

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



Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047 Open to Public Inspection

| A | rui ille 2 | oor calcillar year, or lax year beginning | | enumy | | |
|-----------------------------|---|---|---|---------------------------------------|------------------|--------------------------------------|
| В | Check if applicable | Please C Name of organization | | | D Employer Id | entification number |
| _ | Address | use IRS | 10.4M1012 M0114M | | 01.66 | NO.E.2.0.2 |
| Ļ | change print or TARTMA LIONS CLOB CHARTTABLE TROST | | | | | 95283 |
| Ļ | change | E Telephone r 509 2 | number 248-7711 | | | |
| L | return Termin- | Specific P.O. BOX 421 | ·- | | | |
| - | ation Amende | tions City of town, State of Country, and Zir + 4 | | | Other (specify) | |
| | lreturn Applica | tion Section 501(c)(3) organizations and 4947(a) | 1) nonexempt charitable trusts | H and I are not apr | | tion 527 organizations |
| | pënding | must attach a completed Schedule A (Form 9 | | H(a) Is this a group | | |
| G | Wehsite: | ►N/A | • | H(b) If "Yes," enter n | | / _ |
| J | | tion type (check only one) ► X 501(c) (3) ◀ (inse | rt no) 4947(a)(1) or 5 | 27 H(c) Are all affiliates | | I/A Yes No |
| ~ K | Check he | | | (If "No," attach | a list) | |
| 2010 | | are normally not more than \$25,000 A return is not req | • • | H(d) Is this a separa ganization cove | ered by a group | ruling? Yes X No |
| 2 | | to file a return, be sure to file a complete return | <u> </u> | I Group Exempti | on Number 🟲 | N/A |
| යා ≅, − | | | | | ıf the organizat | ion is not required to attach |
| | | ceipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ | 137,766. | | 90, 990-EZ, or 9 | 990-PF) |
| | Part I | Revenue, Expenses, and Changes in | Net Assets or Fund Ba | lances | | |
| <u>:</u> | 1 | Contributions, gifts, grants, and similar amounts recei | ved | 1 | | |
| | a | Contributions to donor advised funds | 1 | | | |
| ₩ ₩ | b | Direct public support (not included on line 1a) | 1 | | 000. | |
| | C | Indirect public support (not included on line 1a) | 1 | | | |
| SCANNEL | d | Government contributions (grants) (not included on lin | | <u>d </u> | | 1,000. |
| | е | Total (add lines 1a through 1d) (cash \$ | 1,000 noncash \$ | | _) | 1,000. |
| 9 | 2 | Program service revenue including government @sa | 3 | | | |
| 7 | 3 Membership dues and assessments 4 Interest on savings and temporary cash investments NOV 2 6 2010 | | | | | |
| L | 5 | Interest on savings and temporary cash investments. Dividends and interest from securities NOV 2 | 6 2010 S | | 5 | 21,177. |
| NOV 1 5 2010 | 6 a | Gross rents | | a | | |
| 6 | b Less rental expenses OGDEN, UT | | | b | | |
| | | Net rental income or (loss) Subtract-line 6b from line | | | 6c | |
| ENVELOPE POSTIMARIX DAY: | 7 8 a | Other investment income (describe > SECURI | | SETTLEMENT | 7 | 238. |
| E S | 8 a | Gross amount from sales of assets other | (A) Securities | (B) Other | | |
| | ا ت | than inventory | 115,351.8 | a | | |
| Z Z | Ь | Less cost or other basis and sales expenses | 45,578. 8 | b | | |
| 38. | C | Gain or (loss) (attach schedule) | 69,773.8 | c | | |
| Q _n | d | Net gain or (loss) Combine line 8c, columns (A) and (| B) Stmt 1 | | 8d | 69,773. |
| | 9 | Special events and activities (attach schedule) If any a | mount is from gaming , check her | e 🟲 🔛 | | |
| | a | | · · · · · · · · · · · · · · · · · · · | <u>a</u> | | |
| | b | Less direct expenses other than fundraising expenses | | b | | |
| | 100 | Net income or (loss) from special events. Subtract line | | _ 1 | 9c | |
| | I . | Gross sales of inventory, less returns and allowances Less cost of goods sold | 10 | | | |
| | b | Gross profit or (loss) from sales of inventory (attach s | ` | | 10c | |
| | 11 | Other revenue (from Part VII, line 103) | chedule, odbitaci ilile tob itotti il | ne roa | 11 | |
| | 12 | Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 1 | Oc. and 11 | | 12 | 92,188. |
| _ | 13 | Program services (from line 44, column (B)) | 00, 0110 11 | | 13 | 154,755. |
| | ß 14 | Management and general (from line 44, column (C)) | | • | 14 | 9,447. |
| | 14 15 16 | Fundraising (from line 44, column (D)) | | | 15 | |
| ; L | <u> </u> | Payments to affiliates (attach schedule) | | | 16 | |
| _ | 17 | Total expenses. Add lines 16 and 44, column (A) | | | 17 | 164,202. |
| | _ي 18 | Excess or (deficit) for the year Subtract line 17 from I | ne 12 | | 18 | <72,014.> |
| <u> </u> | 19 20 20 | Net assets or fund balances at beginning of year (from | | | 19 | 1,055,981. |
| Z | | Other changes in net assets or fund balances (attach e | · · | Statement | 2 20 | <37,136.> |
| 70 | 21 3001 | Net assets or fund balances at end of year Combine li | | | 21 | 946,831. |
| 12 | 3001 -27-07 | LHA For Privacy Act and Paperwork Reduction Act | Notice, see the separate instruct | ions. | | Form 990 (2007) |

Page 2

| Pa | | | | | d (D) are required for section trusts but optional for other | |
|---------------|--|-------------|-----------|--|--|---------------------------|
| | Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I. | | (A) Total | (B) Program services | (C) Management and general | (D) Fundraising |
| 22a | Grants paid from donor advised funds | | | | | |
| | (attach schedule) | | | | | |
| | (cash \$ 0 • noncash \$ 0 | 9 | | | | |
| 1 | If this amount includes foreign grants, check here | 22a | | | | |
| | Other grants and allocations (attach schedule | *) | | | Statement 3 | |
| | (cash \$154,755 • noncash \$ 0 | | | | | |
| I | If this amount includes foreign grants, check here | 22b | 154,755. | 154,755. | | |
| 23 | Specific assistance to individuals (attach | | | | | |
| ! | schedule) | 23 | | | | |
| 24 | Benefits paid to or for members (attach | | | | | |
| : | schedule) | 24 | | | | |
| 25a | Compensation of current officers, directors, key | | | _ | _ | _ |
| - | employees, etc. listed in Part V-A | 25a | 0. | 0. | 0. | 0. |
| | Compensation of former officers, directors, key | | | _ | | |
| 1 | employees, etc listed in Part V-B | 25b | 0. | 0. | 0. | 0. |
| C | Compensation and other distributions, not included | | | | | |
| | above, to disqualified persons (as defined under | | | | | |
| | section 4958(f)(1)) and persons described in | | | | | |
| | section 4958(c)(3)(B) | 25c | | | | |
| 26 | Salaries and wages of employees not | | | | | |
| | included on lines 25a, b, and c | 26 | | | | |
| 27 | Pension plan contributions not included on | | | | | |
| | lines 25a, b, and c | 27 | | | | |
| 28 | Employee benefits not included on lines | | | | | |
| | 25a · 27 | 28 | | | | |
| 29 | Payroll taxes | 29 | | =0 | | |
| 30 | Professional fundraising fees | 30 | | | | |
| | Accounting fees | 31 | | | | |
| | Legal fees | 32 | | | | |
| 33 | Supplies | 33 | | - 1121 | - | |
| 34 | Telephone | 34 | | | | |
| | Postage and shipping | 35 | | | | |
| 36 | Occupancy | 36 | | | | |
| | Equipment rental and maintenance | 37 | | | | - :- |
| | Printing and publications | 38 | <u>.</u> | _ | | |
| | Travel | 39 | | | | |
| | Conferences, conventions, and meetings | 40 | | | | |
| | Interest | 41 | | | | |
| | Depreciation, depletion, etc. (attach schedule) | 42 | | | | |
| | Other expenses not covered above (itemize): | | 0.447 | | 9,447. | |
| | TRUST SERVICE FEES | 43a | | | 7,447. | |
| b . | <u> </u> | 43b | | | | |
| C | | 430 | | | | |
| 0 | | 430 | | | | |
| e . | | 438 | † · | | | |
| Ι. | | 431 | | | | |
| 9 | Total functional expenses. Add lines 22a through | <u>43</u> g | | | | |
| | • | - | | | | |
| | 43g (Organizations completing columns (B)-(D), | | 164,202. | 154,755. | 9,447. | 0. |
| | carry these totals to lines 13-15) | 44 | · | 124,122. | 7,44/. | <u> </u> |
| | nt Costs. Check Life if you are following | | | norted in /B) Decrees | ₂₀₀₀ 2 ► Γ | Yes X No |
| | any joint costs from a combined educational campa es," enter (f) the aggregate amount of these joint co | - | | ported in (B) Program serv (ii) the amount allocated to | | Yes NO N/A . |
| | es, enter (i) the aggregate amount of these joint co the amount allocated to Management and general \$ | | | (ii) the amount allocated to | | N/A |
| 7230 12-27 | the amount anocated to Management and general 4 | | AT , ANO | fire the amount anocated to | n + municipilith & | Form 990 (2007) |
| 12-27 | /•U/ | | | | | 1 01111 330 (2007) |

