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Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form**
Return of Organization Exempt From Income TaxUnder 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.

OMB No 1545-1150

2009**Open to Public
Inspection****A For the 2009 calendar year, or tax year beginning** **October 1**, **2009**, and ending **September 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
Instruc-
tions**C** Name of organization**KIWANIS CLUB OF SKIDAWAY**

Number and street (or P.O. box, if mail is not delivered to street address)

600 LANDINGS WAY SOUTH

Room/suite

600A

City or town, state or country, and ZIP + 4

SAVANNAH, GA 31411-2854**D** Employer identification number**58 1881459****E** Telephone number**912 598-9960****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.kiwanisofskidaway.com****J** Tax-exempt status (check only one) — ☒ 501(c) (4) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527**H** Check ☒ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)**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. ► \$ **93605****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	72422
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	19310
	4	Investment income	4	66
	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	
	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 ► Weekly Club Meetings)	8	1807	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	93605	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	54715
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe ► See attached 2 reports)	16	47341
	17	Total expenses. Add lines 10 through 16	17	102056
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	(8451)
	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	45330
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	36879

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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	45330	22 36879
23 Land and buildings		23
24 Other assets (describe ► _____)		24
25 Total assets	45330	25 36879
26 Total liabilities (describe ► _____)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	45330	27 36879

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

Cat No 106421

Form **990-EZ** (2009)

SCANNED

20

Expenses

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

28	See attached reports: Part I (10) Grants and Part III Statement of Program Service Accomplishments		
	(Grants \$) If this amount includes foreign grants, check here	28a	0
29	See 28 above		
	(Grants \$) If this amount includes foreign grants, check here	29a	0
30	See 28 above		
	(Grants \$) If this amount includes foreign grants, check here	30a	0
31	Other program services (attach schedule)		
	(Grants \$) If this amount includes foreign grants, check here	31a	0
32	Total program service expenses (add lines 28a through 31a)	32	0

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

[illegible]

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?	35a	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0		
b Did the organization file Form 1120-POL 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	<input checked="" type="checkbox"/>
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
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 ▶ ; section 4912 ▶ , section 4955 ▶		
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	40b	<input checked="" type="checkbox"/>
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	40e	<input checked="" type="checkbox"/>
41 List the states with which a copy of this return is filed. ▶		
42a The organization's books are in care of ▶ Jay D Ahrens, V.P./Treasurer Telephone no ▶ 912 598-9960 Located at ▶ 3 Shagbark Lane, Savannah, GA ZIP + 4 ▶ 31411-2854		
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)?	42b	<input checked="" type="checkbox"/>
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 .		
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 ▶	42c	<input checked="" type="checkbox"/>
43 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 ▶ 43		
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"/>

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.

- 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. **Yes** **No**
- 47** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II. **46** **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	(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 ▶

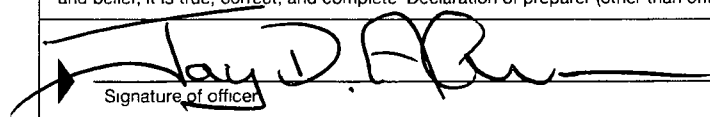
- 51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(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 ▶

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 **12/1/2010**

 Date

Jay D. Ahrens, V.P./Treasurer

Type or print name and title

Paid Preparer's Use Only

Preparer's signature Date

Firm's name (or yours if self-employed), address, and ZIP + 4 Check if self-employed ☐

EIN Preparer's identifying number (See instructions)

Phone no ▶

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

☐ **Yes** ☐ **No**



KIWANIS CLUB OF SKIDAWAY: 2009 Tax Year 990-EZ Part I(1)

Statement of Functional Revenue (Fund Raising Activity)

<u>Event</u>	<u>Revenue</u>
Chili Cookoff	\$ 18,001.00
Concert on the Green	\$ 22,023.50
Partners	\$ 2,283.00
Sponsors	\$ 15,810.00
Legends Golf	\$ -
Other Voluntary	\$ 378.00
Pancake Breakfast	<u>\$ 13,926.75</u>
 Total	 \$ 72,422.25

