see instructions)					· · · X Yes No			

EEA

Form	n 990 (2009) RAMSEY LIONS CLUB	23-733363	Page 2
Pa	art III Statement of Program Service Accomplishments		_
1	Briefly describe the organization's mission		
	SERVICE TO THE COMMUNITY BY PROMOTING THE THEORY AND PRACTICE OF THE THEORY AND I	PRACTICE O	F
	THE PRINCIPLES OF GOOD GOVERNMENT AND CITIZENSHIP.		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	□ Vaa	X No
	If "Yes," describe these new services on Schedule O	· · · Yes	A NO
3	·		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	· · · TYes	X No
	If "Yes," describe these changes on Schedule O		110
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses		
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants an	ıd	
	allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a	(Code ) (Expenses \$ including grants of \$ ) (Revenue	\$ 1	9,570)
	SUPPORTED AND AIDED NUMEROUS ORGANIZATIONS, ACTIVITIES AND NEEDY INDIVIDUALS IN	SURROUNDIN	G
	COMMUNITIES IN THE AMOUNT OF \$97,019 FROM LAWFUL GAMBLING ACTIVITIES.		
4b		\$	6,126)
	RAISED FUNDS OF \$6,126 FOR NEEDY MEMBERS OF THE COMMUNITY WITH HAPPY DAYS ACTIVITY	FY.	
	· · · · · · · · · · · · · · · · · · ·		
			<u> </u>
	<del></del>	-	
4c	(Code ) (Expenses \$ 8,418 including grants of \$ ) (Revenue	\$	9,117)
	RAISED FUNDS FOR NEEDY FAMILIES IN THE COMMUNITY WITH A THRESHING SHOW, GOLF TOU		
	FAIR AND OTHER MISCELLANEOUS FUND RAISING.		
		· —	
4d	Other program services (Describe in Schedule O )		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
40	Total program service expenses 8.418		

Pa	rt 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		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	1		
	candidates for 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		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		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 credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		<u> X</u>
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,			
	VII, VIII, IX, or X as applicable · · · · · · · · · · · · · · · · · · ·	11	Х	
•	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		Х
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No			<del></del>
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		Х
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		Х
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		х
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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III • • • • • • • • • • • • • • • • •	19	Х	
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х

Par	t 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			
	ın the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>X</u>
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 Schedule K If "No," go to line 25	24a		<u>X</u>
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? ••••••••••••••••••••••••••••••••••••	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization 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	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
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?			ĺ
	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
С	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		İ	
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I · · · · · · · · · · · · · · · · · ·	31	ļ	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	١		
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
20	Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	35	<u> </u>	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
<b>^-</b>	organization? If "Yes," complete Schedule R, Part V, line 2	36		ļ —
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			
20		37	<del> </del>	X_
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	1

Par	t v Statements Regarding Other IRS Filings and Tax Compliance	<sub>7</sub>		
12	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		Yes	No
ıa	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 1b 0	ĺ		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
•	gaming (gambling) winnings to prize winners? • • • • • • • • • • • • • • • • • • •	1c		
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 ••••• 2a 48	İ		
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	х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	_
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		Х
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		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	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).			
а	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		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		
	required to file Form 8282?	7c		X
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?	7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		х
8	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 at any time during the year?	8		Х
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		Х
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter			<u> </u>
a	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities • • • • • • • • • • • • • • • • • • •			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders · · · · · · · · · · · · · · · · · · ·			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them ) · · · · · · · · · · · · · · · · · ·			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			l

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and Part VI for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Section A. Governing Body and Management Yes Nο 35 Enter the number of voting members of the governing body .............. 35 h Enter the number of voting members that are independent 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 Х Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a material diversion of the organization's assets? 6 Does the organization have members or stockholders? ............. Does the organization have members, stockholders, or other persons who may elect one or more members 7a 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code ) Yes 10a b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with those of the organization? Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11 11 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 Does the organization have a written conflict of interest policy? If "No," go to line 13 12a Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12¢ 13 13 Does the organization have a written whistleblower policy? .............. 14 Does the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization 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 16a 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 exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed MN 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 public inspection. Indicate how you make these available. Check all that apply Own website Another's website X Upon request 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the organization > ALLEN BERG (763) 422-9690

PO BOX 771 ANOKA, MN 55303-0771

# 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

Check this box if the organization did not compensate any current officer, director, or trustee