Part III Statement of Program Service Accomplishments (See the instructions)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

| | at is the organization's primary exempt purpose? GHT AND OTHER CHARITABLE PROJECTS | Program Service Expenses |
|----------|--|--|
| All d | organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of ints served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others) | (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others) |
| а | SIGHT PROJECTS | |
| | | |
| | | |
| | | |
| | (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ | 30,000. |
| b | SOCCER EQUIPMENT YOUTH PROGRAM | |
| | | |
| | | |
| | | |
| | (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ | 6,000. |
| С | LAND ACQUISITION FOR KIWANIS PARK EXPANSION | |
| | | |
| | | |
| | | |
| | (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ | 118,755. |
| d | | |
| | | |
| | | |
| | | |
| | (Grants and allocations \$) If this amount includes foreign grants, check here | |
| е | Other program services (attach schedule) | |
| , | (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ | 154,755. |
| <u> </u> | Total of Program Service Expenses (should equal line 44, column (B), Program services) | |
| | | Form 990 (2007) |

| Form | 1 990 (| 2007)YAKIMA LIONS (| LUB CHARITABLE TH | RUST | 91-6 | 095283 Page 4 |
|-----------------------------|----------|--|--------------------------------------|--------------------------|--|----------------------|
| Pa | rt IV | Balance Sheets (See the Instructions.) | | | | |
| Note | | ere required, attached schedules and amounts will be for end-of-year amounts only. | thin the description column | (A) Beginning of year | | (B) End of year |
| | | | | | | |
| | 45 | Cash · non-interest-bearing | - | | 45 | |
| | 46 | Savings and temporary cash investments | - | | 46 | |
| | 47 - | | 1 1 | | | |
| | | Accounts receivable | 47a | | | |
| | b | Less: allowance for doubtful accounts | 47b | | 47c | |
| | 48 a | Pledges receivable | 48a | | | |
| | ь | Less: allowance for doubtful accounts | 48b | | 48c | |
| | 49 | Grants receivable | 100 | <u> </u> | 49 | |
| | 50 a | Receivables from current and former officers, d. | rectors, trustees, and | | | |
| | | key employees | · | | 50a | |
| | ь | Receivables from other disqualified persons (as | defined under section | | | |
| ţ | | 4958(f)(1)) and persons described in section 49 | 58(c)(3)(B) | | 50b | |
| Assets | 51 a | Other notes and loans receivable | 51a | | | |
| ⋖ | b | Less allowance for doubtful accounts | 51b | | 51c | |
| | 52 | Inventories for sale or use | - | | 52 | |
| | 53 | Prepaid expenses and deferred charges | - 4 - | 1 055 001 | 53 | 046 021 |
| | ł | Investments - publicly-traded securities Stmt | . — — — | 1,055,981. | | 946,831. |
| | 1 - | Investments - other securities | Cost FMV | | 54b | **** |
| | 55 a | Investments - land, buildings, and equipment: basis | 55a | | | |
| | | equipment, basis | 000 | | | |
| | ь | Less accumulated depreciation | 55b | | 55c | |
| | 56 | Investments - other | | | 56 | |
| | 57 a | Land, buildings, and equipment: basis | 57a | | | |
| | b | Less: accumulated depreciation | 57b | | 57c | |
| | 58 | Other assets, including program-related investments | | | | |
| | | (describe ► |) | 1 055 001 | 58 | 046 021 |
| | 59 | Total assets (must equal line 74). Add lines 45 | through 58 | 1,055,981. | | 946,831. |
| | 60 | Accounts payable and accrued expenses | - | | 60 | |
| | 61 | Grants payable Deferred revenue | - | | 62 | · · |
| es | 63 | Loans from officers, directors, trustees, and key | v amployees | | 63 | |
| iabilitie | ì | 1 Tax-exempt bond liabilities | y employees | | 64a | |
| iak | | Mortgages and other notes payable | | | 64b | |
| _ | 65 | Other liabilities (describe |) [| | 65 | |
| | | | | | | |
| _ | 66 | Total liabilities. Add lines 60 through 65 | | 0. | 66 | 0. |
| | Orga | anizations that follow SFAS 117, check here ▶ | X and complete lines | | | |
| S | | 67 through 69 and lines 73 and 74. | | 1 055 001 | | 946,831. |
| a S | 67 | Unrestricted | - | 1,055,981. | 67 | 940,031. |
| 3ala | 68 69 | Temporarily restricted Permanently restricted | - | | 69 | |
| ā | 1 | anizations that do not follow SFAS 117, check | here Dand | | 03 | |
| Ē | U.g. | complete lines 70 through 74. | nore > und | | | |
| ō | 70 | Capital stock, trust principal, or current funds | | | 70 | |
| Net Assets or Fund Balances | 71 | Paid-in or capital surplus, or land, building, and | equipment fund | | 71 | |
| As | 72 | Retained earnings, endowment, accumulated in | | | 72 | |
| Ne T | 73 | Total net assets or fund balances. Add lines 67 throa | ugh 69 or lines 70 through 72 | | | |
| | | (Column (A) must equal line 19 and column (B) must | | 1,055,981. | | 946,831. 946,831. |
| | 74 | Total liabilities and net assets/fund balances | 1,055,981. | 74 | 946,831. | |

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the

| a Total revenue, gains, and other support per audited financial statements | а | N/A |
|--|--------------|-----|
| Amounts included on line a but not on Part I, line 12: | | |
| 1 Net unrealized gains on investments | | |
| 2 Donated services and use of facilities b2 | | |
| 3 Recoveries of prior year grants b3 | | |
| 4 Other (specify): b4 | | |
| Add lines b1 through b4 | b | |
| Subtract line b from line a | С | |
| d Amounts included on Part I, line 12, but not on line a: | | |
| 1 Investment expenses not included on Part I, line 6b | | |
| 2 Other (specify): d2 | | |
| Add lines d1 and d2 | d | |
| 8 Total revenue (Part I, line 12). Add lines c and d | ▶ e | |
| Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expense | s per Return | |
| a Total expenses and losses per audited financial statements | а | N/A |
| h Amounts included on line a but not on Part I, line 17: | | |
| 1 Donated services and use of facilities b1 | | |
| 2 Prior year adjustments reported on Part I, line 20 | | |
| 3 Losses reported on Part I, line 20 b3 | | |
| 4 Other (specify):b4 | | |
| Add lines b1 through b4 | ь | |
| C Subtract line b from line a | С | |
| d Amounts included on Part I, line 17, but not on line a: | | |
| 1 Investment expenses not included on Part I, line 6b | | |
| 2 Other (specify): d2 | | |
| Add lines d1 and d2 | d | |
| 8 Total expenses (Part I, line 17). Add lines c and d | ▶ e | |

