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Short Form

Return of Organization Exempt From Income Tax

Form 990-EZ

Department of the Treasury
Internal Revenue Service

OMB No 1545-1150

2009

Open to Public
Inspection

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 **SEP 1, 2009** and ending **AUG 31, 2010**

B Check if applicable Address change Name change Initial return Terminated Amended return Application pending	C Name of organization KANSAS PEACE OFFICERS ASSOCIATION C/O AL THIMMESCH	D Employer identification number 48-6112862
	Number and street (or P.O. box, if mail is not delivered to street address) 2614 LANDON	E Room/suite 316-722-8433
	City or town, state or country, and ZIP + 4 WICHITA, KS 67205-2038	F Group Exemption Number ►

• 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: ► **WWW.KPOA.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)(4) (insert no.) 4947(a)(1) or 527

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

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ ► **\$ 328,264.**

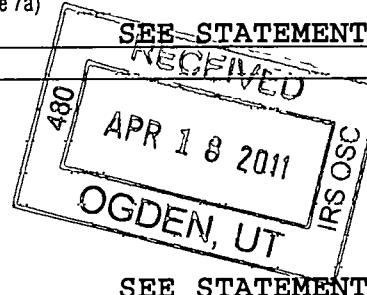
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

1 Contributions, gifts, grants, and similar amounts received	1	43,020.
2 Program service revenue including government fees and contracts	2	
3 Membership dues and assessments	3	52,560.
4 Investment income	4	8,688.
5a Gross amount from sale of assets other than inventory	STMT 3	5a 216,448.
b Less: cost or other basis and sales expenses		5b 212,149.
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	4,299.
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)	6a	
b Less: direct expenses other than fundraising expenses	6b	
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	
7a Gross sales of inventory, less returns and allowances	7a	
b Less: cost of goods sold	7b	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8 Other revenue (describe ►	8	7,548.
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	116,115.
10 Grants and similar amounts paid (attach schedule)	10	
11 Benefits paid to or for members	11	11,000.
12 Salaries, other compensation, and employee benefits	12	29,750.
13 Professional fees and other payments to independent contractors	13	5,105.
14 Occupancy, rent, utilities, and maintenance	14	4,800.
15 Printing, publications, postage, and shipping	15	3,862.
16 Other expenses (describe ►	16	66,773.
17 Total expenses. Add lines 10 through 16	17	121,290.
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-5,175.
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	362,386.
20 Other changes in net assets or fund balances (attach explanation)	20	17,793.
21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	375,004.

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	362,386.	22 375,004.
23 Land and buildings		23
24 Other assets (describe ►		24
25 Total assets	362,386.	25 375,004.
26 Total liabilities (describe ►	0.	26 0.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	362,386.	27 375,004.

RECEIVED
MAY 03 2011
REVENUE
EXPENSES



SEE STATEMENT 1)

SEE STATEMENT 2)

KANSAS PEACE OFFICERS ASSOCIATION

Form 990-EZ (2009)

C/O AL THIMMESCH

48-6112862

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Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

What is the organization's primary exempt purpose? **SEE STATEMENT 7**

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28 PROVIDED SCHOLARSHIPS TO STUDENTS INTERESTED IN LAW ENFORCEMENT

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

(Grants \$) If this amount includes foreign grants, check here ► 28a 14,000.

29 EDUCATED MEMBERS AND KEPT THEM INFORMED ABOUT EVENTS OF
THE ASSOCIATION THROUGH AN ANNUAL CONVENTION, SPECIAL
MEETINGS AND ASSOCIATION MAGAZINE

(Grants \$) If this amount includes foreign grants, check here 29a 13,024.

**30 PROVIDED DEATH BENEFITS TO FAMILIES OF FULL TIME LAW
ENFORCEMENT OFFICERS WHO WERE MEMBERS OF THE ASSOCIATION**

(Grants \$) If this amount includes foreign grants, check here 30a 11,000.

31 Other program services (attach schedule) SEE STATEMENT 8

(Grants \$) If this amount includes foreign grants, check here ► 31a 4,114.