(A)	(B)	(C)				(D)	(E)	(F)		
Name and Title	Average	$\overline{}$	Position (check all that apply)		Reportable compensation	Reportable compensation	Estimated			
	hours per week	nri dur secteor de r al		O	e	H comployeest ed	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
GORDIE BERGER										
PRESIDENT	5.00			l x				c	0	0
DUANE LARSON										
1ST VICE PRESIDENT	5.00			Х						
ALLEN BERG										
2ND V.P./TREASURER	5.00			X			L			
BILL SUTHERLAND										
3RD VICE PRESIDENT	5.00			X						
LYLE HAGER										
DIRECTOR	5.00			X						
MARTIN SHINDEL										
DIRECTOR	5.00			X						
BILL WEISS										
DIRECTOR	5.00			X						
GARY LARSON										
DIRECTOR	5.00			X			l			
GARY MUNKHOLM										
DIRECTOR	5.00			X						
GLEN RYCHNER										
DIRECTOR	5.00			Х	_	<u> </u>	<u> </u>			
JOHN NIESWAAG										
TAIL TWISTER	5.00			Х	L					
FRANK FREDERICK										
ASSISTANT	5.00			X	L			1		
SUE WITBECK										
MEMBERSHIP	5.00			Х						
PATRICK CROWE										
SECRETARY	5.00			Х						
		<u> </u>		<u> </u>		<u> </u>	L			
	1	1	1	I	l	ł	I		1	

Pa	Irt VII Section A. Officers, Directors, Trustees,	T*	ees, ar	nd H			ompe	nsa			$\neg \vdash$		(E)	-
	(A) Name and Title	(B) Average	Posit	ion (r		C) call ti	hat appl	v)	(D) Reportable	(E) Reportable		Fs	(F) timated	
	Name and Tale	hours per week	ltd nri dur ise vtc iet deo ur ao Ir	i t nr su t s	Of f c e	K	H c employeest at ed	F	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC	)	comporgs	iount of other pensation the anization trelated inization	n j
		-							_	_				
								-						
								ļ			$\perp$		<del></del>	
			ļ								$\dashv$		•	
											$\perp$			
			ļ								$\perp$			
											_			
1b	Tatal						<u> </u>				0			0
2	Total			-				_	<u> </u>	1	<u> </u>			
_	reportable compensation from the organization			-,					• • • • • • • • • • • • • • • • • • • •		0			
													Yes	No
3	Did the organization list any former officer, director or employee on line 1a? If "Yes," complete Schedule J fe	-	-	-		-		•				_		
4	For any individual listed on line 1a, is the sum of repo									• • • • • • •	``}	3		X
•	the organization and related organizations greater that													
	ındıvıdual · · · · · · · · · · · · · · · · · · ·				-					• • • • • •	. [	4		<u> </u>
5	Did any person listed on line 1a receive or accrue cor	•		-			_						ŀ	
_	services rendered to the organization? If "Yes," comp	lete Schedul	e J for	such	n pe	rson	• •	• •	• • • • • • • • •	• • • • • •	<u>.                                    </u>	5	·	X
<u>5e</u> 1	ction B. Independent Contractors  Complete this table for your five highest compensated compensation from the organization	d independen	t contr	acto	rs th	nat re	eceive	d mo	ore than \$100,000	of				
	(A)						-		(B)				(C)	
	Name and business addre	ss							Description of	services			ensation	
									-					
		<del></del>												
2	Total number of independent contractors (including be	ut not limited	to thos	se lis	sted	abo	ve) wh	o re	ceived					
	more than \$100,000 in compensation from the organi													