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the 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 & deferred compensation plans | (E) Expense account and other allowances |
|--------------------------------------|--|--|--|--|
| REX MARBLE | TRUSTEE | | | |
| P.O. BOX 421 | | | | |
| YAKIMA, WA. 98907 | 0.00 | 0. | 0. | 0. |
| BRENT CLEMENT | TRUSTEE | | | |
| P.O. BOX 421 | | | | |
| YAKIMA, WA. 98907 | 0.00 | 0. | 0. | 0. |
| SANDY FALON | TRUSTEE | | | |
| P.O. BOX 421 | 0.00 | | | |
| YAKIMA, WA. 98907 | 0.00 | 0. | 0. | 0. |
| CINDY CARD | TRUSTEE | | | |
| P.O. BOX 421 | 0.00 | 0. | 0. | 0. |
| YAKIMA, WA. 98907 RICHARD ELLIOTT | TRUSTEE | 0. | 0. | 0. |
| P.O. BOX 421 | IROSIEE | | | |
| YAKIMA, WA. 98907 | 0.00 | ο. | 0. | 0. |
| STEVE NOBLE | TRUSTEE | | | |
| P.O. BOX 421 | | | - | |
| YAKIMA, WA. 98907 | 0.00 | 0. | 0. | 0. |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| | 990 (2007) YAKIMA LIONS CLUB CHA | | | <u>91-6095</u> | <u> 283</u> | | age 6 |
|------|--|-------------------------------|----------------------|-------------------|-------------|--|--------------|
| Pa | rt V-A Current Officers, Directors, Trustees, and Ke | ey Employees (continu | ed) | | | Yes | |
| 75 a | Enter the total number of officers, directors, and trustees permitted | to vote on organization bus | siness at board | | | | |
| | meetings | | > | 6 | | | |
| b | Are any officers, directors, trustees, or key employees listed in Form | 990. Part V-A, or highest of | compensated emp | lovees | | | |
| - | listed in Schedule A, Part I, or highest compensated professional and | | | | | | |
| | Part II-A or II-B, related to each other through family or business rela- | | | | | | |
| | the individuals and explains the relationship(s) | | | | 75b | | <u>X</u> |
| C | Do any officers, directors, trustees, or key employees listed in Form | 990. Part V-A, or highest c | ompensated empl | ovees | | | |
| | listed in Schedule A, Part I, or highest compensated professional an | | | | | | |
| | Part II-A or II-B, receive compensation from any other organizations, | • | able, that are relat | ed to the | | | |
| | organization? See the instructions for the definition of "related organ | nization." | | | 75c | | <u>X</u> |
| | If "Yes," attach a statement that includes the information described | in the instructions. | | | | | |
| d | | | | | 75d | \bigsqcup | <u>X</u> |
| Pa | TV-B Former Officers, Directors, Trustees, and Ke | | | | | | |
| | Benefits (If any former officer, director, trustee, or key er the year, list that person below and enter the amount of co | | | | | | |
| | and your, not that person below and office the amount of oc- | The result of other benefit | (C) Compensation | (D) Contributions | 10 0 | E) Expe | |
| | (A) Name and address | (B) Loans and Advances | (If not paid, | employee benefi | i a | ccount a | and |
| | None | | enter -0-) | compensation pla | s othe | er allow | ances |
| | | | | | | | |
| | | | | | | | |
| | | | | | + | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | + | | |
| | | | | | | | |
| | | | | | | | |
| | | | | <u> </u> | | | |
| | | | | | 1 | | |
| | | | | | | | |
| | | | | | + | | |
| | | | | | | | |
| | | | | | - | | |
| | | | | <u> </u> | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | 1 | | |
| | | | | | ı | | |
| | | | | | | | |
| | | | | | Ť | | |
| | | | | | | | |
| | | | | | | | |
| Pa | 1 VI Other Information (See the Instructions) | | | | | Yes | No |
| 76 | Did the organization make a change in its activities or methods of co | onducting activities? If "Yes | s," attach a detaile | ed | | | |
| | statement of each change | | | | 76 | igsqcup | <u>X</u> |
| 77 | Were any changes made in the organizing or governing documents I | but not reported to the IRS | 3? | | 77 | | X |
| | If "Yes," attach a conformed copy of the changes. | | | | | | , |
| 78 a | Did the organization have unrelated business gross income of \$1,00 | 0 or more during the year | covered by this ref | | 78a | | <u>X</u> |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | | | N/A | 78b | <u> </u> | |
| 79 | Was there a liquidation, dissolution, termination, or substantial contr | action during the year? If ' | 'Yes," attach a sta | tement | 79 | <u> </u> | X |
| 80 a | Is the organization related (other than by association with a statewid | le or nationwide organizati | on) through comm | on | | | |
| | membership, governing bodies, trustees, officers, etc., to any other | exempt or nonexempt orga | anization? | | 80a | <u>,</u> | X |
| b | If "Yes," enter the name of the organization ► N/A | | | | | | |
| | | and check whether it is | exempt or L_ | nonexempt | | | |
| | Enter direct and indirect political expenditures. (See line 81 instruction | ons.) | 81a | 0. | | | ., |
| b | Did the organization file Form 1120-POL for this year? | | | | 81b | | X |
| | | | | | Form | 990 (| 2007) |

