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Form **990-EZ**

Department of the Treasury Internal Revenue Service

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)

Sponsonng 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

10/01/00

OMB No 1545-1150

2009

Open to Public Inspection

Α	For the	e 2009 calenç	lar year	or tax year beginning IU/UI/	US, and ending	09/3	M/TO			
В	Check	if applicable	Please	C Name of organization					D En	nployer identification number
	Address	s change	use IRS	KIWANIS CLUB OF P	JYALLUP					
	Name o	change	label or print or	K00590					9:	1-6034556
	Initial re	eturn	type.	Number and street (or P O box, if mail is	not delivered to street addi	ess)		Room/suite		lephone number
Ш	Termina	ation	See Specific	PO BOX 246			53-863-7972			
	Amende	ed return			oup Exemption					
LL		tion pending	tions.	PUYALLUP	WA 983					ımber ▶ 0026
	Sec	ction 501(c)(3	. •	zations and 4947(a)(1) nonexempt cl		attach		G Accounting		X Cash Accrual
_				mpleted Schedule A (Form 990 or 99	0-EZ).			Other (specify)		
١.				yallupkiwanis.com	- \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			H Check ► required to	if t attach S	he organization is not schedule B (Form 990,
		empt status (ch					527			
ĸ	Check			ganization is not a section 509(a)(3) s						
_				eturn is not required, but if the organization of the organization					te retur	
	art I			penses, and Changes in Net						
	1			nts, and similar amounts received	Assets of Fullu L	Jaiaii	ces (O	se uie ilisu	1	17,400
	2			enue including government fees and c	ontracts				2	17,400
	3	_		ende including government lees and conditions are sent to the sent		e Si	tater	ment 1	3	16,759
	4	Investment		nu assessments	50				4	1,474
	5a			sale of assets other than inventory		5a			 -	
	Ь			pasis and sales expenses		5b			_	
	C			of assets other than inventory (Subtract line	5b from line 5a)				5c	
<u>o</u>		, ,		vities (complete applicable parts of Schedule	·	aamina	ı, check he	ere 🕨 🗀		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
ď.	a	•		including \$	of contributions		,			
Reygnue	reported on line 1) 6a 32,69							32,69	7	
	ь	12 36								
™	C									20,335
_	7a			itory, less returns and allowances		7a				
MAY	b	Less cost o		-		7b				
	С	Gross profit	or (loss)	from sales of inventory (Subtract line	7b from line 7a)				7c	
品	8	Other reven	ue (desc	cribe > See Statement	2) 8	5,345
Denses SCANNED	9	Total reven	ue. Add	lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	▶ 9	61,313
Z	10			mounts paid (attach schedule)			5	Stmt 3	10	40,449
Ş	11	Benefits par	dito of fr	or members					11	
SS.	12	Salaries of	ier.com	pensation, and employee benefits					12	3,459
nse	13	∰rofessiona	l fees an	d other payments to independent conf	ractors				13	
	14	Occupancy.	gent, úti	lities, and maintenance					14	
Ä	15			s, postage- and shipping					15	
	16	Other expen			4) 16	
	17,			d-lines 10 through 16	, ,				17	
y)	18			or the year (Subtract line 17 from line 9					18	1,922
se	19			alances at beginning of year (from line	27, column (A)) (musi	agree	with		1,	70 600
Net Assets		-	-	ported on prior year's return)					19	
Se	20	_	•	et assets or fund balances (attach expl	·				20	
	21			palances at end of year Combine lines			Sla Farr	. 000	<u> </u>	
	art II	Baian	ce Sne	eets. If Total assets on line 25, colum	n (B) are \$1,250,000 o	r more,				(B) End of year
22	Caab			(See the instructions for Part II)		H	(A) D	eginning of year		04 500
		savings, and i	iiivesime	siito		-		, 3, 00	22	
		and buildings	ıba 🕨			\ 			23	
	Total a	assets (descri	ING F			一'卜		79,60		4
		assets liabilities (des	criha 🕨	•		\		, , , , ,	0 26	
		•		es (line 27 of column (B) must agree w	ith line 21)	一'卜		79,60		
				Reduction Act Notice, see the sepa				,		Form 990-EZ (2009)