Part VIII		Statement of Revenue						
					(A) Total revenue	(B)  Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512, 513, or 514
	1a	Federated campaigns	1a		-	-		
	ь	Membership dues · · · · · · · · · · · ·	1b	3,484				
Contn- butions, gifts,	C	Fundraising events	1c	-				
	d	Related organizations	1d					
grants and	е	Government grants (contributions) · ·	1e					
other similar	f	All other contributions, gifts, grants, and similar amounts not included above	1f	80				
amounts	g	Noncash contributions included in lines 1a-1f	F \$					
	h	Total. Add lines 1a-1f	<del></del>	$\cdots  ightharpoonup$	3,564			
			Busin	ess Code				
	2a							
_	b							
Program Service	С							
Revenue	d							
	е		_					
	f	All other program service revenue · · · · ·	· .		<del></del>			
	g	Total. Add lines 2a-2f · · · · · · · · ·		• • • •	-			<del></del>
	3	Investment income (including dividends, intereother similar amounts)			545			545
	4	Income from investment of tax-exempt bond p	roceeds	• • • •				
	5	Royalties · · · · · · · · · · · · · · · · · · ·		• • • • ▶				
		(i) Real	(11)	Personal				
	6a	Gross Rents · · · · · · ·						
	b	Less rental expenses · · · ·						
	С	Rental income or (loss) · · ·						
	d	Net rental income or (loss)		• • • ▶				
	7a	Gross amount from sales of (i) Securities	(11)	Other				
	'-	assets other than inventory	<u>`</u>					
	Ь	Less cost or other basis						
•	~	and sales expenses · · · ·	İ					
t t	С	Gain or (loss)						
h	d	Net gain or (loss)		• • • •				
e	8a	Gross income from fundraising	<u> </u>					
•	ŀ	events (not including \$						
R	ŀ	of contributions reported on line 1c)						
v		See Part IV, line 18 · · · · · · · · · · · · · · · · · ·	a	38,510				
е	b	Less direct expenses	ь	23,267				
n u	С	Net income or (loss) from fundraising events		• • • •	15,243	15,243		
e	9a	Gross income from gaming activities						
		See Part IV, line 19 · · · · · · · · · · · · · · · · · ·	a 5,	993,112				
	b	Less direct expenses · · · · · · · · · · · · · · · · · ·	b 5,	973,542				
	С	Net income or (loss) from gaming activities			19,570		15,707	3,863
		Gross sales of inventory, less returns and allowances			,			
	h	Less cost of goods sold · · · · · · · ·						
		Net income or (loss) from sales of inventory						
	11a	Miscellaneous Revenue	Busine	ess Code	}			
	l .		-					
	b		-					
	4	All other revenue	_	<del>.</del>		-		
		Total. Add lines 11a-11d						
					30 000	15.040	15 500	
	14	<b>Total revenue.</b> See instructions · · · · ·		• • • •	38,922	15,243	15,707	4,408

Part IX

#### IGENOUS CHOP

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). (A) Total expenses (B) Program service (D) Do not include amounts reported on lines 6b, Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses expenses general expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 · · · · · · · · Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . . . . . . . . . . . . Benefits paid to or for members - · · · · · · · · · · · Compensation of current officers, directors, trustees, and key employees ...... 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 . . . . . . . . . . . . . . . Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . . . 9 10 11 Fees for services (non-employees) а Legal b d Professional fundraising services See Part IV, line 17 • е Investment management fees . . . . . . . . . f g 12 Advertising and promotion . . . . . . . . . . . . 13 Office expenses . . . . . . . . . . . . . . . . . . 14 Information technology . . . . . . . 15 16 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 102 102 Conferences, conventions, and meetings · · · · 20 21 22 Depreciation, depletion, and amortization . . . . . . 238 238 23 Insurance ........... 1,359 1,359 24 Other expenses litemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below ) DUES PAID 2,115 2,115 REPAIRS 179 179 SUPPLIES 450 450 c CHARITABLE DONATIONS 8,418 8,418 d e All other expenses 12,861 8,418 4,443 Total functional expenses. Add lines 1 through 24f · · 0 25 Joint Costs. Check here ▶ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and 