| b Did the organization comply with the disclosure requirements relating to <i>guid</i> pro <i>quid</i> pro <i></i> | Form | 990 (2007) YAKIMA LIONS CLUB CHARITABLE TRUST 91-609 | 95283 | | age 7 |
|--|-------|--|----------|--|--|
| less than fair rental value? b If Yes', you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expanse in Part III. See instructions in Part III.) 33 I Did the organization comply with the public inspection requirements for returns and exemption applications? 34 Did the organization comply with the disclosure requirements relating to quid pro quid contributions? 35 If Yes', did the organization controllutions or gifts that were not tax deductable? 36 Did the organization nebut any contributions or gifts were not tax deductable? 37 If Yes', did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductable? 38 Si Si(P(A)I, (6), or (6) Were substantially all dues nondeductable by members? 39 If Yes' was answered to either 65 a or 85b, do not complete 85 through 85h below unless the organization received a waver for prory tax oved of the prior yes. 40 Did the organization nestor only in house libbying expenditures of \$2,000 or less? 50 If Yes' was answered to either 65 a or 85b, do not complete 85 through 85h below unless the organization received a waver for prory tax oved of the prior yes. 51 Eachon 152(9) lobbying and political expenditures (ine 85d less 85e) 52 Section 152(9) lobbying and political expenditures (ine 85d less 85e) 53 Si Si (P(A) A BSB N/A | Par | VI Other Information (continued) | | Yes | No |
| b if Yes,* you may indicate the value of these items hers. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 33 Did the organization comply with the public inspection requirements for returns and exemption applications? 35 Did the organization comply with the disclosure requirements relating to <i>quid pro quid co</i> contributions? 36 Did the organization comply with the disclosure requirements relating to <i>quid pro quid co</i> contributions or grifts were not tax deductible? 36 Dif Yes,* quid the organization broutles with every solicitation an express statement that such contributions or grifts were not tax deductible? 36 Soft(9/4), 20, or (8) Were substantially all dues nondeductible by members? 36 Did the organization make only in house lobbying expenditures of \$2,000 or less? 37 N/A 38 Did Hore's was answered to either \$5a or 85b, do not complete 85c through 85h below unless the organization received a waver for proxy tax owed for the prior year. 4 Dues, assessments, and similar amounts from members 4 Section 162(b) obbying and political expenditures 4 Section 162(b) obbying and political expenditures (ine 85d less 85e) 5 Did His section 803(6)(1)(A) dues notices 4 Section 162(6) obbying and political expenditures (ine 85d less 85e) 5 Did (97) organizations elect to pay the section 803(e) tax on the amount on line 85f? 5 Did (97) organizations. Enter: a linitation fees and capital contributions included on line 12 5 Soft(6/4) organizations. Enter: a Cross income from members or shareholders 5 Did (97) organizations. Enter: a Gross income from members or shareholders 5 Did (97) organizations. Enter: a Gross income from members or shareholders 5 Did (97) organizations. Enter: a Gross income from members or shareholders 5 Organization or partnership. 5 Organization organization and capital contributions included on line 12 6 Organization organization shareholders 5 Organization organizations. Cond not enable to the sources 5 Did (97) | 82 a | Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially | , | | |
| amount as revenue in Part I or as an expense in Part II. See instructions in Part III. | | less than fair rental value? | 82a | ļ | X |
| See matructions in Part III.) 33 | b | if "Yes," you may indicate the value of these items here. Do not include this | | | |
| 33 | | · · · · · · · · · · · · · · · · · · · | | | |
| b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? 43 Did the organization solicit any contributions or gifts that were not tax deductible? 54 Tif Yes," did the organization include with very solicitation an express statement that such contributions or gifts were not tax deductible? 55 4 507(c)/l, 0), 60, 76 Were substantially all dues nondeductible by members? 56 3 507(c)/l, 0), 60, 76 Were substantially all dues nondeductible by members? 57 N/A 58 b b the organization make only in-house lobbying expenditures of \$2,000 or less? 16 Yes, 7 was answered to ether \$5a or 85b, 60 not complete 85c through 85h below unless the organization received a waver for proxy tax owed for the prory vear. 58 colorities and political expenditures of \$2,000 or less? 16 Taxable amount of lobbying and political expenditures of \$2,000 or less? 17 Taxable amount of lobbying and political expenditures of \$2,000 or less? 18 Set ton 182(e) lobbying and political expenditures of \$2,000 or less? 18 Set ton 182(e) lobbying and political expenditures of \$2,000 or less? 18 Set ton 182(e) lobbying and political expenditures of \$2,000 or less? 18 Set ton 182(e) lobbying and political expenditures of \$2,000 or less? 18 Set ton 182(e) lobbying and political expenditures of \$2,000 or less? 18 Set ton 182(e) lobbying and political expenditures for the following tax year? 18 Set (sold) (sol | | (See instructions in Part III.) | _ | | |
| 84 a Did the organization solicit any contributions or gifts that were not tax deductible? 85 if Yes,** did the organization miclude with every solicitation an express statement that such contributions or gifts were not tax deductible? 86 if Yes,** did the organization miclude with every solicitation an express statement that such contributions or gifts were not tax deductible? 87 if Yes,** did the organization make only inhouse lobbying expenditures of \$2,000 or less? 88 if N/A 89 if Yes,** was answered to either 85 a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proty tax owed for the prior year. 89 if Yes,** was answered to either 85 a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proty tax owed for the prior year. 89 if Yes,** controlled the proty tax owed for the prior year. 80 if Yes,** connected with expenditures (size, 85d less 85e) 80 if Yes,** connected with expenditures (size, 85d less 85e) 81 if Yes,** connected with expenditures (size, 85d less 85e) 82 if Yes,** connected with expenditures (size, 85d less 85e) 83 if N/A 84 if Yes,** connected with expenditures (size, 85d less 85e) 84 if Yes,** connected with expenditures (size, 85d less 85e) 85 if N/A 85 if Yes,** connected with expenditures (size, 85d less 85e) 85 if N/A 85 if Yes,** connected with expenditures (size, 85d less 85e) 85 if Yes,** connected with expenditures (size, 85d less 85e) 85 if Yes,** connected with expenditures (size, 85d less 85e) 85 if Yes,** connected with expenditures (size, 85d less 85e) 85 if Yes,** connected with expenditures (size, 85d less 85e) 85 if Yes,** connected with expenditures (size, 85d less 85e) 85 if Yes,** connected with expenditures (size, 85d less 85e) 85 if Yes,** complete Part Xi 86 if Xes,** (size, 85d less 85e) 87 if Yes,** complete Part Xi 88 if Xes,** (size, 85d less 85e) 88 | 83 a | Did the organization comply with the public inspection requirements for returns and exemption applications? | 83a | | |
| b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not act accelutable? 5 a \$67(c)(t), (t), or (f) Were substantially all dues nondeductible by members? N / A 5 b Ot the organization make only inhouse lobbying expenditures of \$2,000 or less? N / A 5 b Ot the organization make only inhouse lobbying expenditures of \$2,000 or less? N / A 5 b Ot the organization make only inhouse lobbying expenditures of \$2,000 or less? N / A 5 b Ot the organization make only inhouse lobbying expenditures of \$2,000 or less? N / A 5 b Ot the organization make only inhouse lobbying expenditures of \$2,000 or less? N / A 5 b Ot the organization make only inhouse lobbying expenditures of \$2,000 or less? N / A 5 b Ot the organization and political expenditures (ine 65d less 54s) Section 15(2) (lobbying and political expenditures (ine 65d less 54s) D Oses the organization elect to pay the section 6033(e) tax on the amount on line 85f? I section 633(e)(1)(A) dues notices were sent, does the organization of agents of the sent on the section 6033(e) tax on the amount on line 85f? I section 633(e)(1)(A) dues notices were sent, does the organization of add the amount on line 85f? I section 633(e)(1)(A) dues notices were sent, does the organization of add the amount on line 85f? I section 633(e)(1)(A) dues notices were sent of the sent of | b | Did the organization comply with the disclosure requirements relating to quid pro quo contributions? | 83b | Х | |
| tax deductible? N/A \$ a 501 (c)(4), (5), or (6) Were substantially all dues nondeductible by members? N/A Dot the organization make only in-house lobbying expenditures of \$2,000 or less? If 'Yes' was answered to either 85 a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year. C Dues, assessments, and similar amounts from members 4 Section 162(e) lobbying and political expenditures 6 Section 162(e) lobbying and political expenditures (line 85d less 85e) 7 N/A 8 Sig N/A 8 S | 84 a | Did the organization solicit any contributions or gifts that were not tax deductible? | 84a | ļ | X |
| 85 a 501(c)(4), (5), or (6) Were substantially all dues nondeductible by members? N/A Did the organization make only inhouse lobbying expenditures of \$2,000 or less? If 'Yes' was answered to either 85 ar 65 b, do not complete 85 through 85h below unless the organization received a waver for proxy tax owed for the prior year. Dues, assessments, and similar amounts from members Section 162(e) lobbying and political expenditures A gargeagte nondeductible amount of section 6033(e)(1)(A) dues notices A gargeagte nondeductible amount of section 6033(e)(1)(A) dues notices A gargeagte nondeductible amount of section 6033(e)(1)(A) dues notices A gargeagte nondeductible amount of section 6033(e)(1)(A) dues notices A gargeagte nondeductible amount of section 8033(e)(1)(A) dues notices A gargeagte nondeductible amount of section 8033(e)(1)(A) dues notices A gargeagte nondeductible amount of section 8033(e)(1)(A) dues notices A gargeagte nondeductible section 8033(e)(1)(A) dues notices B g lo N/A B g lo R g lo N/A B g | b | | | | ĺ |
| Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either \$5a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year. C. Dues, assessments, and armiler amounts from members 8 Section 162(e) lobbying and political expenditures 8 Set N/A 8 Section 162(e) lobbying and political expenditures (ine 85d less 85e) 9 Does the organization elect to pay the section 8033(e)(1)(A) dues notices 1 Taxable amount of lobbying and political expenditures (ine 85d less 85e) 9 Does the organization less to pay the section 8033(e)(1)(A) dues notices 1 Taxable amount of lobbying and political expenditures (ine 85d less 85e) 1 Solf(c)(T) organizations. Enter is entitle to pay the section 8033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? 8 Solf(c)(T) organizations. Enter: a linitiation fees and capital contributions included on line 12. for public use of club facilities 8 Solf(c)(T) organizations. Enter: a Gross income from members or shareholders 9 Solf(c)(T) organizations. Enter: a Gross income from members or shareholders 9 Solf(c)(T) organizations. Enter: a Gross income from members or shareholders 9 Solf(c)(T) organizations. Enter: a Gross income from members or shareholders 9 Solf(c)(T) organizations. Enter: a Gross income from members or shareholders 9 Solf(c)(T) organizations. Enter: a Gross income from members or shareholders 9 Solf(c)(T) organizations. Enter: a Gross income from members or shareholders 9 Solf(c)(T) organizations. Enter: a Gross income from members or shareholders 9 Solf(c)(T) organizations organization over a Solf or other sources 9 Solf(c)(T) organizations organization over a Solf or other sources 9 Solf(c)(T) organizations organization over a Solf organization organization organization organi | | tar cocconsist | 84b | | |
| If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waver for prioxy tax owed for the prior year. C Dues, assessments, and emiliar amounts from members 8 Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 1 Taxable amount of lobbying and political expenditures (line 85d less 85e) 9 Does the organization elect to pay the section 6033(e) tax on the amount on line 85f 10 it section 6033(e)(1)(A) dues notices were seen, does the organization agree to add the amount on line 85f 10 it section 6033(e)(1)(A) dues notices were seen, does the organization agree to add the amount on line 85f 10 its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? 10 Gross receipts, included on line 12, for public use of club facilities 10 Gross receipts, included on line 12, for public use of club facilities 10 Gross receipts, included on line 12, for public use of club facilities 10 Gross receipts, included on line 12, for public use of club facilities 10 Gross receipts, included on line 12, for public use of club facilities 10 Gross receipts, included on line 12, for public use of club facilities 10 Gross receipts, included on line 12, for public use of club facilities 10 Gross receipts, included on line 12, for public use of club facilities 10 Gross receipts, included on line 12, for public use of club facilities 10 Gross receipts, included on line 12, for public use of club facilities 10 Gross receipts, included on line 12, for public use of club facilities 10 Gross receipts, included on line 12, for public use of club facilities 10 Gross receipts, included on line 12, for public use of club facilities 10 Gross receipts, included on line 12, for public use of club facilities 10 Gross receipts and the support on the suport on the section of section 15 (| 85 a | (-)(-), (-), - (-) · · · · · · · · · · · · · · · · · · · | | L | |
| waiver for proxy tax owed for the prior year. C Dues, assessments, and similar amounts from members 4 Section 162(e) lobbying and political expenditures 8 Aggregate nondeductible amount of section 6033(e) tax on the amount on the S57 I Taxable amount of lobbying and political expenditures (ine 85d less 85e) G Does the organization elect to pay the section 6033(e) tax on the amount on tine 85f I Size in N/A B51 M/A B51 M/A B51 M/A B51 M/A B52 Does the organization elect to pay the section 6033(e) tax on the amount on tine 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? B S01(c)(7) organizations. Enter: a linitiation fees and capital contributions included on line 12 B Gross receipts, included on line 12, for public use of club facilities B Size in N/A B Size in N | b | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | 85b | ļ | ļ |
| section 162(e) lobbying and political expenditures 8 | | If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a | | | |
| d Section 162(e) lobbying and political expenditures e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices for a mount of lobbying and political expenditures (line 85d less 85e) g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? h if section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? 8 501(e)(7) organizations. Enter: a linitiation fees and capital contributions included on line 12. for public use of club facilities 8 501(e)(7) organizations. Enter: a linitiation fees and capital contributions included on line 12. for public use of club facilities 8 501(e)(7) organizations. Enter: a Gross income from members or shareholders 8 501(e)(7) organizations. Enter: a Gross income from members or shareholders 8 501(e)(7) organizations. Enter: a Gross income from members or shareholders 8 501(e)(7) organizations. Enter: a Gross income from members or shareholders 8 501(e)(7) organizations. Enter: a Gross income from members or shareholders 8 7 | | | į. | | |
| a Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices Taxable amount of lobbying and political expenditures (line 85d less 85e) Taxable amount of lobbying and political expenditures (line 85d less 85e) Taxable amount of lobbying and political expenditures (line 85d less 85e) Taxable amount of lobbying and political expenditures (line 85d less 85e) Taxable amount of lobbying and political expenditures (line 85d less 85e) Taxable amount of lobbying and political expenditures for the following tax year? Taxable amount of dues allocable to nondeductible lobbying and political expenditures for the following tax year? Taxable amount of dues allocable to nondeductible lobbying and political expenditures for the following tax year? Taxable amount of the senting taxable corporations. In the following tax year? Taxable amount of the senting taxable corporations. In the following tax year? Taxable amount of the senting taxable corporation or particular taxable corporation taxable corporation or particular taxable corporation taxable tax | C | | | | |
| Taxable amount of lobbying and political expenditures (line 85d less 85e) 1 Taxable amount of lobbying and political expenditures (line 85d less 85e) 1 Dese the organization elect to pay the section 603(e) (1x) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? 501(c)(7) organizations. Enter: a linitiation fees and capital contributions included on line 12. 6 Gross receipts, included on line 12, for public use of club facilities 501(c)(7) organizations. Enter: a Gross income from members or shareholders 6 Gross income from other sources, (Do not net amounts due or paid to other sources against amounts due or received from them.) 8 A tany time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701·2 and 301.7701·3? 1f 'Yes,' complete Part IX 5 At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 4911 ▶ 0 ., section 4912 ▶ 0 ., section 4915 ▶ 0 . 5 501(c)(3) and 501(c)(4) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ., section 4912 ▶ 0 ., section 4958 excess benefit transaction during the year of did t become aware of an excess benefit transaction from a prior year? 1f 'Yes,' attach a statement explaining each transaction 5 Enter: Amount of tax on line 89c, above, reimbursed by the organization a party to a prohibited tax sheller transaction? 2 All organizations. At any time during the tax year, was the organization a party to a prohibited tax sheller transaction? 3 For supporting organizations and sponsoring organization a party to a prohibited tax sheller transaction? 4 All organizations. At any time during the tax year, was the organization a party to a prohibit | đ | Total 102(0) 1000) ing and pointed or political or | | | |
| g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A h if section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? 5 50f(c)(7) organizations. Enter: a linitiation fees and capital contributions included on line 12. b Gross receipts, included on line 12, for public use of club facilities 6 6b N/A 7 50f(c)(7) organizations. Enter: a Gross income from members or shareholders 6 Gross income from other sources. (Do not net amounts due or paid to other sources 8 against amounts due or received from them.) 8 a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Part XI S 50f(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911≥ ves,' complete Part XI S 50f(c)(3) and 50f(c)(4) organizations. 4912 ► 0., 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 a statement explaining each transaction C Enter: Amount of tax on line 89c, above, reimbursed by the organization a party to a prohibited tax shelter transaction? All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? All organizations. All organization are direct or indirect interest in any applicable insurance contract? For supporting organization as and sponsoring organization maniations of a fund maintaned by a sponsoring organization have an interest in or a sig | е | 7.33. 33. 13. 13. 13. 13. 13. 13. 13. 13. | _ | | |
| h if section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? 50 10(c)(7) organizations. Enter: a linitiation fees and capital contributions included on line 12 50 Gross receipts, included on line 12, for public use of club facilities 501(c)(12) organizations. Enter: a Gross income from members or shareholders 501(c)(12) organizations. Enter: a Gross income from members or shareholders 501(c)(12) organizations. Enter: a Gross income from members or shareholders 501(c)(12) organizations. Enter: a Gross income from members or shareholders 501(c)(12) organizations. Enter: a Gross income from members or shareholders 501(c)(12) organizations. Enter: a Gross income from members or shareholders 501(c)(12) organizations. Enter: a Gross income from members or shareholders 501(c)(12) organizations. Enter: a Gross income from members or shareholders 501(c)(12) organizations. Enter: a Gross income from members or shareholders 501(c)(12) organizations. Enter: a Gross income from members or shareholders 501(c)(12) organizations organization own a 50% or greater interest in a taxable corporation or partnership. or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 49112 by ear, under: section 4912 by ear, under tax b | t | 27/2 | _ | 1 | - |
| to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? 501(c)(7) organizations. Enter: a linitation fees and capital contributions included on line 12 501(c)(7) organizations. Enter: a Cross income from members or shareholders 501(c)(7) organizations. Enter: a Cross income from members or shareholders 501(c)(7) organizations. Enter: a Cross income from members or shareholders 501(c)(7) organizations. Enter: a Cross income from members or shareholders 501(c)(7) organizations. Enter: a Cross income from members or shareholders 501(c)(7) organizations. Enter: a Cross income from members or shareholders 501(c)(7) organizations or received from them.) 81 a At any time during the year, did the organization with a State organization and section 301.7701-2 and 301.7701-37 If 'Yes,' complete Part IX 82 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911(c) organizations. Enter: Amount of tax imposed on 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 a statement explaining each transaction Enter: Amount of tax imposed on the organization engage in any section 4958 excess benefit transaction during the year under: sections 4912, 4955, and 4958 Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under: sections 4912, 4955, and 4958 Enter: Amount of tax imposed on the organization aparty to a prohibited tax sheller transaction? All organizations. At any time during the tax year, was the organization a party to a prohibited tax sheller transaction? All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained | g | Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A | 85g | | |
| 65 507(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12. b Gross receipts, included on line 12, for public use of club facilities 75 507(c)(7)(2) organizations. Enter: a Gross income from members or shareholders 86 b N/A 87 | h | If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f | | | |
| Softic()(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 | | /- | | | |
| line 12 b Gross receipts, included on line 12, for public use of club facilities 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87 a N / A 88 a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Part IX b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Part IX b At any time during the year, did the organization directly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Part IX b At any time during the year, did the organization and sections 301.7701-2 and 301.7701-3? If 'Yes,' attach a statement explaining each transaction c Enter: Amount of tax imposed on the organization engage in any section 4958 excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax imposed on the organization and sponsoring organization and prior year and the organization of tax in year and yea | | To the time of time of the time of time of the time of tim | 85h | | |
| b Gross receipts, included on line 12, for public use of club facilities 87 | 86 | 1 1 2 | | | |
| 87 501(c)(12) organizations. Enter: a Gross income from members or shareholders B Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 88 A tany time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX A tany time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI B 38 301(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0., section 4912 ▶ 0., section 4915 ▶ 0. S01(c)(3) organizations. Did the organization engage in any section 4955 sectess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction C Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax imposed on the organization and party to a prohibited tax sheller transaction? A li organizations. At any time during the tax year, was the organization a party to a prohibited tax sheller transaction? B 20 | | 37/3 | | | |
| b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 88 a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 If "Yes," complete Part IX b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI b At any time during the year or did it become aware of an excess benefit transaction during the year under: section 4911 ▶ 0. section 4912 ▶ 0. section 4955 ▶ 0. b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction c Enter: Amount of tax imposed on the organization analyses or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax imposed on the organization analyses or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax on line 89c, above, reimbursed by the organization a party to a prohibited tax shelter transaction? a All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 90 a List the states with which a copy of this return is filed ▶ WA b Number of employees employed in the pay period that includes March 12, 2007 Telephone no ▶ 50.9. 24.8—7.711 Located at ▶ P | | 27/2 | | | |
| against amounts due or received from them.) 88 a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Part XI 88 a \$501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section \$911\int \sum 0\text{section 4912} \int 0\text{section 4915} \int 0\text{section 4955} \int 0\text{Section 4915} \int 0\text{section 4916} \int 0\tex | | 55 (15)(17) organization 2 1151 2 cross section 15 | \dashv | | |
| 88 a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 if 'Yes,' complete Part IX b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Part XI 89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0 | b | 1 1 1- | | | |
| or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Part XI 88 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ., section 4912 ▶ 0 ., section 4955 ▶ 0 . b 501(c)(3) and 501(c)(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 a statement explaining each transaction c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax on line 89c, above, reimbursed by the organization a party to a prohibited tax shelter transaction? e All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 90 a List the states with which a copy of this return is filed ▶ ₩A b Number of employees employed in the pay period that includes March 12, 2007 1 The books are in care of ▶ RICHARD ELLIOTT T Telephone no ▶ 509 248-7711 Located at ▶ P.O. BOX 1348, YAKIMA, WA. 2 Telephone no ▶ 509 248-7711 Telephone no ▶ 509 248-7711 Telephone no ▶ 509 248-7711 See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | against amounts 550 of 1555/105 in the many | - | | |
| If "Yes," complete Part IX b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI 88 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0 • , section 4912 ▶ 0 • , section 4955 ▶ 0 • b 501(c)(3) and 501(c)(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 a statement explaining each transaction Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax on line 89c, above, reimbursed by the organization a party to a prohibited tax sheller transaction? 1 All organizations. At any time during the tax year, was the organization a party to a prohibited tax sheller transaction? 2 For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization have excess business holdings at any time during the year? 90 a List the states with which a copy of this return is filled ▶ WA b Number of employees employed in the pay period that includes March 12, 2007 1 Telephone no ▶ 509 248-7711 1 Telephone no ▶ 509 248-7711 2 Telephone no ▶ 509 248-7711 2 Telephone no ▶ 509 248-7711 3 Telephone no ▶ 509 248-7711 3 Telephone no ▶ 509 248-7711 3 Telephone no ▶ 509 248-7711 4 Telephone no ▶ 509 248-7711 5 Telephone | 88 a | | | | |
| b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI 88 a 501(c)(3) arganizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0 . , section 4912 ▶ 0 . , section 4955 ▶ 0 . b 501(c)(3) and 501(c)(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 a statement explaining each transaction c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax imposed on the organization aparty to a prohibited tax shelter transaction? f Ail organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 90 a List the states with which a copy of this return is filed ▶ WA b Number of employees employed in the pay period that includes March 12, 2007 910 Telephone no ▶ 50.9 24.8-77.11 Located at ▶ P.O. BOX 1348, YAKIMA, WA. 710 Telephone no ▶ 50.9 24.8-77.11 Located at ▶ P.O. BOX 1348, YAKIMA, WA. 711 Telephone no ▶ 50.9 24.8-77.11 See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | | 00- | 1 | v |
| section 512(b)(13)? If "Yes," complete Part XI 89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0 • , section 4912 ▶ 0 • , section 4955 ▶ 0 • b 501(c)(3) and 501(c)(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 a statement explaining each transaction c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax on line 89c, above, reimbursed by the organization a party to a prohibited tax shelter transaction? d All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 90 a List the states with which a copy of this return is filed ▶ WA b Number of employees employed in the pay period that includes March 12, 2007 11 a The books are in care of ▶ RICHARD ELLIOTT Telephone no ▶ 509 248-7711 Located at ▶ P.O. BOX 1348, YAKIMA, WA. Telephone no ▶ 509 248-7711 Located at ▶ P.O. BOX 1348, YAKIMA, WA. Telephone no ▶ 509 248-7711 See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial accounts. | | | 008 | | <u> </u> |
| 89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ., section 4912 ▶ 0 ., section 4955 ▶ 0 . b 501(c)(3) and 501(c)(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 a statement explaining each transaction Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Enter: Amount of tax on line 89c, above, 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? f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 90 a List the states with which a copy of this return is filed ▶ WA b Number of employees employed in the pay period that includes March 12, 2007 1 Telephone no ▶ 50.9 24.8—77.11 Located at ▶ P.O. BOX 1348, YAKIMA, WA. 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)? If 'Yes,' enter the name of the foreign country ▶ N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | b | | 006 | | v |
| section 4911 ▶ 0 • , section 4912 ▶ 0 • , section 4955 ▶ 0 • b 501(c)(3) and 501(c)(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 a statement explaining each transaction Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 Enter: Amount of tax on line 89c, above, reimbursed by the organization All organizations. At any time during the tax year, was the organization a party to a prohibited tax sheller transaction? All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Located at ▶ P.O. BOX 1348, YAKIMA, WA. B Number of employees employed in the pay period that includes March 12, 2007 Telephone no ▶ 509 248-7711 Located at ▶ P.O. BOX 1348, YAKIMA, WA. Telephone no ▶ 509 248-7711 ZiP+4 ▶ 98907 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)? If 'Yes,' enter the name of the foreign country ▶ N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | | 000 | | |
| b 501(c)(3) and 501(c)(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 a statement explaining each transaction Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 Enter: Amount of tax on line 89c, above, reimbursed by the organization All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? List the states with which a copy of this return is filed ►WA Number of employees employed in the pay period that includes March 12, 2007 Telephone no ► 509 248-7711 Located at ► P.O. BOX 1348, YAKIMA, WA. Telephone no ► 509 248-7711 Located at ► P.O. BOX 1348, YAKIMA, WA. 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)? If 'Yes,' enter the name of the foreign country ► N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | 89 a | | | | |
| transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 Enter: Amount of tax on line 89c, above, reimbursed by the organization All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization have excess business holdings at any time during the year? Supporting organization acquire a direct or indirect interest in any applicable insurance contract? Bye X Bye X Enter: Amount of tax imposed on the organization acquire a direct or indirect interest in any applicable insurance contract? Bye X Supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Bye X Byg X Telephone no For 248-7711 Telephone no For 248-771 | | | <u>•</u> | | |
| If "Yes," attach a statement explaining each transaction □ Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 □ Enter: Amount of tax on line 89c, above, reimbursed by the organization □ All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? □ All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? □ For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? □ Supporting organization acquire is filed ►WA □ Number of employees employed in the pay period that includes March 12, 2007 □ Telephone no ► 509 248-7711 □ Located at ► P.O. BOX 1348, YAKIMA, WA. □ Telephone no ► 509 248-7711 □ Teleph | D | | | | |
| the Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 descriptions that any time during the tax year, was the organization a party to a prohibited tax shelter transaction? descriptions that any time during the tax year, was the organization a party to a prohibited tax shelter transaction? descriptions that any time during the tax year, was the organization a party to a prohibited tax shelter transaction? descriptions that any time during the tax year, was the organization a party to a prohibited tax shelter transaction? descriptions that includes the organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? descriptions that includes March 12, 2007 descriptions that | | | 905 | | x |
| Enter: Amount of tax on line 89c, above, reimbursed by the organization Enter: Amount of tax on line 89c, above, reimbursed by the organization Enter: Amount of tax on line 89c, above, reimbursed by the organization Enter: Amount of tax on line 89c, above, reimbursed by the organization Enter: Amount of tax on line 89c, above, reimbursed by the organization Enter: Amount of tax on line 89c, above, reimbursed by the organization Enter: Amount of tax on line 89c, above, reimbursed by the organization Enter: Amount of tax on line 89c, above, reimbursed by a prohibited tax shelter transaction? Baye X Mail organizations. Did the organization aparty to a prohibited tax shelter transaction? Baye X Baye A | - | | 090 | | |
| d Enter: Amount of tax on line 89c, above, 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? f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 90 a List the states with which a copy of this return is filed ►WA b Number of employees employed in the pay period that includes March 12, 2007 91 a The books are in care of ► RICHARD ELLIOTT Located at ► P.O. BOX 1348, YAKIMA, WA. 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)? If "Yes," enter the name of the foreign country ► N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | C | · · · · · · · · · · · · · · · · · · · | | | |
| e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? 1 All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? 2 For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 90 a List the states with which a copy of this return is filled ►WA 1 Number of employees employed in the pay period that includes March 12, 2007 91 a The books are in care of ► RICHARD ELLIOTT Located at ► P.O. BOX 1348, YAKIMA, WA. 2 IP + 4 ► 98907 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)? 1 If 'Yes,' enter the name of the foreign country ► N/A See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | | | | |
| f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 90 a List the states with which a copy of this return is filed ▶ WA b Number of employees employed in the pay period that includes March 12, 2007 91 a The books are in care of ▶ RICHARD ELLIOTT Located at ▶ P.O. BOX 1348, YAKIMA, WA. 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)? If "Yes," enter the name of the foreign country ▶ N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | Effet. Afford of tax of time 650, above, formation by the digamentation | — i | 1 | x |
| g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 90 a List the states with which a copy of this return is filed ►WA 10 Number of employees employed in the pay period that includes March 12, 2007 91 a The books are in care of ► RICHARD ELLIOTT Located at ► P · O · BOX 1348, YAKIMA, WA. 10 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)? 11 If 'Yes,' enter the name of the foreign country ► N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | | | | X |
| or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 90 a List the states with which a copy of this return is filed ►WA b Number of employees employed in the pay period that includes March 12, 2007 90 The books are in care of ► RICHARD ELLIOTT Located at ► P.O. BOX 1348, YAKIMA, WA. 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)? If "Yes," enter the name of the foreign country ► N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | | | 1 | † <u> </u> |
| b Number of employees employed in the pay period that includes March 12, 2007 The books are in care of ► RICHARD ELLIOTT Located at ► P.O. BOX 1348, YAKIMA, WA. Telephone no ► 509 248-7711 ZIP+4 ► 98907 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)? If "Yes," enter the name of the foreign country ► N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | y | | | | X |
| Number of employees employed in the pay period that includes March 12, 2007 The books are in care of ▶ RICHARD ELLIOTT Located at ▶ P.O. BOX 1348, YAKIMA, WA. 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)? If "Yes," enter the name of the foreign country ▶ N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | an 2 | | <u></u> | ٠ | |
| 91 a The books are in care of ► RICHARD ELLIOTT Located at ► P.O. BOX 1348, YAKIMA, WA. 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)? If "Yes," enter the name of the foreign country ► N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | 1 1 | | - | (|
| Located at ▶ P.O. BOX 1348, YAKIMA, WA. Discrete the Name of the foreign country ► N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | realised of employees employee in the pay period that mendod materials | 248-7 | 7711 | |
| 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)? If "Yes," enter the name of the foreign country ► N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | J I a | | | | |
| a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | h | | | • | No |
| If "Yes," enter the name of the foreign country ▶ N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | u | | 91h | | Х |
| See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | /- | | | |
| and Financial Accounts. | | | _ [| | |
| | | | | | |
| | | and i interiora procedure. | Forr | n 990 | (2007 |

