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Form **990-EZ**

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

OMB No 1545-1150

**2009**

**Open to Public  
Inspection**

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)  
▶ 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 10-01, 2009, and ending 09-30, 2010

- B** Check if applicable:
- Address change
  - Name change
  - Initial return
  - Terminated
  - Amended return
  - Application pending

Please use IRS label or print or type. See Specific Instructions.

**C** Name of organization: 146th ALUMNI ASSOCIATION

Number and street (or P.O. box, if mail is not delivered to street address): 1534 N. MOORPARK ROAD #365 Room/suite: \_\_\_\_\_

City or town, state or country, and ZIP + 4: THOUSAND OAKS, CA 91360

**D** Employer identification number: 56-2286864

**E** Telephone number: 805-495-5427

**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: ▶ 146th alumni.org

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

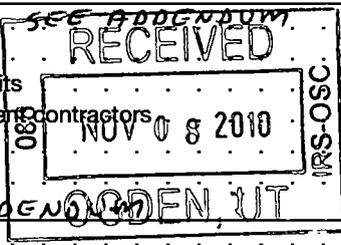
**J** Tax-exempt status (check only one) -  501(c)(19) ◀ (insert no.)  4947(a)(1) or  527

**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	2	3	4	5c	6c	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21			
Revenue	1	Contributions, gifts, grants, and similar amounts received. <u>SEE ADDENDUM</u>										1	1900												
	2	Program service revenue including government fees and contracts										2	0												
	3	Membership dues and assessments										3	8905												
	4	Investment income										4	0												
	5a	Gross amount from sale of assets other than inventory										5a													
	b	Less: cost or other basis and sales expenses										5b													
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)										5c	0												
	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 \$ <u>700</u> of contributions reported on line 1)										6a	5535												
	b	Less: direct expenses other than fundraising expenses										6b	5897												
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)										6c	<362>													
7a	Gross sales of inventory, less returns and allowances										7a	84													
b	Less: cost of goods sold										7b														
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)										7c	84													
8	Other revenue (describe ▶ _____)										8	0													
9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8										9	10,527													
Expenses	10	Grants and similar amounts paid (attach schedule) <u>SEE ADDENDUM</u>										10	600												
	11	Benefits paid to or for members										11	0												
	12	Salaries, other compensation, and employee benefits										12	0												
	13	Professional fees and other payments to independent contractors										13	0												
	14	Occupancy, rent, utilities, and maintenance										14	303												
	15	Printing, publications, postage, and shipping										15	608												
	16	Other expenses (describe ▶ <u>SEE ADDENDUM</u> )										16	1159												
17	<b>Total expenses.</b> Add lines 10 through 16										17	8,143													
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)										18	2,384												
	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	42,443												
	20	Other changes in net assets or fund balances (attach explanation)										20	0												
	21	<b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20										21	44,827												



**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	42,443	44,827
23	Land and buildings	0	0
24	Other assets (describe ▶ _____)	0	0
25	<b>Total assets</b>	42,443	44,827
26	<b>Total liabilities</b> (describe ▶ _____)	0	0
27	<b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	42,443	44,827

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

		Yes	No
<b>33</b>	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .		X
<b>34</b>	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes . . . . .		X
<b>35</b>	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.		
<b>a</b>	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? . . . . .		X
<b>b</b>	If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .		
<b>36</b>	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 . . . . .		X
<b>37a</b>	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ <b>37a</b> <u>  0  </u>		
<b>b</b>	Did the organization file Form 1120-POL for this year? . . . . .		X
<b>38a</b>	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? . . . . .		X
<b>b</b>	If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	<b>38b</b>	
<b>39</b>	Section 501(c)(7) organizations. Enter:		
<b>a</b>	Initiation fees and capital contributions included on line 9 . . . . .	<b>39a</b>	
<b>b</b>	Gross receipts, included on line 9, for public use of club facilities . . . . .	<b>39b</b>	
<b>40a</b>	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____		
<b>b</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 . . . . .	<b>40b</b>	
<b>c</b>	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 . . . . . ▶ _____		
<b>d</b>	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ _____		
<b>e</b>	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. . . . .	<b>40e</b>	
<b>41</b>	List the states with which a copy of this return is filed. ▶ <u>CALIFORNIA</u>		
<b>42a</b>	The organization's books are in care of ▶ <u>DANIEL H. PEMBERTON</u> Telephone no. ▶ <u>805-495-5427</u> Located at ▶ <u>177 ERTEN ST THOUSAND OAKS, CA</u> ZIP + 4 ▶ <u>91360-1810</u>		
<b>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)? . . . . .	<b>42b</b>	X
	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.		
<b>c</b>	At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . .	<b>42c</b>	X
	If "Yes," enter the name of the foreign country: ▶ _____		
<b>43</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>43</b> _____		
<b>44</b>	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>44</b>	X
<b>45</b>	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 . . . . .	<b>45</b>	X

