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Short Form
Return of Organization Exempt From Income Tax

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

OMB No. 1545-1150

2009

Open to Public
Inspection

► 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 OCT 1, 2009 and ending SEP 30, 2010

B Check if applicable	C Name of organization HICKORY KIWANIS CLUB	D Employer identification number 58-1939893
	Number and street (or P O box, if mail is not delivered to street address) PO BOX 501	E Room/suite 828-294-3772
	City or town, state or country, and ZIP + 4 HICKORY, NC 28603-0501	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) ►

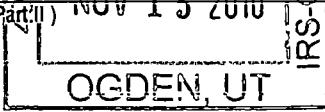
I Website. ► N/A

H Check ► if the organization is notJ Tax-exempt status (check only one) — 501(c)(6) (insert no) 4947(a)(1) or 527 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 returnL 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 ► \$ **45,102.****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	890.	
	2 Program service revenue including government fees and contracts	2		
	3 Membership dues and assessments	3	18,850.	
	4 Investment income	4	12,467.	
	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"/>	6a	11,652.	
	a Gross revenue (not including \$ _____ of contributions reported on line 1)	6b		
	b Less direct expenses other than fundraising expenses	6c	11,652.	
	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	7a		
	7a Gross sales of inventory, less returns and allowances	7b		
	b Less cost of goods sold	7c		
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	8	1,243.	
	8 Other revenue (describe ► MISCELLANEOUS)	9	45,102.	
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	10	19,772.	
Expenses	10 Grants and similar amounts paid (attach schedule)	STMT 2	11	
	11 Benefits paid to or for members		12	
	12 Salaries, other compensation, and employee benefits		13	
	13 Professional fees and other payments to independent contractors		14	
	14 Occupancy, rent, utilities, and maintenance		15	
	15 Printing, publications, postage, and shipping		16	22,287.
	16 Other expenses (describe ► MEALS, SUPPLIES & ADMIN EXPENSES)		17	42,059.
	17 Total expenses. Add lines 10 through 16		18	3,043.
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)		19	85,249.
	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)		20	
	20 Other changes in net assets or fund balances (attach explanation) RECEIVED		21	88,292.
All Net Assets	21 Net assets or fund balances at end of year. Combine lines 18 through 20			

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)



22 Cash, savings, and investments	(A) Beginning of year	(B) End of year
	85,249.	22 90,557.
23 Land and buildings	23	
24 Other assets (describe ► PREPAIDS)	0.	24 82.
25 Total assets	85,249.	25 90,639.
26 Total liabilities (describe ► SEE STATEMENT 1)	0.	26 2,347.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	85,249.	27 88,292.

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

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity
 34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes
 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

	Yes	No
33		X
34		X

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 ► 37a 0.
 b Did the organization file Form 1120-POL for this year?

35a	X
35b	N/A

36	X
37b	X

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 N/A

38a	X
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39 Section 501(c)(7) organizations Enter

39a N/A

39b N/A

40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► N/A, section 4912 ► N/A, section 4955 ► N/A

40a	N/A
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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 N/A

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

40c N/A

d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization

40d N/A

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	X
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41 List the states with which a copy of this return is filed ► NONE

42a The organization's books are in care of ► RICK HAMMER Telephone no ► 828-294-3772
 Located at ► 4995 FOREST RIDGE DR, HICKORY, NC ZIP + 4 ► 28602

	Yes	No
42b		X

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)?

42c	X
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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 ► _____

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 ► N/A

	Yes	No
44		X
45		X

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.

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
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?
b If "Yes," was the related organization a section 527 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" 50

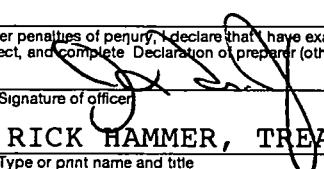
(a) Name and address of each employee paid more than \$100,000 N/A	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

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" 51

(a) Name and address of each independent contractor paid more than \$100,000 N/A	(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 	Date 11/15/10	
► RICK HAMMER, TREASURER Type or print name and title			
Paid Preparer's Use Only	Preparer's signature ►	Date	Check if self-employed ► <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 ►	Preparer's identifying number (See Instr) EIN ► _____ Phone ► _____ no	

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

► Yes No

Form 990-EZ (2009)

HICKORY KIWANIS CLUB

58-1939893

FORM 990-EZ	OTHER LIABILITIES	STATEMENT 1
DESCRIPTION	BEG. OF YEAR	END OF YEAR
DEFERRED REVENUE	0.	1,399.
KEY CLUB FUNDS	0.	948.
TOTAL TO FORM 990-EZ, LINE 26	0.	2,347.

FORM 990-EZ	CASH GRANTS AND ALLOCATIONS	STATEMENT 2
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CLASS OF ACTIVITY/GRANTEE'S NAME AND ADDRESS	GRANTEE'S RELATIONSHIP	AMOUNT
YOUTH SERVICES 4H CAMP	NONE	4,000.
YOUTH SERVICES BOYS AND GIRLS CLUB	NONE	1,500.
YOUTH SERVICES CAROLINAS DISRICT FOUNDATION	NONE	1,000.
YOUTH SERVICES TEEN UP	NONE	300.
YOUTH SERVICES RECREATIONAL BASKETBALL	NONE	239.
COMMUNITY SERVICE KIWANIS FOUNDATION	NONE	3,000.

HICKORY KIWANIS CLUB	58-1939893
COMMUNITY SERVICE	NONE
SALVATION ARMY	500.
SPONSORED YOUTH	NONE
CIRCLE K/KEY CLUB	4,000.
MISCELLANEOUS	NONE
BSA - LEARNING FOR LIFE	1,500.
MISCELLANEOUS	NONE
CHILD ADVOCACY CENTER	500.
MISCELLANEOUS	NONE
PARENTING NETWORK	850.
YOUTH SERVICES	NONE
HICKORY CITY SCHOOLS DICTIONARY PROJECT	570.
MISCELLANEOUS	NONE
SKIP A MEAL	315.
MISCELLANEOUS	NONE
TERRIFIC KIDS	1,054.
MISCELLANEOUS	NONE
MISCELLANEOUS	144.
MISCELLANEOUS	NONE
LRU KIDS IN COLLEGE	300.
TOTAL INCLUDED ON FORM 990-EZ, LINE 10	<u>19,772.</u>

FORM 990-EZ

INFORMATION REGARDING TRANSFERS
ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

STATEMENT 3

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

HICKORY KIWANIS CLUB

58-1939893

990-EZ PG 2

STATEMENT 4

SERVICE ORGANIZATION THAT RAISES FUNDS TO HELP OTHER COMMUNITY ORGANIZATIONS