| | | CLUB | CHARITABLE | TRUST | 91-6 | 095283 Page 8 |
|--|---------------------------------------|---------------|----------------------------|--|-----------------------------------|--|
| Part VI Other Information (c | | | | | | Yes No |
| c At any time during the calendar ye | | | | of the United | d States? | 91c X |
| If "Yes," enter the name of the fore | | | N/A | <u> </u> | | |
| 2 Section 4947(a)(1) nonexempt cha | _ | | | | b co | ▶ |
| and enter the amount of tax-exem | | | | | ▶ 92 | N/A |
| Part VII Analysis of Income- | | | | Evaludad b | v control 512 512 or 514 | |
| Note: Enter gross amounts unless other | rwise - | (A) | ed business income | (C) | y section 512, 513, or 514 (D) | (E) |
| ndicated. | | Business | (B) Amount | Exclu- sion | Amount | Related or exempt function income |
| Program service revenue: | <u> </u> | code | | code | | iunction income |
| <u> </u> | | _ | | <u> </u> | | |
| b | | | | | | |
| C | | | | | | |
| d | | | | | | |
| e | | | | | | |
| f Medicare/Medicald payments | | | | | | |
| g Fees and contracts from governme | · · · · · · · · · · · · · · · · · · · | | | | | |
| Membership dues and assessment | Г | | - | | | |
| 15 Interest on savings and temporary cash | r | | _ | 14 | 21,177. | - Art |
| Dividends and interest from securit | · · | | | 14 | 21,1//• | ······································ |
| Net rental income or (loss) from rea | ı estate: | | | | | <u></u> |
| a debt-financed property | } | | | | | |
| b not debt-financed property | h | | | | | |
| Net rental income or (loss) from per | rsonal property | | | 18 | 238. | |
| Other investment income | - | | | | 230. | |
| 30 Gain or (loss) from sales of assets | | | | 18 | 69,773. | |
| other than inventory | | | | 10 | 05,115. | |
| 11 Net income or (loss) from special ev | r | | | | | |
| Gross profit or (loss) from sales of | nventory [| | | | | |
| 03 Other revenue: | i | | | | | |
| a | | | | | - | |
| b | | | | | | |
| C | | | | - | | |
| d | | | | | | |
| 34 Subtotal (add columns (B), (D), and | 1(5) | | 0 | | 91,188. | 0 |
| 75 Total (add line 104, columns (B), (C) | · // | | | • | 32/200 | 91,188 |
| ote: Line 105 plus line 1e, Part I, shoul | | int on line 1 | 2 Part I | | - | |
| ine No. Explain how each activity for whexempt purposes (other than by | nich income is repo | rted in colum | n (E) of Part VII contribu | | | |
| Part IX Information Regard | ing Taxable S | Subsidia | ries and Disregar | ded Entit | | ns) |
| (A) Name, address, and EIN of corporation, | (B) Percentage of | | (C) | | (D) | (E) |
| partnership, or disregarded entity | ownership interes | t | Nature of activities | | Total income | End-of-year assets |
| | | % | | | | |
| N/A | | % | | | | |
| | | % | | | | |
| | | % | | | | |
| Part X Information Regard | ing Transfers | Associa | ted with Person | al Benefit | Contracts (See the | instructions.) |
| (a) Did the organization, during the year, r (b) Did the organization, during the year, p | eceive any funds, d | rectly or ind | rectly, to pay premiums | on a personal | | Yes X No |
| Note: If "Yes" to (b), file Form 8870 an | nd Form 4720 (see | e instructioi | ns). | | | Form 990 (200 |