Part X	Balance Sheet	(A)	<del>,                                    </del>	(B)
		(A) Beginning of year	<b> </b>	End of year
1	Cash - non-interest-bearing	76,801	1	65,164
2	Savings and temporary cash investments · · · · · · · · · · · · · · · · · · ·	11,581	2	51,949
3	Pledges and grants receivable, net	11,301	3	
	Accounts receivable, net		4	
4	la contraction de la contracti		4	
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II of Schedule L		ا ۽ ا	
		A=1,-4,	5	
6	Receivables from other disqualified persons (as defined under section			
A	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete  Part II of Schedule L		6	
S 7	Notes and loans receivable, net		7	<u></u> -
ė i	Inventories for sale or use	F 0F4	8	3,936
t 8		5,854	9	3,930
s 9	Prepaid expenses and deferred charges		<del>  9</del>  -	
10a	Land, buildings, and equipment cost or			
	other basis Complete Part VI of Schedule D · · · · · 10a 75,762	1 716	40.	706
	Less accumulated depreciation · · · · · · · · 10b 75,056	1,716	10c	706
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	<del></del>	13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11	05 050	15	101 755
16	Total assets. Add lines 1 through 15 (must equal line 34)	95,952	16	121,755
17	Accounts payable and accrued expenses	<del></del>	17	
18	Deferred revenue		18	
L 19	!		19	
a 20	Tax-exempt bond liabilities		20	
b 21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
22	Payables to current and former officers, directors, trustees, key			
!	employees, highest compensated employees, and disqualified			
1	persons Complete Part II of Schedule L		22	
e 23	Secured mortgages and notes payable to unrelated third parties · · · · · · · · · · · · · · · · · · ·		23	
s 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	<u>_</u>	26	0
	Organizations that follow SFAS 117, check here			
F	complete lines 27 through 29, and lines 33 and 34.			
u 27	Unrestricted net assets		27	
d   <sup>28</sup>	Temporarily restricted net assets		28	
В 29			29	
a	Organizations that do not follow SFAS 117, check here X			
l   a   30	and complete lines 30 through 34.			
n   J	Capital stock or trust principal, or current funds		30	
c 31	Paid-in or capital surplus, or land, building, or equipment fund	05.050	31	101 8
e 32 s 32	Retained earnings, endowment, accumulated income, or other funds	95,952	32	121,755
33	Total net assets or fund balances	95,952	33	121,755
34	Total liabilities and net assets/fund balances · · · · · · · · · · · · · · · · · · ·	95,952	34	121,755

	(2009)

RAMSEY LIONS CLUB

23-7333631

Page 12

Par	t XI	Financial Statements and Reporting			
				Yes	No
1	Acco	unting method used to prepare the Form 990 X Cash Accrual Other			
	if the	organization changed its methods of accounting from a prior year or checked "Other," explain in			
	Sche	dule O			
2a	Were	e the organization's financial statements compiled or reviewed by an independent accountant?	2a	Х	
b Were the organization's financial statements audited by an independent accountant?					X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of					
	the a	udit, review, or compilation of its financial statements and selection of an independent accountant?	2c		X_
	If the	organization changed either its oversight process or selection process during the tax year, explain in			
	Sche	dule O			
d	If "Ye	es" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issue	ed on a consolidated basis, separate basis, or both			
		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 S	Single Audit Act and OMB Circular A-133?	3a		Х
b	If "Ye	es," did the organization undergo the required audit or audits? If the organization did not undergo the	<u> </u>		
	requi	red audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

EEA

Form **990** (2009)

## **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.

2009

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990. ➤ See separate instructions.

Inspection

D 7\ k	MSEY LIONS CLUB		23-7333631					
	rt I Organizations Maintaining Donor Advised Funds or C	Ther Similar Funds of						
Fai	the organization answered "Yes" to Form 990, Part IV, line 6	Milet Sillillai Pullus Of	Accounts.					
	(a) Donor ad	weed funds	(b) Funds and other accounts					
1	Total number at end of year • • • • • • • • • • • • • • • • • • •	vised idilds	(b) I alias alia salisi associatio					
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 assi	ets held in donor advised						
_	funds are the organization's property, subject to the organization's exclusive leg		· · · · · · · · · · Yes No					
6	Did the organization inform all grantees, donors, and donor advisors in writing the							
	used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other							
	purpose conferring impermissible private benefit?							
Pai	int II Conservation Easements. Complete if the organization answer	ered "Yes" to Form 990, Part I	V, line 7					
1	Purpose(s) of conservation easements held by the organization (check all that a							
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically	y important land area					
	Protection of natural habitat	Preservation of a certified his	storic structure					
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a qualified conservation or	ontribution in the form of a cor	nservation					
	easement on the last day of the tax year							
			Held at the End of the Tax Year					
а	Total number of conservation easements		2a					
b	Total acreage restricted by conservation easements		2b					
C	Number of conservation easements on a certified historic structure included in (	a) • • • • • • • • • • • • • • • • • • •	2c					
d		• • • • • • • • • • • • • • •	2d					
3	Number of conservation easements modified, transferred, released, extinguished	d, or terminated by the organi	zation during					
	the tax year							
4	Number of states where property subject to conservation easement is located	<u> </u>						
5	Does the organization have a written policy regarding the periodic monitoring, in	spection, handling of						
	violations, and enforcement of the conservation easements it holds? • • • •		· · · · · · · · · · Yes No					
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing cons	ervation easements during the	e year					
_								
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conserva	tion easements during the year	ar					
	▶\$	roments of continu						
8	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? •••••••••••••••	ements of section	· · · · · · · · · · · · Yes · · No					
9	In Part XIV, describe how the organization reports conservation easements in it	s revenue and evnense state						
9	balance sheet, and include, if applicable, the text of the footnote to the organization							
	the organization's accounting for conservation easements	don's maneral statements the						
Da	ert III Organizations Maintaining Collections of Art, Histo	rical Treasures, or Otl	her Similar Assets					
ra	Complete if the organization answered "Yes" to Form 990, Part IV, line		iei Olilliai Assets.					
1a	If the organization elected, as permitted under SFAS 116, not to report in its rev		sheet works of					
	art, historical treasures, or other similar assets held for public exhibition, educat							
	provide, in Part XIV, the text of the footnote to its financial statements that desc	ribes these items						
b	If the organization elected, as permitted under SFAS 116, to report in its revenu	e statement and balance she	et works of art,					
	historical treasures, or other similar assets held for public exhibition, education,	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 treasures, or other sil							
	following amounts required to be reported under SFAS 116 relating to these ite							
а								
b	Assets included in Form 990, Part X • • • • • • • • • • • • • • • • • •	./	• • • • • • • • • • • • • • • • • • •					

