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SCANNED MAR 1 4 2011

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150 2009

Department 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)

Sponsoning organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form. ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A	For t	ne 2009 calend	ar year,	or tax year beginning	October 1	, 2009, ar	nd ending	Sept	tembe	er 30	, 20 10
В	Check	if applicable	Please	C Name of organization				D Empl	oyer ic	dentification	number
Lat		use IRS label or	Land O'Lakes Kennel Club					4	41 0901002	•	
H		-	print or	Number and street (or P O box, i	f mail is not delivered to street a	iddress) F	Room/suite	E Telep	hone r	number	
H	Termir		type. See	1043 - 121st Lane NE					7	64-755-574	2
H		ded return	Specific Instruc-	City or town, state or country, and	d ZIP + 4			F Grou	n Exe	emption	
ŏ		ation pending	tions.	Blaine, MN 55434-3953					ber	•	
_	• Se	ection 501(c)(3)	organiz	rations and 4947(a)(1) nonexe	mnt charitable trusts mus	t attach	G Accou				☐ Accrual
			-	npleted Schedule A (Form 99	•			(specify)			
_										organization	n is not
1.3	Web:	site: ▶					l l			Schedule B (
-			check o	nty one) — ✓ 501(c) (3) ◀	(insert no.) 4947(a)(1) o	r 527		Z, or 990		•	, 01111 330,
_				zation is not a section 509(a)(3)							
	-			turn is not required, but if the							5,000. A
				9 to determine gross receipts, if					510 10	<u></u>	97311
				enses, and Changes in					rtion	s for Part	
			_	ts, grants, and similar amou						T Tare	0
			-	-				}	1	 	0
	1	- 3		evenue including governme					2	 	
			-	and assessments					3	 	135
	1 _					1 - 1			4	 	2
	1 .			m sale of assets other than		5a					
enue	1			r basis and sales expenses		5b		-	5c		
	1 -		aun or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)								0
Š	B Check Address Address Name Ament Applic • Sc K Check Form L Add III Part 1 2 3 4 4 5 5 6 6 6 7 7 18 19 20 21 Part 22 23 24 25 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6					-	g, cneck nere i				
Reven	'		Gross revenue (not including \$ of contributions								
	1.	•	reported on line 1)								
	'				ses other than fundraising expenses 6b s) from special events and activities (Subtract line 6b from line 6a)						
	'			6c		2462					
	7:	a Gross sale	s of inv	entory, less returns and allo	owances	7a		0		1	
		b Less: cost	_			7b		0			
	'	c Gross prof	it or (lo:	ss) from sales of inventory (Subtract line 7b from line	e 7a) .		[7c		0
	8	Other reve	•	***)	8		0
_	9	Total reve	nue. A	dd lines 1, 2, 3, 4, 5c, 6c, 7d	c, and 8	<u> </u>	<u> </u>	. ▶	9		2599
	10	Grants and	l sımıla	r amounts paid (attach sche	edule)				10		0
	11	Benefits pa	aid to o	r for members				[11		0
9S	12	Salaries, of	ther co	mpensation, and employee	benefits			[12		0
SE	13	Profession	al fees	and other payments to inde	pendent contractors .			[13		0
ğ	14	Occupancy, rent, utilities, and maintenance									0
Û	15	Printing, publications, popular a printing.							15		0
	16	Other expenses (descripe - sterage 1331 AKC dues 25 sales tax 198 insur 1632 bnkchg 390							16		3576
	17	Total expe	nses.	4de lines 10 through 16 .	<u> </u>			. ▶	17		3576
ξ.	18	Excess or ((deficit)	of the year Subtracionel	/7/fm2mfline9)				18		-977
set	19	Net assets	or fun	balances at beginning of	f vear (from line 27, colu	ımn (A)) (ı	must agree	with			
Asset	l	end-of-yea	r figure	reported on prior year sae	ਜ਼ੀਜ਼ੀ				19		1287
ᅙ	20	Other chan	iges in	net assets or tune balances	(attach explanation) .			[20		0
_	21	Net assets	or fund	balances at end of year. C	ombine lines 18 through	20 .			21		309
P	art	Balance	Shee	ts. If Total assets on line 2	5, column (B) are \$1,250,	000 or m				ad of Form	1 990-EZ.
				(See the instructions for I				inning of			d of year
2	2 (Cash, savings,	and in	vestments					1287		309
2:		Land and build								23	0
24		Other assets (d					,			24	0
2		Total assets .							1287		309
20		Total liabilitie	e (dece	ribo 🟲			,			26	0
2	7 1	Net assets or	fund h	alances (line 27 of column	(B) must agree with line	21\	' 		4207		200