| | 990 (2007) YAKIMA LIONS CLUB CHARI | | | | Pag | је 9 |
|---------|--|------------------------------|---|-----------------|-----------|-------------|
| Part | | | S. Complete only if the organization | ion is a | | |
| | controlling organization as defined in section 512(b)(13). | N/A | | | | |
| | | | | Ye | es I | No |
| 106 I | Did the reporting organization make any transfers to a controlled entity a | s defined in section 5 | 12(b)(13) of the Code? If "Yes," | | | |
| | complete the schedule below for each controlled entity. | | | | | |
| | (A) | (B) | (C) | (D) | } | |
| | Name, address, of each | Employer | Description of | Amou | | |
| | controlled entity | Identification Number | transfer | trans | fer | |
| | | | | | | |
| a - | | | | | | |
| | | | | | | |
| _ | | | | | | |
| b _ | | | | | | |
| + | | | | | | |
| - | | | | | | |
| c - | | | | | | |
| | | L | | _ | | |
| | Totals | | | | | |
| | | | | Ye | es l | <u>No</u> |
| 107 | Did the reporting organization receive any transfers from a controlled en | tity as defined in secti | ion 512(b)(13) of the Code? If "Y | es," | | |
| | complete the schedule below for each controlled entity | | | | | |
| | (A) | (B) | (C) | (D) | | |
| | Name, address, of each | Employer Identification | Description of | Amou | | |
| | controlled entity | Number | transfer | trans | ter | |
| _ | | | | | | |
| a _ | | | | | | |
| | | | | | | |
| _ | | | | | | |
| b _ | | | | | | |
| | | | | | | |
| _ | | | | | | |
| c _ | | | | | | |
| | - | | | | | |
| | | | | | | |
| | Totals | | | | es l | |
| 400 r | Did About annual makes a bost of the discount of the second of the secon | 7 0000 | | 116 | 25 I | NO |
| | Did the organization have a binding written contract in effect on August 1 | 17, 2006, covering the | interest, rents, royalties, and | 1 | | |
| | annuities described in question 107 above? | ing echodules and statements | e and to the best of my knowledge and hel | ef it is true | correct | - |
| | Under penalties of perjury, I declare that I have examined this return, including accompany and complete Declaration of preparer (other than officer) is based on all information of which | ch preparer has any knowledg | ge / / | CI, II IS 1100, | 0011001 | • |
| Please | · Michaell 411; M | | Lubelain | | | |
| Sign | Signature of officer | | | | | |
| Here | | | Date | | | |
| | Type or print name and title | | | | | |
| | | Date C | Check If Preparer's SSN o | r DTIN (Sec.) | Gen Inc | et V |
| Paid | Preparer's | | elf- | | GE11 11)5 | JL A) |
| Prepare | er's Firm's name (or Diot zon & Lakovi D. I. I. C. | e | mployed | | | |
| Use On | ly yours if Dieczen a Lakey, F.L.L.C. | 2 | EIN - | | | |
| | self-employed), address, and Saldress, and S | 2 | | | | |
| | ZIP+4 Yakima, WA 98902 | | Phone no | | | |