32 Total program service expenses (add lines 28a through 31a)

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	to employee benefit plans & deferred compensation	(e) Expense account and other allowances
SEE STATEMENT 6		29,750.		

KANSAS PEACE OFFICERS ASSOCIATION
 Form 990-EZ (2009) **C/O AL THIMMESCH**

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Page 3

Part V 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	<input checked="" type="checkbox"/>
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	<input checked="" type="checkbox"/>
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?		
b If "Yes," has it filed a tax return on Form 990-T for this year?		
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Sch. N		
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► <u>37a</u> <u>0.</u>		
b Did the organization file Form 1120-POL for this year?		
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?		
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	<input type="checkbox"/>
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a	<input type="checkbox"/>
b Gross receipts, included on line 9, for public use of club facilities	39b	<input type="checkbox"/>
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:		
section 4911 ► <u>N/A</u> ; section 4912 ► <u>N/A</u> ; section 4955 ► <u>N/A</u>		
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	40b	<input type="checkbox"/>
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization	0.	<input type="checkbox"/>
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	0.	<input type="checkbox"/>
41 List the states with which a copy of this return is filed. ► <u>NONE</u>		
42a The organization's books are in care of ► <u>AL THIMMESCH</u> Located at ► <u>2614 LANDON, WICHITA, KS</u>	Telephone no. ► <u>316-722-8433</u>	ZIP + 4 ► <u>67205-2038</u>
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: ► <u>See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts</u>		
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: ► <u> </u>		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year	43	<input type="checkbox"/> <u>N/A</u>
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>

Form 990-EZ (2009)

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.

- | | Yes | No |
|--|-----|----|
| 46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 46 | |
| 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II | 47 | |
| 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 48 | |
| 49a Did the organization make any transfers to an exempt non-charitable related organization? | 49a | |
| b If "Yes," was the related organization a section 527 organization? | 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 N/A	(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

- 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."

N/A

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

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	4-5-11	Date
► AL THIMMESCH, SECRETARY / TREASURER			Type or print name and title

Paid Preparer's Use Only	Preparer's signature ►	Date	Check if self-employed ►	Preparer's identifying number (See instr.)
	JAMES D. COOPER, CPA	03/28/11		
	Firm's name (or yours if self-employed). address, and ZIP + 4 ►	KIRKPATRICK, SPRECKER & CO., LLP 311 S. HILLSIDE WICHITA, KS 67211-2130		EIN ► Phone ► no. (316) 685-1411

May the IRS discuss this return with the preparer shown above? See instructions

► Yes No

Form 990-EZ (2009)

FORM 990-EZ

OTHER EXPENSES

STATEMENT 1

DESCRIPTION	AMOUNT
LEGISLATIVE EXPENSE	13,825.
SCHOLARSHIPS	14,000.
INVESTMENT ADVISORY FEES & BANK CHARGES	6,289.
CONVENTION EXPENSE	5,546.
SPECIAL MEETINGS	4,473.
WEB & TELEPHONE	5,882.
OFFICE EXPENSE	5,592.
TRAINING EXPENSES	4,114.
PAYROLL TAXES	2,417.
DONATIONS	1,500.
MAGAZINE CHARGES	3,005.
REFUNDS	130.
TOTAL TO FORM 990-EZ, LINE 16	66,773.

FORM 990-EZ

OTHER REVENUE

STATEMENT 2

DESCRIPTION	AMOUNT
CONVENTION RECEIPTS	2,865.
MISCELLANEOUS INCOME	4,683.
TOTAL TO FORM 990-EZ, LINE 8	7,548.

FORM 990-EZ

GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES

STATEMENT 3

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
VARIOUS INVESTMENT SECURITIES	216,448.	212,149.	0.	4,299.
TO FORM 990-EZ, LINE 5	216,448.	212,149.	0.	4,299.

FORM 990-EZ OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 4

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENTS	17,793.
TOTAL TO FORM 990-EZ, LINE 20	17,793.

