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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)

▶ For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

2005**Open to Public Inspection**

A For the 2005 calendar year, or tax year beginning 6/01, 2005, and ending 5/31, 2006

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

C Please use IRS label or print or type. See Specific Instructions.
PALOUSE HILLS DOG FANCIERS, INC.
C/O MARIE TAYLOR
131953 SR 26
COLFAX, WA 99111

D Employer identification number 91-6035250

E Telephone number (208) 882-0420

F Group Exemption Number

G Accounting method ☒ Cash ☐ Accrual
Other (specify)

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

I Web site: WWW.PHDF.ORG

J Organization type (check only one) — ☒ 501(c) (4) (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization chooses to file a return, be sure to file a complete return. **Some states require a complete return.**

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$100,000 or more, file Form 990 instead of Form 990-EZ. \$ 36,821.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions)

1 Contributions, gifts, grants, and similar amounts received	1	<u>1,546.</u>
2 Program service revenue including government fees and contracts	2	<u>34,424.</u>
3 Membership dues and assessments	3	<u>570.</u>
4 Investment income	4	<u>281.</u>
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 (line 5a less line 5b) (attach schedule)	5c	
6 Special events and activities (attach schedule) If any amount is from gaming, check here ☐		
a Gross revenue (not including \$ <u> </u> reported on line 1)	6a	
b Less direct expenses other than fundraising expenses	6b	
c Net income or (loss) from special events and activities (line 6a less line 6b)	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 (line 7a less line 7b)	7c	
8 Other revenue (describe <u> </u>)	8	
9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	<u>36,821.</u>
10 Grants and similar amounts paid (attach schedule)	10	
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 <u> </u>)	16	<u>34,100.</u>
17 Total expenses (add lines 10 through 16)	17	<u>34,100.</u>
18 Excess or (deficit) for the year (line 9 less line 17)	18	<u>2,721.</u>
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	<u>19,718.</u>
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	<u>22,439.</u>

Part II Balance Sheets — If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ. (See Instructions)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	<u>19,718.</u>	<u>22,439.</u>
23 Land and buildings		
24 Other assets (describe <u> </u>)		
25 Total assets	<u>19,718.</u>	<u>22,439.</u>
26 Total liabilities (describe <u> </u>)	<u>0.</u>	<u>0.</u>
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	<u>19,718.</u>	<u>22,439.</u>

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

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Part III Statement of Program Service Accomplishments (See Instructions)**Expenses**What is the organization's primary exempt purpose? **SEE STATEMENT 2**

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

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

28	ORGANIZED SHOWS FOR AMERICAN KENNEL CLUB, ASSISTED WITH 4H CLUB AND DOG RELATED EVENTS, PROVIDED DONATIONS TO ANIMAL CHARITIES		
	(Grants \$) If this amount includes foreign grants, check here ☐	28 a	34,100.
29			
	(Grants \$) If this amount includes foreign grants, check here ☐	29 a	
30			
	(Grants \$) If this amount includes foreign grants, check here ☐	30 a	
31	Other program services (attach schedule)		
	(Grants \$) If this amount includes foreign grants, check here ☐	31 a	
32	Total program service expenses (add lines 28a through 31a)	32	34,100.

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

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
SEE STATEMENT 3		0.	0.	0.

Part V Other Information (Note the attachment requirement in the instructions) **SEE STATEMENT 4**

	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		X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes		X
35 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	N/A	
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If 'Yes,' att a strmnt.)		X
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions 37 a	0.	
b Did the organization file Form 1120-POL for this year?		X
38 a 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 unpaid at the start of the period covered by this return?		X
b If 'Yes,' attach the sch specified in the ln 38 instructions and enter the amount involved 38 b	N/A	
39 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 39 a	N/A	
b Gross receipts, included on line 9, for public use of club facilities 39 b	N/A	
40 a 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		
b 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach an explanation 40 b		X
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d Enter amount of tax on line 40c reimbursed by the organization		0.

Part V Other Information (Note the attachment requirement in the instructions) (Continued)**41** List the states with which a copy of this return is filed **▶ NONE****42 a** The books are in care of **▶ MARIE TAYLOR**Telephone no. **▶ (509) 397-4508**Located at **▶ 131953 SR 26, COLFAX WA**ZIP + 4 **▶ 99111****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)?

	Yes	No
42b		X
42c		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.

