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# Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2009

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service

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

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

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

**A For the 2009 calendar year, or tax year beginning** **July 1**, **, 2009, and ending** **June 30**, **, 2010**

<b>B</b> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>Astronomical Society of Kansas City</b> Number and street (or P O box, if mail is not delivered to street address) <b>P.O. Box 400</b> City or town, state or country, and ZIP + 4 <b>Blue Springs, MO 64013</b>	<b>D</b> Employer Identification number <b>44-6010775</b> <b>E</b> Telephone number <b>816-472-7788</b> <b>F</b> Group Exemption Number ►
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• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**G** Accounting Method  Cash  Accrual  
Other (specify) ►

**I** Website: ► **ASKC.ORG**

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

**J** Tax-exempt status (check only one) —  501(c) ( 3 ) ▶ (insert no.)  4947(a)(1) or  527

**K** Check ►  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$

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

1 Contributions, gifts, grants, and similar amounts received . . . . . 2 Program service revenue including government fees and contracts . . . . . 3 Membership dues and assessments . . . . . 4 Investment income . . . . . 5a Gross amount from sale of assets other than inventory . . . . . b Less: cost or other basis and sales expenses . . . . . c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . . 6 Special events and activities (complete applicable parts of Schedule G if any amount is from gaming, check here ► <input type="checkbox"/> ) a Gross revenue (not including \$ . . . . . of contributions reported on line 1) . . . . . b Less: direct expenses other than fundraising expenses . . . . . c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . . . 7a Gross sales of inventory, less returns and allowances . . . . . b Less: cost of goods sold . . . . . c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . . 8 Other revenue (describe ► <b>Advertising</b> ) . . . . . <b>9 Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 . . . . . ►	1 <b>22,772.00</b> 2 <b>9,092.00</b> 3 <b>9,925.00</b> 4 <b>64.00</b> 5a <b>RECEIVED</b> 5b <b>5c</b> 6a <b>6b</b> 6c <b>6c</b> 7a <b>798.00</b> 7b <b>381.00</b> 7c <b>417.00</b> 8 <b>28.00</b> 9 <b>42,298.00</b> 10 <b>10</b> 11 <b>11</b> 12 <b>12</b> 13 <b>13</b> 14 <b>8,959.00</b> 15 <b>4,700.00</b> 16 <b>20,094.00</b> 17 <b>33,753.00</b> 18 <b>8,545.00</b> 19 <b>103,858.00</b> 20 <b>20</b> 21 <b>112,403.00</b>
<b>Part II Balance Sheets.</b> If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.	
(See the instructions for Part II.)	
22 Cash, savings, and investments . . . . . 23 Land and buildings . . . . . 24 Other assets (describe ► . . . . .) <b>25 Total assets</b> . . . . . <b>26 Total liabilities</b> (describe ► . . . . .) <b>27 Net assets or fund balances</b> (line 27 of column (B) must agree with line 21) . . . . .	(A) Beginning of year <b>18,567.00</b> 22 <b>13,440.00</b> <b>100,291.00</b> 23 <b>101,589.00</b> <b>24</b> <b>118,291.00</b> 25 <b>115,029.00</b> <b>15,000.00</b> 26 <b>2,626.00</b> <b>103,858.00</b> 27 <b>112,403.00</b> (B) End of year



**Part V Other Information** (Note the statement requirements in the instructions for Part V.)

	<b>Yes</b>	<b>No</b>
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .	33	✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes . . . . .	34	✓
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? . . . . .	35a	✓
b If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	35b	✓
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .	36	✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► <b>37a</b> -0-		
b Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	37b	✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? . . . . .	38a	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	38b	2,500
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 . . . . .	39a	
b Gross receipts, included on line 9, for public use of club facilities . . . . .	39b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► -0- ; section 4912 ► -0- ; section 4955 ► -0-		
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 . . . . .		✓
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ►		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ►		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. . . . .		
41 List the states with which a copy of this return is filed. ►		
42a The organization's books are in care of ► <b>Jason Forst</b> Telephone no. ► <b>913-441-5768</b> Located at ► <b>5214 Round Prairie, Shawnee, Kansas</b> ZIP + 4 ► <b>66226</b>		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .		
If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .	42b	✓
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . . If "Yes," enter the name of the foreign country: ►		✓
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ► <b>43</b> □		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	44	✓
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	✓

**Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	Yes	No
46	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	46	✓
47	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	47	✓
48	Did the organization make any transfers to an exempt non-charitable related organization?	48	✓
49a	b If "Yes," was the related organization a section 527 organization?	49a	✓
49b		49b	✓
50	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."		