					-					
	ule D (Form 990) 2009 RAMSEY LIONS CLU				<u>,                                    </u>		23-73336			age 2
	t III Organizations Maintaining	Collection	ns of A	<u> Art, Historical</u>	Treasures, or	<u>r Otł</u>	<u>ner Similar Ass</u>	sets (co	ntinue	<u>d)</u>
3	Using the organization's acquisition, accession,	and other re	cords, ch	eck any of the foll	lowing that are a sign	gnifica	ant use of its			
	collection items (check all that apply)	,								
а	Public exhibition	d [	=	or exchange prog	ırams					
b	Scholarly research	<b>e</b> [	Othe	·	<del></del>					
С	Preservation for future generations									
4	Provide a description of the organization's collection	ctions and ex	xplain hov	v they further the	organization's exer	npt pu	urpose in			
	Part XIV									
5	During the year, did the organization solicit or re									<b></b>
	assets to be sold to raise funds rather than to be							·   Y	es	No
Pai	Escrow and Custodial Arra Part IV, line 9, or reported an amoun	t on Form 9	90, Part )	(, line 21		to Fo	rm 990, 			
1a	Is the organization an agent, trustee, custodian								_	
	ıncluded on Form 990, Part X? • • • • • •		• • • •	• • • • • • •	• • • • • • • •		• • • • • • • •	· 📙 Y	es	No
b	If "Yes," explain the arrangement in Part XIV an	d complete	the follow	ing table	,				<u>-</u>	
							Amou	unt		
С	Beginning balance · · · · · · · · · · · · · · · · · · ·	• • • • • •	• • • •	• • • • • • •		1c				
d	Additions during the year • • • • • • • •					1d				
е	Distributions during the year • • • • • • •					1e				
f	Ending balance • • • • • • • • • • • • • • • • • • •					1f	<u></u>	paramy.		
2a	Did the organization include an amount on Form	ነ 990, Part <i>ነ</i>	(, line 213		• • • • • • • •	• • •	• • • • • • • •	· []Y	'es [	No
þ	If "Yes," explain the arrangement in Part XIV									
Pai	t V Endowment Funds. Complete	if the organi	zation an	swered "Yes" to F	orm 990, Part IV, I	ine 10	) 			
		(a) Curren	t year	(b) Prior year	(c) Two years bac	ck	(d) Three years back	(e) Fou	r years I	back
1a	Beginning of year balance			<u>-</u>						
þ	Contributions			<u>-</u>		_				
С	Net investment earnings, gains, and losses •									
d	Grants or scholarships					_	··-			
е	Other expenditures for facilities				ŀ					
_	and programs					-				
f	Administrative expenses				-					
9	End of year balance		i							
2	Provide the estimated percentage of the year er	nd balance h								
a	Board designated or quasi-endowment		. %							
b	Permanent endowment									
С	Term endowment ▶ %									
3a	Are there endowment funds not in the possession	on of the org	anization	that are held and	administered for the	ne				r
	organization by								Yes	No
	(i) unrelated organizations · · · · · · ·							3a(i)		-
_	(ii) related organizations · · · · · · · ·							3a(ii)		
b	If "Yes" to 3a(II), are the related organizations lis				• • • • • • • • •	• • •	• • • • • • • • • •	3b		
4	Describe in Part XIV the intended uses of the or	-								
Pai	rt VI Investments - Land, Buildi	ngs, and	Equip	nent. See Form	n 990, Part X, line 1	10				