Statement of Functional Expenses - Club Operations

[illegible]

KIWANIS CLUB OF SKIDAWAY: 2009 Tax Year - IRS Form 990-EZ Part I(16)

Statement of Functional Expenses - Service Fund Raising

<u>Event</u>	<u>Supplies</u>	<u>Postage</u>	<u>Rental/Staging</u>	<u>Printing</u>	<u>Insurance</u>	<u>Entertainment</u>	<u>Misc./Adv.</u>	<u>TOTAL</u>
Chili Cook-Off	\$ 427.76	\$ 39.04	\$ 3,157.47	\$ 992.33	\$ -	\$ 509.87	\$ 1,838.79	\$ 6,965.26
Concert	\$ 2,550.86	\$ 31.72	\$ 2,197.49	\$ 266.12	\$ -	\$ 2,300.00	\$ 482.50	\$ 7,828.69
Partners	\$ -	\$ 110.00	\$ -	\$ 402.32	\$ -	\$ -	\$ 12.50	\$ 524.82
Sponsors	\$ -	\$ -	\$ -	\$ 238.61	\$ -	\$ -	\$ 1,054.58	\$ 1,293.19
Pancake Breakfast	\$ 1,484.99	\$ 25.52	\$ -	\$ 282.45	\$ -	\$ 212.93	\$ 716.50	\$ 2,722.39
Other Exp.	\$ -	\$ 61.16	\$ 745.81	\$ 486.85	\$ 2,313.54	\$ -	\$ 322.49	\$ 3,929.85
Total	\$ 4,463.61	\$ 267.44	\$ 6,100.77	\$ 2,668.68	\$ 2,313.54	\$ 3,022.80	\$ 4,427.36	\$ 23,264.20

KIWANIS CLUB OF SKIDAWAY: 2009 Tax Year 990-EZ

Part I (10) Grants

Georgia District:

Auditory Verbal Center	\$ 700.00
Children's Miracle Network	\$ 140.00
Tomorrow's Leaders	\$ 280.00
Key Leader	\$ 280.00
GA District Foundation	\$ 420.00
Kiwanis International Foundation	\$ 1,695.00

TOTAL: \$ 3,515.00

Savannah Local Charities:

Celebration of Hope	\$ 2,000.00
Christian City Children's Village	\$ 200.00
Coastal Child Advocacy	\$ 3,000.00
Greenbriar Children's Center	\$ 5,000.00
Horse'n Around	\$ 1,000.00
Junior Achievement	\$ 2,000.00
Kid's Café	\$ 5,000.00
L.O.V.E.	\$ 1,500.00
Mighty 8th Air Force Museum	\$ 1,500.00
Music Medicine Institute	\$ 1,000.00
Park Place Outreach	\$ 4,500.00
ROCK Group, Inc.	\$ 2,000.00
Savannah Friends of Music	\$ 1,000.00
Social Apostolate	\$ 4,000.00
Special Olympics	\$ 7,000.00
Youth Challenge Academy	\$ 5,500.00
YMCA of Coastal Savannah	\$ 1,000.00
Children's Hospital	\$ 300.00
Coastal Conservation Association	\$ 300.00
Horizons at Sav. Country Day	\$ 1,300.00
Mediation Center	\$ 300.00
Old Savannah City Mission	\$ 300.00
Ronald McDonald House	\$ 300.00
SAFE Shelter, Inc.	\$ 300.00
Salvation Army	\$ 300.00
Skidaway Island Pre-School	\$ 300.00
USO - United Services Organization	\$ 300.00