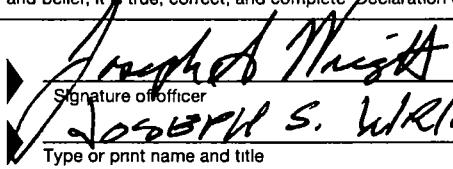
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None	None	None	None	None	None

f Total number of other employees paid over \$100,000 ►

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

	(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None	None	None	None

d Total number of other independent contractors each receiving over \$100,000 ►

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
	 Signature of officer	 Date	
	Joseph S. WRIGHT PRESIDENT		
	Type or print name and title		

Paid Preparer's Use Only	Preparer's signature ►	Date	Check if self- employed ► <input type="checkbox"/>	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ►		EIN ►	
			Phone no ►	

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

**SCHEDULE A**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**Astronomical Society of Kansas City**

Employer identification number

**44 6100775**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).  
 2  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)  
 3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).  
 4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. \_\_\_\_\_  
 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)  
 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  
 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)  
 8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)  
 9  An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)  
 10  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  
 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.  
 a  Type I      b  Type II      c  Type III—Functionally integrated      d  Type III—Other  
 e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).  
 f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box   
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?   
 (ii) A family member of a person described in (i) above?   
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?

h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		✓
11g(ii)		✓
11g(iii)		✓

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?	(vii) Amount of support
				Yes	No		
<b>Total</b>							

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**  
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)
**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 <b>Total.</b> Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 <b>Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 <b>Total support.</b> Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)					12	
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b>						► <input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a <b>33½% support test—2009.</b> If the organization did not check the box on line 13, and line 14 is 33½% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization		► <input type="checkbox"/>
b <b>33½% support test—2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33½% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization		► <input type="checkbox"/>
17a <b>10%-facts-and-circumstances test—2009.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>
b <b>10%-facts-and-circumstances test—2008.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		► <input type="checkbox"/>
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		► <input type="checkbox"/>

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**  
 (Complete only if you checked the box on line 9 of Part I.)
**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	17,845	26,803	16,261	44,172	32,697	137,778
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . . .	7,729	5,705	17,978	16,115	9,092	56,619
3 Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .	13,600	13,600	13,600	13,600	13,600	68,000
<b>6 Total.</b> Add lines 1 through 5 . . . . .	<b>39,174</b>	<b>46,108</b>	<b>47,839</b>	<b>73,887</b>	<b>55,389</b>	<b>262,397</b>
7a Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . . .						
c Add lines 7a and 7b . . . . .						
<b>8 Public support</b> (Subtract line 7c from line 6) . . . . .						<b>262,397</b>

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6 . . . . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	480	30	316	66	64	956
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
c Add lines 10a and 10b . . . . .	480	30	316	66	64	956
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .	<b>480</b>	<b>30</b>	<b>316</b>	<b>66</b>	<b>64</b>	<b>956</b>
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) . . . . .	15	100.00	%
16 Public support percentage from 2008 Schedule A, Part III, line 15 . . . . .	16	100.00	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . . . . .	17	.04	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17 . . . . .	18	.04	%
19a <b>33 1/3 % support tests—2009.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>			
b <b>33 1/3 % support tests—2008.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization ► <input type="checkbox"/>			
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>			

**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

**SCHEDULE L**  
(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**

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**Name of the organization**

**Employer identification number**

44 ; 6100775

## Part I Excess Benefit Transactions

**Part I** **Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).** Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ.

Complete if the organization answered Yes on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(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 . . . . . ► \$ \_\_\_\_\_

**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?		(f) Approved by board or committee?	(g) Written agreement?
	To	From			Yes	No		
David Young	✓		15,000	2,500	✓	✓	✓	
<b>Total</b>				► \$				

**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

## Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Complete in the organization and/or its affiliated organizations, foundations, and units, if any.				
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?
				Yes      No

**Astronomical Society of Kansas City**  
P.O. Box 400  
Blue Springs, MO 64013

For tax year beginning July 1, 2009 and ending June 30, 2010

44-6010775

**Part I, Line 16 Other Expenses**

Bank Charges	\$ 2.50
Prizes	166.54
Meeting Expenses	269.40
Office Supplies - Memberships	140.52
Advertising	386.70
Dues & Subscriptions	1,825.43
Books/Reference Materials	52.35
Miscellaneous	264.18
Office Supplies	216.20
Supplies	216.33
Postage - general	20.61
P.O. Box Rental	176.00
Insurance	8,658.06
Speaker Fees	200.00
HOASP Expense	6,696.39
Interest Expenses	<u>803.28</u>
Total Other Expenses	<u><u>\$20,094.49</u></u>

**Part I & Part III, Statement of Program Service Accomplishments**

Line 28: The Astronomical Society of Kansas City ("ASKC") owns and operates Powell Observatory, a semi-public observatory located in Louisburg, Kansas. Powell Observatory is located on a 1 acre site rented from the City of Louisburg for \$1.00 per year. Powell Observatory was constructed in 1984 with a grant from the Powell Family Foundation. While the value of Powell Observatory is not recorded on the books of the ASKC, it is insured for \$200,000. Powell Observatory is utilized for public events where it is open to the public each Saturday evening from May through October. Members provide staffing on a volunteer basis. Powell Observatory is also available for reservation other nights of the year. Student groups and boy and girl scouts are frequent reservers. During the fiscal year, Powell Observatory was visited by 4,718 adults and children during these events. A donation is requested but not mandatory. Donations included in Line 2, Part I for Program Service Revenue were \$10,491. Expenses were not directly allocated to this program.