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 **▶ ☐ N/A**and enter the amount of tax-exempt interest received or accrued during the tax year **▶ 43****N/A****Please 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.

▶ *m Taylor*

Signature of officer

Date

10-5-10**▶ Treasurer**

Type or print name and title

Paid Preparer's Use OnlyPreparer's signature **▶ BRAD LEWIS** *Brad Lewis*

Date

10-5-2010Check if self-employed **▶ ☐**Preparer's SSN or PTIN (See General Instruction W) **▶ N/A**Firm's name (or yours if self-employed), address, and ZIP + 4 **▶ HAYDEN, ROSS & CO.
315 S. ALMON STREET / PO BOX 9043
MOSCOW, ID 83843-1543**

EIN

▶ N/APhone no **▶ (208) 882-5547**

BAA

TEEA0812L 02/06/06

Form 990-EZ (2005)

STATEMENT 1
FORM 990-EZ, PART I, LINE 16
OTHER EXPENSES

AGILITY EXPENSES	\$ 1,070.
AKC APPLICATIONS	105.
APPLICATION FEE	270.
CLUB AWARDS	663.
CLUB PICNICS & PARTIES	56.
COMPETITION FEES	17,668.
DONATIONS	2,000.
EQUIPMENT RENTAL	2,550.
INSTRUCTION	1,944.
INSURANCE	659.
MATCH EXPENSE	698.
NEWSLETTER	255.
PROFESSIONAL FEES	20.
REFUNDS	302.
SAFE DEPOSIT BOX	25.
SHOWS SETTLEMENT	4,792.
STAMPS	162.
SUPPLIES	54.
TRIAL EXPENSES	807.
TOTAL	\$ 34,100.

STATEMENT 2
FORM 990-EZ, PART III
ORGANIZATION'S PRIMARY EXEMPT PURPOSE

THE OBJECTS OF THE CLUB SHALL BE: (A) TO FURTHER THE ADVANCEMENT OF ALL BREEDS OF PUREBRED DOGS; (B) TO DO ALL IN ITS POWER TO PROTECT AND ADVANCE THE INTERESTS OF ALL BREEDS OF PUREBRED DOGS AND TO ENCOURAGE SPORTSMANLIKE CONDUCT AT DOG SHOWS AND OBEDIENCE TRIALS; (C) TO CONDUCT SANCTIONED MATCHES, DOG SHOWS AND OBEDIENCE TRIALS UNDER THE RULES OF THE AMREICAN KENNEL CLUB; (D) TO PROMOTE RESPONSIBLE OWNERSHIP OF ALL DOGS.

STATEMENT 3
FORM 990-EZ, PART IV
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED</u>	<u>COMPEN- SATION</u>	<u>CONTRI- BUTION TO EBP & DC</u>	<u>EXPENSE ACCOUNT/ OTHER</u>
GAYE BROCKETT PO BOX 215 ENDICOTT, WA 99125	PRESIDENT 0	\$ 0.	\$ 0.	0.
JUDY ARNESON 401 DEAN ST ENDICOTT, WA 99125	VICE PRESIDENT 0	0.	0.	0.

2005

FEDERAL STATEMENTS
PALOUSE HILLS DOG FANCIERS, INC.
C/O MARIE TAYLOR

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91-6035250

STATEMENT 3 (CONTINUED)
FORM 990-EZ, PART IV
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
MARIE TAYLOR 131953 SR 26 COLFAX, WA 99111	TREASURER 0	\$ 0.	\$ 0.	\$ 0.
KAREN MARQUARDT 377370 HWY 95 DESMET, ID 83824	SECRETARY 0	0.	0.	0.
CINDY CURRY PO BOX 77 ENDICOTT, WA 99125	SECRETARY 0	0.	0.	0.
BOBBIE FOY 1325 MOUNTAIN VIEW ROAD MOSCOW, ID 83843	DIRECTOR 0	0.	0.	0.
DENISE WAITING 1612 ROSE CREEK RD PULLMAN, WA 99163	DIRECTOR 0	0.	0.	0.
MARTI WILKISON 2398 HARMONY OROFINO, ID 83544	DIRECTOR 0	0.	0.	0.
TOTAL		\$ 0.	\$ 0.	\$ 0.

STATEMENT 4
FORM 990-EZ, PART V
REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR
INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT? NO

(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR
INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? NO