FORM 990-EZ

INFORMATION REGARDING TRANSFERS
ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

STATEMENT 5

- A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT? [] YES [X] NO
- B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [] YES [X] NO

FORM 990-EZ

PART IV - LIST OF OFFICERS, DIRECTORS,
TRUSTEES AND KEY EMPLOYEES

STATEMENT 6

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
AL THIMMESCH 2614 LANDON, WICHITA, KS 67205	SECRETARY- TREASURER 20.00	29,750.	0.	0.
STEVE HOLMES, PRATT POLICE DEPT - 303 S. OAK ST, PRATT, KS 67124	PRESIDENT & GOVERNOR AT LA 0.00	0.	0.	0.
STEVE CULP, KANSAS CPOST - 1999 N. AMIDON #350, WICHITA, KS 67203	PRESIDENT-ELECT 0.00	0.	0.	0.
KEITH RATHER, KS DEPT OF WILDLIFE & PARKS - BOX 777, CHANUTE, KS 66720	VICE PRESIDENT & GOVERNOR- 0.00	0.	0.	0.
LARRY THOMAS, KANSAS BUREAU OF INVESTIGATION (RETIR, TOPEKA, KS	IMMEDIATE PAST PRESIDENT 0.00	0.	0.	0.
HOWARD KAHLER, MARION POLICE DEPT - 112 N. FIFTH ST, MARION, KS 66861	GOVERNOR AT LARGE 0.00	0.	0.	0.
SAM BRESHEARS, KANSAS CITY, KS POLICE DEPT - 700 MIN, KANSAS CITY,	GOVERNOR AT LARGE 0.00	0.	0.	0.
CARL ALVANO, JOHNSON COUNTY SHERIFF'S OFFICE - 277, NEW CENTURY,	GOVERNOR - DISTRICT 1 0.00	0.	0.	0.
THOMAS MCGILLIN, OLATHE POLICE DEPT - 501 E. OLD 56 HW, OLATHE, KS 66061	GOVERNOR - DISTRICT 1 0.00	0.	0.	0.
CHUCK MATTHEWS, BNSF RAILROAD - 2341 ARGENTINE BLVD, KANSAS CITY, KS	GOVERNOR - DISTRICT 1 0.00	0.	0.	0.
HERMAN JONES, KANSAS HIGHWAY PATROL - 122 S.W. 7TH, TOPEKA, KS 66603	GOVERNOR - DISTRICT 2 0.00	0.	0.	0.
DON BURNS, SHAWNEE COUNTY SHERIFF'S DEPT - 320 S, TOPEKA, KS 66603	GOVERNOR - DISTRICT 2 0.00	0.	0.	0.
MIKE HEFFRON, EMPORIA POLICE DEPT - 518 MECHANIC ST, EMPORIA, KS 66801	GOVERNOR - DISTRICT 2 0.00	0.	0.	0.
DAVE SMITH, ELLSWORTH POLICE DEPT - P.O. BOX 163, ELLSWORTH, KS 67439	GOVERNOR - DISTRICT 3 0.00	0.	0.	0.