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

Cat No 106421

Form **990-EZ** (2009)

• <u>Form 9</u>	90-EZ (2009)		F	age 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		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		1
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
b	If "Yes," has it filed a tax return on Form 990-T 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. ▶ 37a 0	4		
ь 38а	Did the organization file Form 1120-POL for this year?	37b		✓
Ь	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b 6000	38a	-	
39	Section 501(c)(7) organizations. Enter:	1		
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities]		
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	40ь		1
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			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed. ▶ n/a		l	
42a	The organization's books are in care of ▶ Janice Croft Telephone no. ▶ 7	763-75	5-5742	2
	Located at ► 1043 - 121st Lane NE Blaine, MN ZIP + 4 ►	55434	-3953	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		· - 7	
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	_
	account)?	42b		√
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		ı	▶ □
				-
4.4			Yes	No
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	Section 501(c)(3) organizations and 501(c)(3) organizations and section 494 and complete the tables for lines 50 ar	17(a)(1) nonexempt ch	nexempt charitab aritable trusts mus	ole trusts only. Alst answer question	ll sections 46–4	in 19b
46	Did the organization engage in direct or indirect	political campaign activ	vities on behalf of or	r in opposition to	Ye	es No
	candidates for public office? If "Yes," complete	Schedule C, Part I			46	1
47	Did the organization engage in lobbying activitie	s? If "Yes," complete Sc	hedule C, Part II .		47	1
	Is the organization a school as described in section	•	•	E	48	1
	Did the organization make any transfers to an ex		•		49a	1
	If "Yes," was the related organization a section 5	-			49b	
	Complete this table for the organization's five hi employees) who each received more than \$100,	ghest compensated emp				
	(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) Exp account other allo	pense nt and
None -	everyone is volunteer					

						·

	Total number of other employees paid over \$100					
51	Complete this table for the organization's five \$100,000 of compensation from the organization			ors who each rece	eived mo	ore than
	(a) Name and address of each independent contractor	paid more than \$100,000	(b) Ty	pe of service	(c) Compe	ensation
None						

	*****			Į.		
···	Tabel accept of the control of the c			<u></u>		
a	Total number of other independent contractors of	each receiving over \$100	,000▶		 	
	Under penalties of perjury, I declare that I have examine and belief, it is true, correct, and complete Declaration	ed this return, including accomp	panying schedules and sta	tements, and to the bes	t of my knowle	owledge
				/		
Sign Here	Janua Latt			2/10/11		
11010	Signature of officer			Date		
	Janice Croft, Treasurer					
	Type or print name and title					
Paid	Preparer's	Date	Check if self-	Preparer's identifying nurr	iber (See ins	tructions)
Prepare	er's signature		employed ▶	·	 	
Use On			Ell	N >		
	address, and ZIP + 4			ione no 🕨		
	e IRS discuss this return with the preparer showi	n above? See instruction	e e	▶ 🗀	Yes [□No

SCHEDULE L (Form 990 or 990-EZ)

OMB No 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service Name of the organization

Land O'Lakes Kennel Club

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. Employer identification number 0901002 41 :

1 (a) Name of disqualified personal	(a) Name of discussified nerson				(b) Description of transaction							rected			
(a) Name of disquames per			-								Yes	No			
								-				 			
								-				一			
															
												Г			
2 Enter the amount of tax impose under section 49583 Enter the amount of tax, if any,							_	-							
5 Litter the amount of tax, it any,	on mie z, auc	ve, rear	iburseu by	uie orga	unzanon		•		• •						
Part II Loans to and/or From I Complete if the organiza			on Form 90	n Part I	V line 26	or Form 9	on-E	7 Pa	d V 1	ine 38	32				
(a) Name of interested person and purpo	1	to or from													
(a) Name of interested person and purpo		anization?	(c) On principal		(O) Balan	Balance due		ce due (e) in de		by				Written eement?	
	То	From					Yes	No	Yes	No	Yes	No			
lanice Croft	1			6000	6000	interest		\	\		\				
		1													
		ļ										ļ			
		<u> </u>										 			
otal		J		. ▶ \$		6000				L		Ь			
Part III Grants or Assistance B	enefiting Inte			. • •		0000									
Complete if the organiza	-			90, Part I	V, line 27.										
(a) Name of interested person			between interested personganization				c) Amount and type of assis			f assist	ance				
				· · · · · · · · · · · · · · · · · · ·											
															
	•														
Part IV Business Transactions Complete if the organiza	-			90, Part I	V, line 28a	, 28b, or	28c.								
(a) Name of interested person		(b) Relationship between interested person and the organization		(c) Amount of transaction		(d) Description of transaction			on	(e) Sha organiz rever					
											Yes	No			
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