. . . . . . . . . . . .

organization's liability for uncertain tax positions under FIN 48

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 valuate Cost or end-of-year marke	
Financial deriv	atives · · · · · · · · · · · · · · · · · · ·	•		
Closely-held e	quity interests	•		
Other				<del>-</del>
				-
				_
<del> </del>		-		
	<del></del>			·
		-		·
	<del></del>			
·				<del></del>
	b) must equal Form 990, Part X, col. (B) line 12.)			<del></del>
	27 mast oquat ( om ood) ( or ( ) ( ) ( ) ( ) ( )			
Part VIII	Investments - Program Related.	See Form 990, Part X, line 13		
	(a) Description of investment type	(b) Book value	(c) Method of valuat Cost or end-of-year marke	
				<del> </del>
				<u>.</u>
				<u></u>
-				
Total. (Column (	b) must equal Form 990, Part X, col (B) line 13 )			
Part IX	Other Assets. See Form 990, Part X, lin	e 15		
		) Description		(b) Book value
				•
<del></del>				
		· · · · · · · · · · · · · · · · · · ·		
		<del></del>		
Total (Column	(h) must sound Form 000 Bod V and (B) line	45.)		
	(b) must equal Form 990, Part X, col (B) line		• • • • • • • • • • • • • • •	<u> </u>
Part X	Other Liabilities. See Form 990, Part X,			
1	(a) Description of liability	(b) Amount	_	
Federal incom	e taxes		_	
			_	
			_	
			$\neg$	
			╡	
		<del>-</del>	$\dashv$	
			$\dashv$	
T-4-1 (A :	b) must equal Form 990. Part X. col. (B) line 25.)	<del></del>	$\dashv$	
	7 (27 )		Makamanta that	
4. FIN 48 F00	tnote In Part XIV, provide the text of the footno	te to the organization's financial s	statements that reports the	

ched	dule D (Form 990) 2009 RAMSEY LIONS CLUB	23-7333631	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statement	<u> </u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV )	8	
9	Total adjustments (net) Add lines 4 through 8	9	
0	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	7	
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV )	<b>-</b>	
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · · 4a		
b	Other (Describe in Part XIV )	<b>-</b>	
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expense	s per Return	
1	Total expenses and losses per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses · · · · · · · · · · · · · · · · · ·	<b>-</b>	
d	Other (Describe in Part XIV )		
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV )	-	
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	. 5	
Pa	rt XIV Supplemental Information		
	pplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b		
and :	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete		
his p	part to provide any additional information		
			<u>.</u>

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

## Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

See separate instructions.

OMB No 1545-0047 2009

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number 23-7333631 RAMSEY LIONS CLUB Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply Solicitation of non-government grants Mail solicitations Internet and email solicitations Solicitation of government grants Special fundraising events Phone solicitations d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fundraiser have (vi) Amount paid to (v) Amount paid to (i) Name of individual (ii) Activity (iv) Gross receipts or entity (fundraiser) custody or control of from activity (or retained by) (or retained by) contributions? fundraiser listed in organization col (i) Yes No 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