Form,990-EZ (2009) KIWANIS CI	UB OF PUYALLUP	91	-6034556			Page
Part III Statement of Program	n Service Accomplishmen	its (See the instruc	tions for Part I	II.)	Ex	penses
What is the organization's primary exempt pu					(Required	for section
TO CHANGE THE WORLD ONE CHILD A	ND ONE COMMUNITY AT A TIM	E.			501(c)(3) a	and 501(c)(4)
Describe what was achieved in carrying out t	the organization's exempt purpose	es In a clear and concise)		organizatio	ons and section
manner, describe the services provided, the	number of persons benefited, or o	other relevant information	for		4947(a)(1)	trusts, optional
each program title					for others)
28 YOUNG CHILDREN PRIORITY ONE-	SUPPORT TO VARIOUS					
NON-PROFIT ORGANIZATIONS FOR	THE BENEFIT OF			1		
UNDERPRIVILEGED CHILDREN						•
(Grants \$ 11,746) If	this amount includes foreign gran	its, check here	> _	\prod	28a	11,746
29 YOUTH SERVICES-SCHOLARSHIPS	AND SUPPORT TO VARIOUS					
NON-PROFIT ORGANIZATIONS PRO	MOTING LEADERSHIP AND			1	1	
DEVELOPMENT OF YOUTH						
(Grants \$ 25,029) If	this amount includes foreign gran	its, check here			29a	25,029
30 COMMUNITY SERVICES-VARIOUS C	OMMUNITY SERVICE			1		
PROJECTS INCLUDING ANNUAL TE	ACHERS' APPRECIATION					
LUNCH AND SUPPORT TO AREA FO	OD BANKS					
(Grants \$ 3,674) If	this amount includes foreign gran		<u> </u>		30a	3,674
31 Other program services (attach schedule	e) See Statement	5				
(Grants \$) If	this amount includes foreign gran	its, check here	<u> </u>		31a	
32 Total program service expenses (add I	ines 28a through 31a)			>	32	40,449
Part IV List of Officers, Directors,	Trustees, and Key Employees. L	ist each one even if not				
(a) Na		(b) Title and average hours per week	(c) Compensation (If not paid,		Contributions to ee benefit plans &	(e) Expense account and
(a) Name ar	nd address	devoted to position	enter -0)		d compensation	other allowances
TED MALONEY	PUYALLUP	PRESIDENT			ļ	
2207 35TH AVE SE	WA 98374		0		0	(
RUDY FYLES	PUYALLUP	PRES ELECT				
8101 182ND ST E	WA 98375		0		o	(
HAYDEN WILLIAMS	PUYALLUP	VICE PRES				
13616 DANA LANE	WA 98373		0		0	. (
DAN MCCLUNG	SUMNER	PAST PRES				
1911 MAIN	WA 98390		0		0	
ETHYL DOW	TACOMA	SEC/TRES				
5101 30TH ST NE	WA 98422		0		. 0	
STAN CROSS	PUYALLUP	BOARD				
4219 CRYSTAL LANE LOOP SE	WA 98372		0		0	
TIM GREGOIRE	PUYALLUP	BOARD				
323 N MERIDIAN	WA 98371		0		0	
DENNIS KING	PUYALLUP	BOARD		İ		
1113 N MERIDIAN	WA 98371		0	ļ	0	
TOM THOMAS	PUYALLUP	BOARD				
2501 36TH AVE SE	WA 98374		0		0	
DARLEEN MCCALLUM	PUYALLUP	BOARD				
808 26TH AVE SW	WA 98373		0		0	
PETE BRISTOW	PUYALLUP	BOARD				
2028 HISTORIC WAY	WA 98371		0		. 0	
CHRIS KUCKLICK	PUYALLUP	BOARD				
1308 VALLEY VIEW DRIVE	WA 98372		0	<u> </u>	0	
LORRAINE WILSON	TACOMA	BOARD				
3114 EAST M STREET	WA 98404		0	<u> </u>	0	(
BARB HERBERT	PUYALLUP	BOARD				
2919 16TH ST SE	WA 98374		0	 	0	(
				 -		
				-		
			1			
			 	 -		