TOTAL: \$ 51,200.00

TOTAL: \$ 54,715.00

KIWANIS CLUB OF SKIDAWAY: 2009 Tax Year 990-EZ

Part III. Statement of Program Service Accomplishments

SERVICES RENDERED BY THE CLUB

<u>Community Service</u>	<u>Service Hours</u>	<u>Kiwanians Involved</u>	<u>Children Served Directly</u>
1. CHILDRENS MIRACLE DESIGN	48	1	200
2. HABITAT FOR HUMANITY	600	4	20
3. INTERFAITH HOSPITAL	360	4	50
4. KID'S CAFÉ	500	4	150
5. L.O.V.E.	55	1	11
6. MUSIC MEDICINE INSTITUTE	150	2	10
7. MEDIATION CENTER	250	12	130
8. RED CROSS BLOOD DRIVE	120	5	50
9. SAVANNAH FRIENDS OF MUSIC	120	1	50
10. SALVATION ARMY	144	6	600
11. TELFAIR MUSEUM	132	1	50
12. VILLAGE LIBRARY	1300	10	100
 <u>Youth Services</u>			
1. BETHESDA BOYS HOME	900	7	130
2. CASA	600	5	30
3. CHILDREN'S ADVOCACY CTR.	60	1	200
4. EARLY CHILDHOOD EDUC.	180	2	100
5. CHILDREN'S FISHING TOURN.	65	8	30
6. FIRST TEE OF SAVANNAH	48	2	15
7. GREENBRIAR	50	1	10
8. HORSE'N AROUND	48	1	35
9. JUNIOR ACHIEVEMENT	100	4	300
10. MIGHTY EIGHTH MUSEUM	144	2	1000
11. NOTRE ACADEMY	140	1	150
12. PARK PLACE OUTREACH	720	4	90
13. ROCK GROUP	24	2	900
14. SOCIAL APOSTOLATE	650	5	415
15. SPECIAL OLYMPICS	396	10	110
16. YOUTH CHALLENGE ACDMY.	216	4	1200

KIWANIS CLUB OF SKIDAWAY: 2008 Tax Year - Form 990-EZ**Part IV**

<u>Name and Address</u>	<u>Title and Avg. Hrs/Wk</u>	<u>Compensation</u>	<u>Contr. To Emp. Benefits Plan & Def. Comp.</u>	<u>Exp. Acct. & Other Allowance</u>
William H. Wright 12 Stargrass Retreat Savannah, GA 31411	President 4 Hrs.	0	0	0
Gary P. Bocard 20 Shellworth Crossing Savannah, GA 31411	Past President 4 Hrs.	0	0	0
Eugene P. McDonald 4 Lanyard Court Savannah, GA 31411	President Elect 4 Hrs.	0	0	0
Gregory T. Stinson 23 Wiley Bottom Road Savannah, GA 31411	V.P /Fund Raising 4 Hrs.	0	0	0
Melissa M. Emery 43 Cotton Crossing West Savannah, GA 31411	V.P./Marketing 4 Hrs	0	0	0
Ronald R Weber 9 Heartwood Court Savannah, GA 31411	V.P./ Secretary 6 Hrs.	0	0	0
Jay D. Ahrens 3 Shagbark Lane Savannah, GA 31411	V.P./Treasurer 6 Hrs.	0	0	0
Marianne Schutz 8 Pelham Road Savannah, GA 31411	Director 2 Hrs.	0	0	0
James R. O'Malley 4 Shearwater Court Savannah, GA 31411	Director 2 Hrs.	0	0	0
R. Mark Forssell 37 Black Hawk Trail Savannah, GA 31411	Director 2 Hrs.	0	0	0
James G. Beurle 30 Magnolia Crossing Savannah, GA 31411	Director 2 Hrs	0	0	0

<u>Name and Address</u>	<u>Title and Avg. Hrs/Wk</u>	<u>Compensation</u>	<u>Contr. To Emp. Benefits Plan & Def. Comp.</u>	<u>Exp. Acct. & Other Allowance</u>
David B. Fox 5 Windwalk Lane Savannah, GA 31411	Director 2 Hrs.	0	0	0
Terry S Overton 9 Marsh Tower Lane Savannah, GA 31411	Director 2 Hrs.	0	0	0
Thomas M Sharp 6 Sedgewater Lane Savannah, GA 31411	Board Advisor 4 Hrs	0	0	0