Line 29: Powell Observatory is the home of Observatory 649, registered with the Minor Planet

Center, at Harvard University. Teams of members on clear nights locate and find Near Earth Asteroids and report their location to the Minor Planet Center. Equipment utilized include the 30" Ruisinger Telescope located at Powell Observatory and an Apogee AP-8P CCD camera purchased from the proceeds of a grant from the National Aeronautics and Space Administration ("NASA") received in approximately 2000. In 2001, Powell Observatory was the No. 2 observatory in the world in locating Near Earth Objects (NEO's) (and reporting them to the Minor Planet Center, at Harvard). There is no program service revenue for this program and no expenses were allocated.

Line 30: The members of the ASKC also assist school groups with their science nights. Typically a grade school, middle school or high school in the metropolitan area calls and requests that one or more members assist with their science nights. This occurs on about 30-40 evenings and from 1 to 10 members at each of those events bring their telescopes to the school parking lot and set them up for the students to view astronomical objects. Approximately 2,275 students, parents and teachers were shown the night sky by club members during the fiscal year. While occasionally donation revenue occurs as a result of these school science nights, the revenue is combined with the Powell Observatory revenue and no expenses are allocated either. Members pay their own expenses of travel and attendance.

Line 31: The Astronomical Society of Kansas City owns a 40 acre site near Butler, Missouri. The site is utilized for member education and observations and for the Heart of America Star Party. (HOASP) Approximately 120 astronomers from 8 to 10 states attended the HOASP. Educational speakers from local and regional universities spoke and educated the astronomers in attendance. Program service revenue during the fiscal year was approximately \$9,091 and expenses from this event were approximately \$6,996.

#### Part IV, List of Officers and Directors:

##### Officers

	(b) Time	(c) Compensation	(d) Benefit Plans	(e) Expenses Acct
Joseph Wright, President 28019 NE 177 <sup>th</sup> St. Lawson, MO 64062	As Req'd	None	None	None
Rick Henderson, Vice President 2211 W. 120 <sup>th</sup> Terrace Leawood, KS 66209	As Req'd	None	None	None
David Brackey, Recording Secretary 9589 Perry Lane Overland Park, KS 66212	As Req'd	None	None	None

Jason Forst, Treasurer 5214 Round Prairie Shawnee, KS 66216	As Req'd	None	None	None
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Directors

William Boyle 711 Fairview Independence MO	John Benz 9201 Legler Cir, Apt 416 Lenexa, KS 66219	Pat Gruenke 5118 McCoy St. Shawnee, KS 66226
Michael Stewart 1100 Wellington Drive Leavenworth, KS 66048	Charles Kennedy 6223 N. Indiana Ave. Kansas City, MO 64119	Paul Macek 35812 Spring Valley Rd. Paola, KS 66071
Jay Manifold 10040 Charlotte Kansas City, MO 64131	Denise Moser 6153 Charlotte Street Kansas City, MO 64110	Paul Thompson 15285 Newton Drive Overland Park, KS 66223
Debbie Harrelson 621 W. Grandiver St. Clinton, MO 64735	Twyla Forst 5214 Round Prairie Shawnee, KS 66216	Tom Martinez 25212 Lone Pine Dr. Cleveland, MO 64734
Dick Trentman 6917 W. 101 <sup>st</sup> Terrace Overland Park, KS 66212	Derrick Gray 204W. Redwood Street Archie, MO 64725	Steve King 14950 W. 123 <sup>rd</sup> Circle Olathe, KS 66062
Marcia Young 7311 Stearns Street Shawnee, KS 66203		

\*\*\*All the above officers listed above are directors as well. Further, all past presidents of the ASKC are directors if in attendance.\*\*\*

Schedule A Line 5: Value of Services or Facilities Furnished by a Governmental Unit without Charge

The ASKC utilizes for its general meetings, rooms furnished by the University of Missouri at Kansas City with an estimated value of \$2,400. It is provided a meeting room by Rockhurst University for its board of director meetings with an estimated value of \$1,200. It receives from the City of Louisburg, Kansas, for a rental of \$1.00 per year, the site upon which Powell Observatory sits at an estimated value of \$10,000 per annum.

Schedule L, Transactions with Interested Persons

Part II. Loans to and/or from Interested Persons:

In May, 2009, the Astronomical Society of Kansas City borrowed the sum of \$15,000 from a past president of the club, David Young. Mr. Young charged the organization the same interest rate that he was receiving on a money market account of his own. The purpose was to complete the payment for the building being constructed on the ASKC's property. The loan was discussed and approved by a disinterested majority of the board of directors with Mr. Young and his spouse not participating in the discussion or vote. The loan is not in default and was evidenced by a written promissory note. Since the time of the loan, ASKC has repaid \$12,500 of the \$15,000 balance.