Form-990-EZ (2009)

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the changes If the organization had income from business activities, such as those reported on lane 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 and on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T and on Form 990-T and D dit the organization have not reported on sociality in the properties of the organization by the organization provides and state return on Form 990-T for this year? If "Yes," this sit filled a tax return on Form 990-T for this year? If "Yes," this sit filled a tax return on Form 990-T for this year? If "Yes," this sit filled a tax return on Form 990-T for this year? If "Yes," this sit filled a tax return on Form 990-T for this year? If "Yes," this sit filled a tax return on Form 990-T for this year? If "Yes," this sit filled a tax return on Form 990-T for this year? If "Yes," this sit filled a tax return on Form 990-T for this year? If "Yes," this sit filled a tax return on Form 990-T for this year? If "Yes," this sit filled a tax return on Form 990-T for this year? If "Yes," this sit filled a tax return on Form 990-T for this year? If "Yes," this sit filled a tax return on Form 990-T for this year? If "Yes," this sit filled a tax return on Form 990-T for this year? If "Yes," this sit filled a tax return on Form 990-T for year and this publication for year and the total tax and the publication engage in any section 4908 e	<u> </u>	If V Other Information (Note the statement requirements in the instructions for i	-aπ v.)			
where any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the changes of the changes and the changes and the changes of the cognization have unrelated business gross income of \$1,000 or more or was it subject to section 5033(e) notice, reporting, and proxy tax requirements? If "Yes," has it filled a tax return on Form 990-T for the year? Did the organization undergo a diquadition, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete schore, decorationed, as described in the list? Did the organization the Form 1120-POI. For the year? 35a Did the organization the Form 1120-POI. For the year? 35b If "Res," complete Schore, reder or index, a described in the list? Did the organization the row from, or make any loans to, any officer, director, inustee, or key employee or were sary such loans made in a pion year and still outstanding at the end of the pend covered by this return? If "Res," complete Schore, included on line 9 of propiblic use of club facilities Section \$101(c)(7) organizations Enter In indiation flees and capital contributions included on line 9 of Gross receipts, included on line 9 of propiblic use of club facilities Section \$101(c)(3) and \$501(c)(4) organizations Enter amount of tax imposed on the organization during the year under section \$401 = \$1.000 =		District the IDOO KWA- 7 - Wash and standard			Yes	No
34 Were any changes made to the organizing or governing documents? If "Yes," attached 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 76 million 30	33			33		×
the changes 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 opport the income on Form 990-T I bill the organization have unrelated business gross income of \$1,000 or more or was it subject to section 0503(e) notice, reporting, and is plurible to the support of \$1.000 or more or was it subject to section 0503(e) notice, reporting, and is gluciation, discolution, termination, or significant disposition of net assests during the year? If "Yes," complete applicable parts of Schedule N If "Yes," has it filed a tax return on Form 990-T for this year? If the amount of plotted expenditures, direct or indirect, and schedule in the linist bill of the organization brown from, or make any long subjects to adsorbed in the linist bill the organization brown from, or make any long such so, 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? If "Yes," complete Schedule I, Part II and enter the Istal amount any organization and still outstanding at the end of the period covered by this return? If "Yes," complete Schedule I, Part II and enter the Istal amount wholved Section \$01(c)(3) organizations Enter amount of tax imposed on the organization during the year or it aware that the ragged in an excess benefit transaction and supplies the schedule I, Part II and enter the Istal amount of tax imposed on organization managers or disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms \$90 or 990-EZ? If "Yes," complete Schedule I, Part I are appead in an excess benefit transaction or 990-EZ? If "Yes," complete Schedule I, Part I are appead in an excess benefit transaction or 1" Yes," organizations Enter amount of tax imposed on organization and party to a prohibited tax shelter If the or	34	· · · · · · · · · · · · · · · · · · ·	•	33	-	