Form **990** (2007)

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),

501(n), or 4947(a)(1) Nonexempt Charitable Trust

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

2007

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Supplementary Information-(See separate instructions.)

91 6095283 YAKIMA LIONS CLUB CHARITABLE TRUST Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.") (b) Title and average hours per week devoted to position (d) Contributions to (a) Name and address of each employee paid employee benefit plans & deferred (c) Compensation account and other more than \$50,000 compensation allowances None Total number of other employees paid 0 over \$50,000 Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation None Total number of others receiving over 0 \$50,000 for professional services Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms If there are none, enter "None" See page 2 of the instructions) (b) Type of service (a) Name and address of each independent contractor paid more than \$50,000 (c) Compensation None Total number of other contractors receiving over 0 \$50,000 for other services

b Did the organization make any taxable distributions under section 4966?

c Did the organization make a distribution to a donor, donor advisor, or related person?

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year

g Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year

f Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on

line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts

d Enter the total number of donor advised funds owned at the end of the tax year

Schedule A (Form 990 or 990-EZ) 2007

4b

4c

0

0.

0.

0.

N/A

N/A

| Par | t IV | Reason for Non-Private Foundation | Status (See pages 4 t | hrough 8 of the instructio | ns) | | | | |
|--------------|-----------|---|--|--|--------------------------------|--|---------------------|--|--|
| I certif | y that th | ne organization is not a private foundation because it is | (Please check only ONE a | pplicable box) | | | | | |
| 5 | | A church, convention of churches, or association of c | | | | | | | |
| 6 | | A school Section 170(b)(1)(A)(II) (Also complete Part V) | | | | | | | |
| 7 | | A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(III) | | | | | | | |
| 8 | | A federal, state, or local government or governmental | unit Section 170(b)(1)(A |)(v) | | | | | |
| 9 | | A medical research organization operated in conjunct | ion with a hospital. Section | n 170(b)(1)(A)(III) Enter i | he hospital' | s name, city, | | | |
| | | and state | | | | | | | |
| 10 | | An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) | | | | | | | |
| | | (Also complete the Support Schedule in Part IV-A) | | | | | | | |
| 11a | | An organization that normally receives a substantial | oart of its support from a g | jovernmental unit or from | the general | public | | | |
| | | Section 170(b)(1)(A)(vi) (Also complete the Suppor | t Schedule in Part IV-A) | | | | | | |
| 11b | | A community trust Section 170(b)(1)(A)(vi) (Also co | omplete the Support Sche | dule in Part IV-A) | | | | | |
| 12 | | An organization that normally receives (1) more than | | • | ership fees, a | nd gross | | | |
| | | receipts from activities related to its charitable, etc., fi | inctions - subject to certai | n exceptions, and (2) no | more than 3 | 3 1/3% of | | | |
| | | its support from gross investment income and unrela | | | | sses acquired | | | |
| | | by the organization after June 30, 1975 See section | 509(a)(2) (Also complete | e the Support Schedule II | n Part IV-A) | | | | |
| 13 | X | An organization that is not controlled by any disqualif | ied persons (other than fo | undation managers) and | otherwise m | eets the requirer | nents of section | | |
| | | 509(a)(3) Check the box that describes the type of si | · · | , | | • | | | |
| | | Type I X Type II | | nctionally Integrated | | Type III-O | ther | | |
| | | | | , | | | | | |
| | | Provide the following information | about the supported orga | nizations. (See page 8 of | the instructi | ons) | | | |
| | | (a) | (b) | (c) | (d |) | (e) | | |
| | | Name(s) of supported organization(s) | Employer identification number (EIN) | Type of organization (described in lines 5 through 12 above or IRC section) | organizati the su organi | upported on listed in oporting zation's documents? | Amount of support | | |
| | | | | | Yes | No | | | |
| | | | | | | | | | |
| LIC | <u>NS</u> | INTERNATIONAL - YAKIMA | 91-0487634 | 11A | X | | 30,000. | | |
| | | | | | | | | | |
| | | | | | | 1 | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | ···· | | |
| | | | | | | | | | |
| | | | | | 1 | | 20.000 | | |
| Total | | | | | <u> </u> | | 30,000. | | |
| 4.4 | | An annual and annual and annual and an an | ble | MAN /Can mage 0 -440 | atriiati \ | | | | |
| 14 | <u> </u> | An organization organized and operated to test for pu | DIIC Safety Section 509(a) |)(4) (See page 8 of the in | | | | | |
| | | | | | St | nedule A (Form | 990 or 990-EZ) 2007 | | |

Page 4

91-6095283

If you answered "Yes" to any of the above, please explain (if you need more space, attach a separate statement)

Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50,

34 a Does the organization receive any financial aid or assistance from a governmental agency?