KANSAS PEACE OFFICERS ASSOCIATION C/O AL

48-6112862

DENNIS GASSMAN, KS HIGHWAY PATROL TRAINING ACADEMY - , SALINA, KS 67401	GOVERNOR - DISTRICT 3 0.00	0.	0.	0.
CHUCK DUNN, CLAY COUNTY SHERIFF'S DEPT - P.O. BOX, CLAY CENTER, KS	GOVERNOR - DISTRICT 3 0.00	0.	0.	0.
JIM BRAUN, HAYS POLICE DEPT - 105 W. 12TH, HAYS, KS 67601	GOVERNOR - DISTRICT 4 0.00	0.	0.	0.
DELBERT HAWEL, KS BUREAU OF INVESTIGATION - 1620 S.W, TOPEKA, KS	GOVERNOR - DISTRICT 4 0.00	0.	0.	0.
RICK SCHNEIDER, TREGO COUNTY SHERIFF'S DEPT - 525 WAR, WAKEENEY,	GOVERNOR - DISTRICT 4 0.00	0.	0.	0.
LARRY COLE, KS HIGHWAY PATROL - 2222 E. HIGHWAY 5, GARDEN CITY, KS 67846	GOVERNOR - DISTRICT 5 0.00	0.	0.	0.
JOHN ANDREWS, FINNEY COUNTY SHERIFF'S DEPT - 304 N., GARDEN	GOVERNOR - DISTRICT 5 0.00	0.	0.	0.
MATT COLE, HOLCOMB POLICE DEPT - P.O. BOX 69, HOLCOMB, KS 67851	GOVERNOR - DISTRICT 5 0.00	0.	0.	0.
WARREN PETERSON, BARTON COUNTY SHERIFF'S DEPT - 1416 K, GREAT BEND,	GOVERNOR - DISTRICT 6 0.00	0.	0.	0.
VERNON RALSTON, ST. JOHN POLICE DEPT - 115 E. 4TH ST, ST. JOHN, KS 67576	GOVERNOR - DISTRICT 6 0.00	0.	0.	0.
STEVE BILLINGER, KS HIGHWAY PATROL - 625 WASHINGTON, GREAT BEND, KS 67530	GOVERNOR - DISTRICT 6 0.00	0.	0.	0.
JIM DAILY, NEWTON POLICE DEPT - 120 E. 7TH, NEWTON, KS 67114	GOVERNOR - DISTRICT 7 0.00	0.	0.	0.
DAVID FALLETTI, KS BUREAU OF INVESTIGATION - P.O. BOX, WICHITA,	GOVERNOR - DISTRICT 7 0.00	0.	0.	0.
BILL MUELLER, COWLEY COUNTY SHERIFF'S DEPT - P.O. B, WINFIELD,	GOVERNOR - DISTRICT 7 0.00	0.	0.	0.
SANDY HORTON, CRAWFORD COUNTY SHERIFF'S DEPT - P.O., GIRARD, KS	GOVERNOR - DISTRICT 8 0.00	0.	0.	0.
STEVE BERRY, CANEY POLICE DEPT - P.O. BOX 129, CANEY, KS 67333	GOVERNOR - DISTRICT 8 0.00	0.	0.	0.
<hr/> TOTALS INCLUDED ON FORM 990-EZ, PART IV		29,750.	0.	0.

TO PROMOTE ACQUAINTANCE AMONG PEACE OFFICERS IN KANSAS AND ADVANCE THE PROFESSION AND STANDARDS OF LAW ENFORCEMENT.

FORM 990-EZ

OTHER PROGRAM SERVICES

STATEMENT 8

DESCRIPTION

GRANTS

EXPENSES

PROVIDE LAW ENFORCEMENT TRAINING TO MEMBERS OF THE
ASSOCIATION

0. 4,114.

TOTAL TO FORM 990-EZ, LINE 31

4,114.

bylaws change regarding the election of district governors. The following is the change as underlined in the article listed:

Article IV, Section 5

5A. To qualify for this elected position an individual must be an active member as described in Article II, "Membership," Section 2, except that the individual shall be an active full-time commissioned law enforcement officer or a member of the Kansas Law Enforcement Training Center as described under Article II, "Membership," Section 2, at the time of the election Three (3) district governors shall be elected from each district. One of those three elected shall be a municipal police officer. One shall be an officer of a sheriff's department. One shall be an officer of any other law enforcement agency or a member of the Kansas Law Enforcement Training Center. If no individual has been nominated to serve in one or more of the three categories, any qualified member from the district may be elected as a district governor without regard to their employment category. District governors shall be elected by a majority ballot of the active membership of their respective districts at the fall business meeting

Application for Extension of Time To File an
Exempt Organization Return

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for *Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Type or print	Name of exempt organization KANSAS PEACE OFFICERS ASSOCIATION C/O AL THIMMESCH	Employer identification number 48-6112862
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O box, see instructions KIRKPATRICK, SPRECKER & COMPANY, LLP	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. 311 S. HILLSIDE, WICHITA, KS 67211	

Enter the Return code for the return that this application is for (file a separate application for each return)

0 3

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

AL THIMMESCH

- The books are in the care of ► **2614 LANDON - WICHITA, KS 67205-2038**

Telephone No ► **316-722-8433** FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ► . If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until

APRIL 15, 2011, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

► calendar year or► tax year beginning **SEP 1, 2009**, and ending **AUG 31, 2010**.2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

LHA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2011)