35 If the organization had recome from bisoness activities, such as those reported on lines 2, 5a, and 7a (among others), but not reported on Form 990-T, attich a sistement explaining why the organization of ord report the income on Form 990-T and the organization have unrelated business gross income of \$1,000 or move or was it subject to section 633(e) notice, reporting, and proxy tax requirements? 35b If 1*Yes,* This it filed a tax return on Form 990-T for this year? 35c Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes,* Complete applicable parts of Schedule 1. 35c If a first amount of political expenditures, direct or indirect, as described in the linish. 35d If a first amount of political expenditures, direct or indirect, as described in the linish. 35d If a first amount of political expenditures, direct or indirect, as described in the linish. 35d If a first amount of political expenditures, direct or indirect, as described in the linish. 35d If a first amount of political expenditures, direct or indirect, as described in the linish. 35d If a first amount of political expenditures, direct or indirect, as described in the linish. 35d If a first amount of political expenditures, direct or indirect, as described in the linish. 35d If a first amount of political expenditures, direct or indirect, as described in the linish. 35d If a first amount of political expenditures, direct or indirect, as described in the linish. 35d If a first amount of political expenditures, direct or indirect, as described in the linish. 35d If a first amount of political expenditures, direct or indirect, as described by this organization before and calculation the linish. 35d If a first amount of political expenditures, direct or indirect, as described by the organization in the second of the organization expenditure or indirect and association 450 (16(3) and 501(6)(4) organizations. Either amount of tax on line 400 reminures and poli	• .			34		X
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section \$60,33(s) notices, reporting, and proxy tax requirements? b If "Yes," has it filed a tax return on Form 990-T for this year? 50 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 73 Enfer amount of political expenditures, direct or indirect, as described in the linish 15 Did the organization borrow from, or make any loran sto, any officer, director, trustee, or key employee or were any such losens 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 moved in Indiation fees and capital contributions included on line 9 50 Gross recepts, included on line 9, for public use of club facilities 15 Section \$301(c)(3) organizations. Enter amount of tax miposed on the organization during the year under section \$411(c)(3) and \$501(c)(4) organizations. Enter amount of tax miposed on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part II and transaction 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 II c Section \$301(c)(3) and \$501(c)(4) organizations. Enter amount of tax in liniation fees seek benefit transaction? If "Yes," complete Form 8888-1 15 List the states with which a copy of the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8888-1 15 Located at ▶ TACOMA, WA 27 List the states with which a copy of the return is filed ▶ A section \$301(c)(3) and \$501(c)(4) organizations. Enter amount of tax on line 40c remibured by the organization's blooks are under set the return is filed ▶ 16 All organizations and any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "	35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not	reported			
6033(e) notice, reporting, and proxy tax requirements? 516 If "Yes," has it filed a tax return on Form 990-T for this year? 527 If "Yes," has it filed a tax return on Form 990-T for this year? 528 Dut the organization underge a liquidation, dissolution, termination, or significant disposition of net assets 529 during the year? If "Yes," complete applicable parts of Schedule N. 530 Dut the organization file Form 1120-POL for this year? 531 Dut the organization file Form 1120-POL for this year? 532 Dut the organization file Form 1120-POL for this year? 533 Dut the organization file Form 1120-POL for this year? 534 Dut the organization file Form 1120-POL for this year? 535 Dut the organization file Form 1120-POL for this year? 536 Dut the organization file Form 1120-POL for this year? 537 Dut the organization file Form 1120-POL for this year? 538 Dut the organization file Form 1120-POL for this year? 539 Dut the organization file Form 1120-POL for this year? 530 Dut the organization file Form 1120-POL for this year? 531 Dut the organization file Form 1120-POL for this year? 532 Dut the organization file Form 1120-POL for this year? 533 Dut the organization file Form 1120-POL for this year? 534 Dut the organization file Form 1120-POL for this year under section 501(c)(7) organizations Enter amount of tax imposed on the organization during the year under section 501(c)(3) and 501(c)(4) organizations Dut 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 prory ear, and that the transaction Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912. 50 Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons and under the torganization aparty to a prohibited tax shelter transaction? If "Yes," complete Form 8888-T 510 1 30 TH S T NE 510 1 30 TH S T		on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T				
b M*Yes,* has it flied a tax return on Form 990-T for this year? 5 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 73 Enter amount of pilutical expenditures, direct or indirect, as desorbed in the lists' 13 Did the organization for political expenditures, direct or indirect, as desorbed in the lists' 13 Did the organization for provide applicable parts of Schedule N 13 Did the organization borrow form, 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? 13 Did the organization borrow form, 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? 13 Did the organization borrow form, 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? 14 Did the organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶	а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section				