**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 |
|--|-----|----|
| <b>46</b> 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 . . . . . |     | X  |
| <b>47</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .   |     | X  |
| <b>48</b> Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .   |     | X  |
| <b>49a</b> Did the organization make any transfers to an exempt non-charitable related organization? . . . . .   |     | X  |
| <b>b</b> If "Yes," was the related organization a section 527 organization? . . . . .  |     |    |
| <b>49b</b>   |     |    |
- 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				

**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		

**d** Total number of other independent contractors each receiving over \$100,000 . . . ▶ \_\_\_\_\_

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.

**Sign Here**

▶ Daniel H Pemberton | 15 OCTOBER 2010  
 Signature of officer | Date  
 ▶ DANIEL H PEMBERTON PRESIDENT, 146 ALUMNI ASSOCIATION  
 Type or print name and title

**Paid Preparer's Use Only**

Preparer's signature ▶ \_\_\_\_\_ Date \_\_\_\_\_ Check if self-employed   
 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

**ADDENDUM TO FORM 990-EZ  
 146<sup>th</sup> Alumni Association  
 Employer ID # 56-2286864  
 Fiscal Year 2010**

#1	Contributions	\$1200	Linda Friedrichs scholarship donation
		300	Laughlin raffle - Oct 09
		<u>400</u>	Laughlin raffle - Apr 09
		\$1900	
#10	Grants	\$400	Outstanding Airman of the Year Awards
		<u>200</u>	Wing support - Earth Day Lunch
		\$600	
#16	Other Expenses	\$1060	Purchase video projector and screen
		20	Luncheon refund
		13	New bank checks
		<u>66</u>	Return dues check and NSF fee
		\$1159	

**NOTES TO FORM 990-EZ**  
**Employer ID # 56-2286864**  
**10-01-09 to 09-30-10**

1)	\$1200 300 <u>400</u> \$1900	Linda Friedrichs scholarship donation Oct 09 Laughlin raffle Apr 10 Laughlin raffle
6a)	\$ 544 1442 1080 1919 <u>550</u> \$5535	Jul 09 luncheon Oct 09 reunion registration Jan 10 luncheon Apr 10 reunion registration Jul 10 luncheon
6b)	\$ 454 1441 400 1100 400 100 1442 <u>560</u> \$5897	Oct 09 reunion hospitality room Oct 09 reunion fees- Edgewater Hotel Edgewater Hotel- deposit for Apr 10 and Oct 10 reunions Jan 10 luncheon- 94 <sup>th</sup> Aero Squadron restaurant Apr 10 reunion hospitality room Apr 10 cash for reunion registration Apr 10 reunion fees- Edgewater Hotel Jul 10 luncheon – The Point restaurant
10)	\$400 <u>200</u> \$600	Outstanding Airmen of the Year awards Wing support-Earth Day lunch
14)	\$216 <u>87</u> \$303	Mailbox rental Website
15)	\$ 905 437 734 29 1154 20 807 230 728 131 <u>906</u> \$6081	Oct 09 newsletter printing and mailing Nov 09 newsletter printing and mailing Jan 10 newsletter printing and mailing Postage and mailing Feb 10 membership roster printing and mailing Postage Mar/Apr 10 newsletter printing and mailing Jun 10 postcard printing and mailing Jul 10 newsletter printing and mailing Postage and mailing Sep 10 newsletter printing and mailing

16)	\$1060	Purchase video projector and screen
	20	Luncheon refund
	13	New bank checks
	<u>66</u>	Returned dues check and NSF fee
	\$1159	