See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490
**Form 990-T**

**Exempt Organization Business Income Tax Return**

For calendar year 2009 or other tax year beginning __________, and ending __________.

**Name of organization**

DUCKS UNLIMITED, INC.

Number, street, and room or suite no. If a P.O. box, see page 8 of instructions

ONE WATERFOWL WAY

City or town, state, and ZIP code

MEMPHIS, TN 38120

**Employer identification number**

13-5643799

**Unrelated business activity codes**

See instructions for Block E on page 9

---

**Part I**

**Unrelated Trade or Business Income**

<table>
<thead>
<tr>
<th>(A) Income</th>
<th>(B) Expenses</th>
<th>(C) Net</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Gross receipts or sales</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>1b Less returns and allowances</td>
<td>Balance</td>
<td>1c</td>
</tr>
<tr>
<td>2 Cost of goods sold (Schedule A, line 7)</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>3 Gross profit Subtract line 2 from line 1c</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>4a Capital gain net income (attach Schedule D)</td>
<td>4a</td>
<td></td>
</tr>
<tr>
<td>4b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)</td>
<td>4b</td>
<td></td>
</tr>
<tr>
<td>4c Capital loss deduction for trusts</td>
<td>4c</td>
<td></td>
</tr>
<tr>
<td>5 Income (loss) from partnerships and S corporations (attach statement)</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6 Rent income (Schedule C)</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>7 Unrelated debt-financed income (Schedule E)</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F)</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)</td>
<td>9</td>
<td></td>
</tr>
<tr>
<td>10 Exploited exempt activity income (Schedule I)</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>11 Advertising income (Schedule J)</td>
<td>11</td>
<td>2,003,570</td>
</tr>
<tr>
<td>12 Other income (See page 10 of the instructions, attach schedule)</td>
<td>12</td>
<td></td>
</tr>
<tr>
<td>13 Total Combine lines 3 through 12</td>
<td>13</td>
<td>2,003,625</td>
</tr>
</tbody>
</table>

**Part II**

**Deductions Not Taken Elsewhere**

(Except for contributions, deductions must be directly connected with the unrelated business income.)

<table>
<thead>
<tr>
<th>(A) Less depreciation claimed on Schedule A and elsewhere on return</th>
<th>(B) Depletion</th>
<th>(C) Less depletion claimed on Schedule A and elsewhere on return</th>
</tr>
</thead>
<tbody>
<tr>
<td>21</td>
<td>22a</td>
<td>22b</td>
</tr>
</tbody>
</table>

**Phone number**

901-758-3825

**Signatures**

Randy L. Graves, President and CEO
### Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>(2)</td>
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<tr>
<td>(3)</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Totals</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Enter here and on page 1, Part I, line 9, column (A) and on page 1, Part I, line 9, column (B).

### Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

<table>
<thead>
<tr>
<th>1. Description of exploited activity</th>
<th>2. Gross unrelated business income from trade or business</th>
<th>3. Expenses directly connected with production of unrelated business income</th>
<th>4. Net income (loss) from unrelated trade or business (column 2 minus column 3)</th>
<th>5. Gross income from activity that is not unrelated business income</th>
<th>6. Expenses attributable to column 5</th>
<th>7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>(2)</td>
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<tr>
<td>(3)</td>
<td></td>
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<tr>
<td>(4)</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Totals</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Enter here and on page 1, Part I, line 10, column (A) and on page 1, Part I, line 10, column (B) and on page 1, Part II, line 26.

### Schedule J - Advertising Income

#### Part I Income From Periodicals Reported on a Consolidated Basis

<table>
<thead>
<tr>
<th>1. Name of periodical</th>
<th>2. Gross advertising income</th>
<th>3. Direct advertising costs</th>
<th>4. Advertising gain or (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7</th>
<th>5. Circulation income</th>
<th>6. Readership costs</th>
<th>7. Excess readership costs (column 6 minus column 5, but not more than column 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) ATCH 2</td>
<td>2,003,570.</td>
<td>1,589,745.</td>
<td>413,825.</td>
<td>451,512.</td>
<td>2,848,934.</td>
<td>413,825.</td>
</tr>
<tr>
<td>(2)</td>
<td></td>
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<td></td>
<td></td>
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<td>(3)</td>
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<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Totals (carry to Part II, line 5)</td>
<td>2,003,570.</td>
<td>1,589,745.</td>
<td>413,825.</td>
<td>451,512.</td>
<td>2,848,934.</td>
<td>413,825.</td>
</tr>
</tbody>
</table>

#### Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

<table>
<thead>
<tr>
<th>1. Name of periodical</th>
<th>2. Gross advertising income</th>
<th>3. Direct advertising costs</th>
<th>4. Advertising gain or (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7</th>
<th>5. Circulation income</th>
<th>6. Readership costs</th>
<th>7. Excess readership costs (column 6 minus column 5, but not more than column 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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<td>(2)</td>
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<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) Totals from Part I</td>
<td>2,003,570.</td>
<td>1,589,745.</td>
<td>413,825.</td>
<td></td>
<td></td>
<td>413,825.</td>
</tr>
</tbody>
</table>

#### Totals, Part II (lines 1-5) | 2,003,570. | 1,589,745. | 413,825. | 413,825. |

#### Schedule K - Compensation of Officers, Directors, and Trustees

<table>
<thead>
<tr>
<th>1. Name</th>
<th>2. Title</th>
<th>3. Percent of time devoted to business</th>
<th>4. Compensation attributable to unrelated business</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td>Total:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Enter here and on page 1, Part II, line 14.
### SCHD. 1 - PART 1. ADVERTISING INCOME REPORTED ON A CONSOLIDATED BASIS

<table>
<thead>
<tr>
<th>NAME OF PERIODICAL</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>GROSS ADVERTISING</td>
<td>DIRECT ADVERTISING</td>
<td>ADVERTISING GAIN OR LOSS</td>
<td>CIRCULATION INCOME</td>
<td>READERSHIP COSTS</td>
<td>READERSHIP COSTS</td>
</tr>
<tr>
<td>DU MAGAZINE</td>
<td>2,003,570</td>
<td>1,589,745</td>
<td>451,512</td>
<td>2,848,934</td>
<td></td>
<td></td>
</tr>
<tr>
<td>COLUMN TOTALS</td>
<td>2,003,570</td>
<td>1,589,745</td>
<td>413,825</td>
<td>451,512</td>
<td>2,848,934</td>
<td>413,825</td>
</tr>
</tbody>
</table>
Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box.
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only.

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Name of Exempt Organization
Ducks Unlimited, Inc.

Number, street, and room or suite no. If a P.O. box, see instructions
One Waterfowl Way

City, town or post office, state, and ZIP code For a foreign address, see instructions
Memphis, TN 38120

Check type of return to be filed (file a separate application for each return):

☐ Form 990
☑ Form 990-T (corporation)
☑ Form 990-T (sec 401(a) or 408(a) trust)
☐ Form 990-EO
☐ Form 990-T (trust other than above)
☐ Form 990-PF
☐ Form 1041-A
☐ Form 4720
☐ Form 5227
☐ Form 6069
☐ Form 8870

The books are in the care of: Bob Mills.

Telephone No. ☐ (901) 758-3825 FAX No. ☐ (901) 758-3850

☐ If the organization does not have an office or place of business in the United States, check this box.

☐ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) if this is for the whole group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until May 15, 2011, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
   ☐ calendar year 2011 or
   ✔ tax year beginning July 1, 2009, and ending June 30, 2010.

2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.

3b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

3c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Caution: If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Cat No 27916D Form 8868 (Rev 4-2009)
FORM 990T - LINE 5 - INCOME (LOSS) FROM PARTNERSHIPS

STARION BANCORPORATION

INCOME (LOSS) FROM PARTNERSHIPS

55.
### Part III  Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation on page 15
- Controlled group members (sections 1561 and 1563) check here □
- See instructions and
  - Enter your share of the $50,000, $25,000, and $9,925,000 taxable income brackets (in that order)
    - (1) $ □
    - (2) $ □
    - (3) $ □
  - Enter organization's share of (1) Additional 5% tax (not more than $11,750) □
  - (2) Additional 3% tax (not more than $100,000) □
- Income tax on the amount on line 34 □