Did the organization undergo a liquidation, dissolution, (iremnation, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N Table amount of pollucial expenditures, direct or indirect, as described in the list? Did the organization file Form 1120-POL for this year? Bit Did the Organization file Form 1120-POL for this year? Bit Did the organization file Form 1120-POL for this year? Bit Did the organization file Form 1120-POL for this year was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 8886-T Bit Did the organization file Form 1120-POL for F		6033(e) notice, reporting, and proxy tax requirements?		35a		X
during the year? If "Yes," complete applicable parts of Schedule N 25 Enter amount of political expenditures, direct or indirect, as described in the linsh 26 Did the organization file Form 1120-POL for this year? 27 July 10 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? 27 July 17 yes, "complete Schedule I, Part II and enter the total amount involved 28 Section 501(c)(7) organizations Enter included on line 9 39 Section 501(c)(7) organizations included on line 9 39 Gross recepts, included on line 9, for public use of club facilities 39 Section 501(c)(3) and 501(c)(4) organizations but the organization during the year under section 4911 ▶	b	If "Yes," has it filed a tax return on Form 990-T for this year?		35b		
The Enter amount of political expenditures, direct or indirect, as described in the linstr Did the organization file Form 1120-POL for this year? 37b	36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets				
b Did the organization file Form 112b-POL for this year? 37b				36		X
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 pror year and still outstanding at the end of the period covered by this return? 1	37a	Enter amount of political expenditures, direct or indirect, as described in the instr				
any such loans made in a prior year and still outstanding at the end of the period covered by this return? 1	b	·		37b		X
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38 Section 501(c)(7) organizations. Enter a Institution fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 39	38a		re			.,
39 Section 501(c)(7) organizations Enter a initiation fees and capital contributions included on line 9 b Gross recepts, 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 501(c)(3) organizations. Did the organization engage in any 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 during the year or is it aware that it engaged in an excess benefit transaction during the year or is aware that it engaged in an excess benefit transaction during the year or is 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-E27 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 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. a 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 Located at ▶ TACOMA, WA 2IP 4 ▶ 98422 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 location as a bank account, securities account, or other financial account in a foreign country location as a bank account, securities account, or other financial account in a foreign country location as a bank account, securities account, or other financial account in a foreign country location and financial account in a foreign country location and financial account in a foreign country location and				38a		X
a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 3 Section 501(c)(3) and surpations. Enter amount of tax imposed on the organization during the year under section 4911 ▶ .section 4912 ▶ .section 4955 ▶ 5 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 ergo. EZ7 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 d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization. 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 14 List the states with which a copy of this return is filed ▶ None 15 101 30TH ST NE 10 Located at ▶ TACOMA, WA 2IP + 4 ▶ 98422 2IP + 4 ▶ 98422 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 See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 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 See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 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 See the instructions for exceptions and filing form		· · · · · · · · · · · · · · · · · · ·				
b Gross recepts, included on line 9, for public use of club facilities 39b 40a Section 501(c)(3) organizations Enter amount of fax imposed on the organization during the year under section 4911 ▶						
Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 section 4915 section 4915 section 4955 Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 sexible metric 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 1 Part 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 in the variety of the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 11 List the states with which a copy of this return is filed All organizations both any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 12 Located at 13 Tax CoMA, WA 14 List the states with which a copy of this return is filed 14 Did the 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) 15 Yes, "enter the name of the foreign country 26 Section 4947(a)(1) nonexempt chairtable 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 14 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ in the organization within the meaning of section 512(b)(13)? If Yes No Pyes, Form 990 must be completed instead of Form 990-EZ	_	· · · · · · · · · · · · · · · · · · ·				
section 4911						
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	45		f			
		"Yes," Form 990 must be completed instead of Form 990-EZ		45		X
				Form 99	0-EZ	(2009