1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

Has the organization's right to such aid ever been revoked or suspended?

If you answered "Yes" to either 34a or b, please explain using an attached statement

Schedule A (Form 990 or 990-EZ) 2007

33e

331

33g 33h

34a 34b

Educational policies?

h Other extracurricular activities?

Use of facilities?
Athletic programs?

e

35

| 2C | nedule A (Form 990 of 990-EZ) 2007 Y A | AKIMA LIONS CLUB CHARITAE | SLE TR | <u> 9</u> | 1-6095283 Page |
|----|--|---|--------------|------------------------------|-----------------------------|
| P | | itures by Electing Public Charities (Si | ee page 11 o | f the instructions) | N/A |
| Ch | eck a if the organization belon | <u> </u> | If you che | cked "a" and "limited contro | ol" provisions apply |
| | | Lobbying Expenditures | | (a) Affiliated group | (b) To be completed for all |
| | (The term "expendi | tures" means amounts paid or incurred) | | totals | electing organizations |
| | | | | N/A | |
| 36 | Total lobbying expenditures to influence | public opinion (grassroots lobbying) | 36 | | |
| 37 | Total lobbying expenditures to influence | a legislative body (direct lobbying) | 37 | | |
| 38 | Total lobbying expenditures (add lines 3 | 6 and 37) | 38 | | |
| 39 | Other exempt purpose expenditures | | 39 | | |
| 40 | Total exempt purpose expenditures (add | l lines 38 and 39) | 40 | | |
| 41 | Lobbying nontaxable amount. Enter the | amount from the following table - | | | |
| | If the amount on line 40 is - | The lobbying nontaxable amount is - | | | |
| | Not over \$500,000 | 20% of the amount on line 40 | | | |
| | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | | | |
| | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | 41 | | |
| | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | | | |
| | Over \$17,000,000 | \$1,000,000 | | | |
| 42 | Grassroots nontaxable amount (enter 25 | 5% of line 41) | 42 | | |
| 43 | Subtract line 42 from line 36 Enter -0- if | fline 42 is more than line 36 | 43 | | |
| 44 | Subtract line 41 from line 38 Enter -0- if | fline 41 is more than line 38 | 44 | | |
| | | | | | |
| | Caution: If there is an amount on est | her line 43 or line 44, you must file Form 4720. | <u> </u> | | |
| | | | | | |

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 13 of the instructions)

| | | N/A | | | |
|---|-------------|-------------|-------------|-------------|--------------|
| Calendar year (or fiscal year beginning in) | (a) 2007 | (b) 2006 | (c) 2005 | (d) 2004 | (e) Total |
| 45 Lobbying nontaxable amount | | | | | 0. |
| 46 Lobbying ceiling amount (150% of line 45(e)) | | | | | 0. |
| 47 Total lobbying expenditures | | | | | 0. |
| 48 Grassroots nontaxable amount | | | | | 0. |
| 49 Grassroots ceiling amount (150% of line 48(e)) | | | | | 0. |
| 50 Grassroots lobbying expenditures | | | | | 0. |

| | (10070 01 1110 10(0)) | | | | | | | • | |
|------|-------------------------------------|--|--------------------------|--------------------------------------|-----------------------|-----|----|-------------|---|
| 50 | Grassroots lobbying expenditures | | | | | | | 0 | , |
| P | | ctivity by None | • | | | | | | |
| | (For reporting o | nly by organizations tha | t did not complete F | 'art VI-A) (See page 14 | of the instructions) | | | N/A | _ |
| Du | ring the year, did the organization | on attempt to influence | national, state or loc | al legislation, including | any attempt to | Yes | No | Amount | |
| ınfl | uence public opinion on a legisl | lative matter or referenc | lum, through the us | e of | | 162 | NU | Amount | _ |
| а | Volunteers | | | | | | | | |
| b | Paid staff or management (inc | clude compensation in e | expenses reported o | n lines c through h .) | | | | | |
| C | Media advertisements | | | | | | | | |
| đ | Mailings to members, legislate | ors, or the public | | | | | | | |
| е | Publications, or published or l | broadcast statements | | | | | | | |
| f | Grants to other organizations | for lobbying purposes | | | | | | | - |
| g | Direct contact with legislators | their staffs, governmen | nt officials, or a legis | lative body | | | | | |
| h | Rallies, demonstrations, semil | nars, conventions, spee | ches, lectures, or ar | ny other means | | | | | - |
| j | Total lobbying expenditures (/ | Add lines c through h .) | , | • | | | | 0 | , |
| | If "Yes" to any of the above, al | | iving a detailed desc | cription of the lobbying | activities | · | | | - |

| Pa | rt VII Information Regarding Transfers To and Exempt Organizations (See page 14 of the instru | | Relationships With Noncharita | ble | | |
|------------|--|------------------------------|--|------------|--------|-------------|
| 51 | Did the reporting organization directly or indirectly engage in any of the 501(c) of the Code (other than section 501(c)(3) organizations) or in | he following with any other | | _ | | |
| 2 | Transfers from the reporting organization to a noncharitable exempt | | ilical organizations | Γ | Yes | No |
| u | (i) Cash | organization or | | 51a(i) | | X |
| | (II) Other assets | | | a(ii) | | X |
| b | | | | | | |
| | (i) Sales or exchanges of assets with a noncharitable exempt organ | nization | | b(i) | | X |
| | (ii) Purchases of assets from a noncharitable exempt organization | | | b(ii) | | X |
| | (iii) Rental of facilities, equipment, or other assets | | | b(iii) | | X |
| | (iv) Reimbursement arrangements | | | b(iv) | | X |
| | (v) Loans or loan guarantees | | | b(v) | | X |
| | (vi) Performance of services or membership or fundraising solicitati | | | b(vi) | | X |
| C | , , , , , , , , , , , , , , , , , , , | | | C | | X |
| d | If the answer to any of the above is "Yes," complete the following sch goods, other assets, or services given by the reporting organization | If the organization received | less than fair market value in any | 1 | n/A | |
| | transaction or sharing arrangement, show in column (d) the value of | the goods, other assets, or | | | N/A | |
| (a Line | | empt organization | (d) Description of transfers, transactions, and st | naring ari | rangem | ents |
| | | | | | | |
| | | | | | | |
| | <u> </u> | | | | | |
| | | ····· | | | | |
| | | | | | - | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | _ | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | - | _ | | | | |
| | | | | | | |
| | is the organization directly or indirectly affiliated with, or related to, or code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule N/A | ne or more tax-exempt org | anizations described in section 501(c) of the | Yes | X | No |
| | (a) Name of organization | (b) Type of organization | (c) Description of relationshi | р | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | <u> </u> | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | _ | |
| | | | | _ | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

723152 12-27-07

| Form 990 | Gain | (Loss) F | rom Pub | licly T | raded Se | curit | ies | St —— | atement | 1 |
|-----------------------------|-------|----------|---------|--------------|----------|---------|-----------------|----------|----------------------|-----------|
| Description | | | | oss Price | Cost o | | Expense of Sale | | Net Gair or (Loss | - |
| SECURITIES | | | 115 | 5,351. | 45, | 578. | | 0. | 69,77 | 3. |
| To Form 990, Part I, line 8 | | | 115 | 115,351. | | 45,578. | | 0. | 69,773. | |
| Form 990 | Other | Changes | in Net | Assets | or Fund | Bala | inces | St | atement | 2 |
| Description | | | | | | | | | Amount | |
| UNREALIZED LOSSES | | | | | <37,136 | | 6. | | | |
| | | | | | | | | | | |

| Form 990 | Cash Grants and Allocations to Others | | | | | | |
|---|--|---------------------|--------------------|---|------------------------------|-----|--|
| Class of Activity/Do | onee's Name | and Addres | s | | Amount | | |
| SIGHT PROJECTS LIONS INTERNATIONAL P.O. BOX 421 YAKIMA, WA 98907 | - YAKIMA | | _ | _ | 30,0 | 00. | |
| SOCCER EQUIPMENT FOR UNION GOSPEL MISSION 1300 N. FIRST STREET YAKIMA, WA 98901 | I | GRAM | | | 6,0 | 00. | |
| LAND PURCHASED FOR F SUN YAKIMA LLC P.O. BOX 611 YAKIMA, WA 98907 | KIWANIS PAR | K EXPANSION | | | 118,7 | 55. | |
| Total Included on Fo | orm 990, Pa | art II, line | 22b | - - | 154,7 | 55. | |
| Form 990 | Non-G | Government S | ecurities | S | Statement | 4 | |
| Security Description | n Cost/FMV | Corporate Stocks | Corporate Bonds | Other Publicly Traded Securities | Total Non-Gov Securiti | | |
| SECURITIES | FMV | | | 946,831. | 946,8 | 31. | |
| To Form 990, line 54 | a, Col B | | | 946,831. | 946,8 | 31. | |