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			SEY LIONS CLUB			7333631 Page 2		
Pa	rt II		mplete if the organization a	nswered "Yes" to Form 990	, Part IV, line 18, or reporte	ed		
		more than \$15,000 on Form 99	(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events		
			HAPPY DAYS	THRESHING	4	Add col (a) through		
R e			(event type)	(event type)	(total number)	col (c))		
v e	1	Gross receipts · · · · · · ·	7,746	15,070	15,694	38,510		
n	2	Less Charitable	<u> </u>					
u e		contributions · · · · · · · ·						
	3	Gross revenue (line 1						
		minus line 2) · · · · · · · · ·	7,746	15,070	15,694	38,510		
D	4	Cash prizes · · · · · · · · · · · ·						
L I	5	Non-cash prizes · · · · · · ·				·		
e c t	6	Rent/facility costs · · · · · ·						
E	7	Food and beverages · · · · ·						
p e n	8	Entertainment • • • • • • • • • • • • • • • • • • •						
s e s	9	Other direct expenses · · · · ·	1,620	8,199	13,448	23,267		
	10	Direct expense summary Add lines	s 4 through 9 in column (d)			( 23,267 )		
	11	Net income summary Combine line	e 3, column (d), and line 10			15,243		
Pa	<u>rt II</u>			to Form 990, Part IV, line	19, or reported more			
В		than \$15,000 on Form 990-E2	Z, line 6a					
Resecue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))		
	1	Gross revenue · · · · · · · · ·	87,040	5,901,512	4,560	5,993,112		
Direct	2	Cash prizes · · · · · · · · · · · · · · · · · · ·	64,675	4,913,592	3,040	4,981,307		
	3	Non-cash prizes · · · · · ·						
<b>Шхоес»е»</b>	4	Rent/facility costs · · · · · ·		69,588		69,588		
s e	_	Other direct expenses	18,502	903,963	182	922,647		
5	5	Other direct expenses · · · ·	18,302 %	Yes %	Yes %	322,047		
	6	Volunteer labor	X No	X No	X No			
	7	Direct expense summary Add lines 2 through 5 in column (d)				( 5,973,542 )		
	8	Net gaming income summary Com	nbine line 1, column (d), an	d line 7		19,570		
	_			ities MN,		Yes No		
9 a		ter the state(s) in which the organiza the organization licensed to operate :	9a X					
b		No," Explain	garring activities in each of	These states		3u X		
	_							
10a		ere any of the organization's gaming Yes," Explain	licenses revoked, suspend	ed or terminated during the	tax year?	· · · · 10a X		
E.	_	TOO, Explain		····				

Does the organization operate gaming activites with nonmembers?

formed to administer charitable gaming?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity

Sched	ule G (Form 990 or 990-EZ) 2009 RAMSEY LIONS CLUB 23-73336	31	Pa	age 3
			Yes	No
13	Indicate the percentage of gaming activity operated in			
а	The organization's facility · · · · · · · · · · · · · · · · · · ·			
b	An outside facility • • • • • • • • • • • • • • • • • • •		1	
14	Provide the name and address of the person who prepares the organization's gaming/special events books			
	and records			
	Name ► TOM KUJAWA			
	Address ► P.O. BOX 771 ANOKA, MN 55303-0771			
15a	, ,			
	revenue? · · · · · · · · · · · · · · · · · · ·	15a		<u>X</u>
b	If "Yes," enter the amount of gaming revenue received by the organization  \$\bigs\\$ and the			
	amount of gaming revenue retained by the third party > \$			
С	If "Yes," enter name and address			
	Name ▶			
	Address >			
16	Gaming manager information			
	Name ► TOM KUJAWA			
	Gaming manager compensation ▶ \$ 46,785			
	Description of services provided HIRING, KEEP BOOKS, OVERSEE OPERATIONS			
	Director/officer X Employee Independent contractor			
17	Mandatory distributions			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license? • • • • • • • • • • • • • • • • • • •	17a		X
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent			
	in the organization's own exempt activities during the tax year > \$	L		

#### **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.

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

Open to Public Inspection Employer identification number

RAMSEY LIONS CLUB	23-7333631				
01. Members or stockholder classes and rights (Part VI, line 6)					
NLY ONE CLASS OF MEMBERS. ALL HAVE VOTING RIGHTS.					
02. Member election for additional members (Part VI, line 7a)					
ALL MEMBERS MAY VOTE ON ADMISSIONS OF ANY NEW MEMBERS.					
<del></del>					
03. Governing body decisions (Part VI, line 7b)					
MEMBERS MAY VOTE ON MOTIONS MADE BY GOVERNING BODY.					
04. Form 990 governing body review (Part VI, line 11)					
FORM 990 MADE AVAILABLE FOR REVIEW AT MEMBER MEETING.					
05. Governing documents, etc, available to public (Part VI, line 19)					
AVAILABLE TO PUBLIC UPON REQUEST.					