36 Trusts Taxable at Trust Rates. See instructions for tax computation on page 16 Income tax on the amount on line 34 from □ Tax rate schedule or □ Schedule D (Form 1041) □

37 Proxy tax. See page 16 of the instructions □

38 Alternative minimum tax □

39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies □

### Part IV  Tax and Payments

40 Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) □

40a Other credits (see page 16 of the instructions) □

40b General business credit Attach Form 3800 □

40c Credit for prior year minimum tax (attach Form 8801 or 8827) □

40d Total credits. Add lines 40a through 40d □

41 Subtract line 40e from line 39 □

42 Other taxes Check if □ Form 4255 □ Form 8611 □ Form 8867 □ Form 8866 □ Other (attach schedule) □

43 Total tax. Add lines 41 and 42 □

44 Payments A 2008 overpayment credited to 2009 □

44a 2009 estimated tax payments □

44b Tax deposited with Form 8868 □

44c Foreign organizations' Tax paid or withheld at source (see instructions) □

44d Backup withholding (see instructions) □

44e Other credits and payments □

44f Total payments. Add lines 44a through 44l □

46 Estimated tax penalty (see page 4 of the instructions) Check if Form 2220 is attached □

47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed □

48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid □

49 Enter the amount of line 48 you want credited to 2010 estimated tax □

### Part V  Statements Regarding Certain Activities and Other Information (see instructions on page 17)

1 At any time during the 2009 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If Yes, the organization may have to file Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. If Yes, enter the name of the foreign country here □

2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? □

3 Enter the amount of tax-exempt interest received or accrued during the tax year □ $ □

### Schedule A - Cost of Goods Sold

1 Inventory at beginning of year □

2 Purchases □

3 Cost of labor □

4a Additional section 263A costs (attach schedule) □

4b Other costs (attach schedule) □

5 Total. Add lines 1 through 4b □

### Sign Here

Signature of officer □

Date □

Title □

May the IRS discuss this return with the preparer shown below (see instructions)? □

### Paid Preparer's Use Only

Preparer's signature □

Muller Russell □

Date 3/29/11 □

Check if self-employed □

Preparer's SSN or PTIN P00079334 □

KPMG LLP □

50 NORTH FRONT STREET, SUITE 900 □

MEMPHIS, TN 38103 □

Phone no 901-523-3131 □

Form 990-T (2009) □
Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)
(see instructions on page 18)

1 Description of property

(1)  
(2)  
(3)  
(4)  

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)  
(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)  
3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)

(1)  
(2)  
(3)  
(4)  

(c) Total income  Add totals of columns 2(a) and 2(b) Enter here and on page 1, Part I, line 6, column (A)  

Schedule E - Unrelated Debt-Financed Income (see instructions on page 19)

1 Description of debt-financed property  
2 Gross income from or allocable to debt-financed property  
3 Deductions directly connected with or allocable to debt-financed property

(a) Straight line depreciation (attach schedule)  
(b) Other deductions (attach schedule)

(1)  
(2)  
(3)  
(4)  

4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)  
5 Average adjusted basis of or allocable to debt-financed property (attach schedule)  
6 Column 4 divided by column 5  
7 Gross income reportable (column 2 x column 6)  
8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))

(1)  
(2)  
(3)  
(4)  

Totals Enter here and on page 1, Part I, line 7, column (A)  

Total dividends-received deductions included in column 8 Enter here and on page 1, Part I, line 7, column (B)

 Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions on page 20)

1 Name of controlled organization  
2 Employer identification number  
3 Net unrelated income (loss) (see instructions)  
4 Total of specified payments made  
5 Part of column 4 that is included in the controlling organization's gross income  
6 Deductions directly connected with income in column 5

(1)  
(2)  
(3)  
(4)  

Nonexempt Controlled Organizations

7. Taxable income  
8. Net unrelated income (loss) (see instructions)  
9 Total of specified payments made  
10 Part of column 9 that is included in the controlling organization's gross income  
11 Deductions directly connected with income in column 10

(1)  
(2)  
(3)  
(4)  

Add columns 5 and 10 Enter here and on page 1, Part I, line 6, column (A)  
Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)

Totals Enter here and on page 1, Part I, line 7, column (A)  

Form 990-T (2009)