	Under penalties of penjury, I declare that I have examined this return, include and belief, it is true, correct, and complete. Declaration of preparer (other the			
Sign	I that land	1:	5-5-1	/
Here	Signature of officer ETHYL DOW	_	eate RY-TREAS	URER
	Type or print name and title	Date	Check if	Preparer's Identifying Number (See instr
Paid	Preparer's signature Hayden Williams, CPA	05/03/11	self- employed	P00025438
Preparer's		CPA's, Inc.	E	N ▶ 91-1306345
Use Only	f self-employed), 4843 E Main Ave	21.47		Phone 053 045 4001
May the IRS	address, and ZIP + 4 Puyallup, WA 98372		<u> n</u>	no ▶ 253-845-4281 ▶ X Yes No

Form 990-EZ (2009)

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

See separate instructions.

OMB No 1545-0047

Open To Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

KIWANIS CLUB OF PUYALLUP K00590

Employer identification number 91-6034556

<u> </u>					91-00343	,
Part I Fundraising Activities. Complete in Form 990-EZ filers are not required				ered "Yes" to For	m 990, Part IV, li	ne 17.
1 Indicate whether the organization raised funds through	any of the following	activ	rities	Check all that apply		
a Mail solicitations	e Solicitation	of no	n-gov	ernment grants		
b Internet and email solicitations	f Solicitation	of go	vernn	nent grants		
c Phone solicitations	g Special fun	ıdraısı	ng ev	ents		
d In-person solicitations						
2a Did the organization have a written or oral agreement w or key employees listed in Form 990, Part VII) or entity						Yes No
b If "Yes," list the ten highest paid individuals or entities (to be compensated at least \$5,000 by the organization	fundraisers) pursua	ant to	agree	ments under which the	fundraiser is	
(i) Name of individual or entity (fundraiser)	(ii) Activity	raise: custo cont	d fund- r have ody or rol of outions?	(IV) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
		 -				

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Schedule G (Form 990 or 990-EZ) 2009

Page 2

P	art				mplete if the org orm 990-EZ, line								report	ed
		more train gre		_	i) Event #1		(b) Eve			(c) Other			al events	
ø.			r c		vent type)		(event ty	pe)	$- \mid -$	(total nur	mber)		(a) illioi (c))	ugn
Revenue	1 2	Gross receipts Less Charitable contributions			25,689								25,	689
	3	Gross revenue (line 1 minus line 2)	-		25,689								25,	689
	4	Cash prizes												
	5	Noncash prizes					 		_					
uses	6	Rent/facility costs				╁					-			
Direct Expenses	7	Food and beverages				_							_	
Direc	8	Entertainment										·		
	9 Other direct expenses 9,137										9,	137		
	10	Direct expense summary			-						> (,	9,	137 ₎ 552
	11 art	Net income summary Coming Coming			column (d), and line organization ar		arad "Vac" t	o Form O	00 Pa	rt IV/ line	10 or ron	orted me		552
F	arti	than \$15,000 c				12446	eleu les i	o Foiin 9	90, Fa	itiv, iiiie	19, or tep	orteu mo	Е	
Revenue					(a) Bingo		(b) Pull tabs bingo/progres			(c) Other g	aming	(d) Total g		
Rev	1	Gross revenue												
ses	2	Cash prizes												
Expenses	3	Noncash prizes				ļ								
Direct	4	Rent/facility costs				ļ								
	5	Other direct expenses												
	6	Volunteer labor	X	Yes No	100.00 %		Yes No	%		Yes No	%			
	7	Direct expense summary	y Add I	lines 2	through 5 in column	(d)					▶ (,)
	8	Net gaming income sum	mary (Combi	ne line 1, column d, a	and li	ne 7				•			
		•											Yes	No
9 a	Is	ter the state(s) in which the organization licensed t	_									9a		x
b	. IT "	No," Explain												
10a b		ere any of the organization Yes," Explain	n's gam	ning lic	enses revoked, susp	ende	d or terminate	d during the	tax year	?	v	102		х
11	Do	es the organization operat	te gam	ing act	tivities with nonmeml	bers?	,		•			11		x
12		the organization a grantor, med to administer charital		-	or trustee of a trust o	ram	ember of a pa	tnership or	other ent	tity		12		x
DAA		and the designation of the flat	3411	····:3						S	chedule G (F		990-EZ	

Sche	edule G (Form 990 or 990-EZ) 2009 KIWANIS CLUB OF PUYALLUP	91	-603455	6	Р	age 3
					Yes	No
13	Indicate the percentage of gaming activity operated in.					
а	The organization's facility	13a	%			
b	An outside facility	13b	%			
14	Provide the name and address of the person who prepares the organization's gaming/special events books					
	and records					
	Name ► ETHYL DOW					
	5101 30TH ST NE					
	Address TACOMA	WA 98	8422			
15a	Does the organization have a contract with a third party from whom the organization receives gaming					
	revenue?			15a		X
þ	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$	and the				
	amount of gaming revenue retained by the third party ▶ \$					
С	If "Yes," enter name and address of the third party					
	Name ►					
	Address ►					
16	Gaming manager information					
	Name ▶					
	Gaming manager compensation ▶ \$					
	Description of services provided ▶					
	Director/officer Employee Independent contractor					
17	Mandatory distributions				ĺ	
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to					
	retain the state gaming license?			17a		X
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent					_
	in the organization's own exempt activities during the tax year ▶ \$					

Schedule G (Form 990 or 990-EZ) 2009

PUYKIW KIWANIS CLUB OF PUYALLUP

91-6034556

Federal Statements

FYE: 9/30/2010

Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

	De	esc	cription	 Amount
MEMBERSHIP	DUES	&	ASSESSMENTS	\$ 16,759
Total				\$ 16,759

Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description	 Amount
MOTHER'S DAY FLOWERS	\$ 1,500
PUYALLUP FAIR PARADE	1,000
INSTALLATION DINNER	865
NW JR LIVESTOCK SHOW	800
AUTO SHOW	600
FAIR VAN DRIVING	222
MISCELLANEOUS	200
FAIR LUNCHEON	 158
Total	\$ 5,345

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PUYKIW KIWANIS CLUB OF PUYALLUP 91-6034556 FYE: 9/30/2010

Federal Statements

			Organizations	Suc			
Z `	Name and Address		Class of Activity				
	Date of Gift	Description of Property	Cash Contribution	Noncash Contribution	Book Value	Book Value Explanation	FMV Explanation
YCPO		YOUNG	YOUNG CHILDREN 11,746			-	
YOUTH SERVICES		YOUTH	YOUTH SERVICES 24,629				
Total			36,375				

PUYKIW KIWANIS CLUB OF PUYALLUP 91-6034556 Federal Statements

91-6034556

FYE: 9/30/2010

Statement 4 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Expenses	\$
CONVENTIONS/CONFERENCES	3,260
KIWANIS INTERNATIONAL DUE	7,616
MEMBERSHIP	1,386
BOD INSURANCE	982
TECH SUPPORT	164
WEB SITE MAINTENANCE	330
DIRECTORY	235
POSTAGE	44
BOD MEETINGS-PRINTING REP	125
GUEST MEALS-SPEAKERS	440
LT GOVNERNOR SUPPORT	500
REMOTE ACCOUNTING FEE	165
LICENSES	10
PO BOX	96
SUPPLIES	130
Total	\$ 15,483

PUYKIW KIWANIS CLUB OF PUYALLUP

91-6034556

Federal Statements

FYE: 9/30/2010

<u>Statement 5 - Form 990-EZ, Part III, Line 31 - Statement of Program Service</u> <u>Accomplishments</u>

Description

INTERNATIONAL RELATIONS-SUPPORT TO WORLD VISION AND STUDENT EXCHANGE PROGRAM SPECIAL NEED SUPPORT TO AREA FOOD BANKS, SPECIAL OLYMPICS, AND OTHER COMMUNITY PROGRAMS