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OMB No. 1545-0047 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) Open to Public * Department of the Treasury Inspection: The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service 2009, and ending 20 For the 2009 calendar year, or tax year beginning C Name of organization WASHINGTON STATE GRANGE 153 FOREST D Employer identification no Check if applicable usa IRS 23-2564007 Doung Business As Andress change neint ne E Telephone number Number and street (or P O box it mail is not delivered to street address) Name chance type. PO BOX 296 (360)748-0358 Soncific City or town, state or country, and ZiP + 4 G. Gross receipts Terminated Total Contract 139,376 CHEHALIS, WA 98532 Amended return Name and address of principal officer GORDON BOYD is this a proup return to Yes X No 592 HWY 603, CHEHALIS, WA 98532 X 501(c)(10) ◀ (insert no.) 4947(a)(1) or Tex-exempt status. Are all attiliates included?
If "No," attach a list, (see instructi Websto: ► N/A Group exemption number Form of organization: Corporation Trust Association 1920 M State of legal domicile Summary Partile Briefly describe the organization's mission or most significant activities: MAINTAIN PHYSICAL GRANGE HALL G • Check this box ▶ ☐ If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 5 6 Total gross unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 Current Year Contributions and grants (Part VIII, line 1h) 1,196 Program service revenue (Part VIII, line 2g) 1,705 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 57,051 89,345 11 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 92,246 59,084 12 1,200 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 Benefits paid to or for members (Part IX, column (A), line 4) 1,555 14 E Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 59,739 38,325 Professional fundraising fees (Part IX, column (A), line 11e) Contraction of the State of the and in the contract of the con Total fundraising expenses (Part IX, column (D), line 25) ▶

52

52

5

0

0

1,107

926

50

Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 31,987 31,252 17 94,481 69,627 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 (2,235 (10,543) End of Year Beginning of Current Year 288,047 288.479 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 39 Net assets or fund balances. Subtract line 21 from line 20 288,047 Part II Signature Block Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, tyls true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 110-14-10 **⊑**\$ign ature of officer CHere GORDON BOYD, MASTER Type or pont name and title Preparer's identifying number not correspond for sign prove (see instructions) employed ▶ 🔲 0-12-2010 Preparer's CASCADE TAX SERVICE COMPANY EIN Use Only Firm's name (or yours 365 NW Chehalis Ave if self-employed), address, and ZIP + 4 Chehalis, WA 98532 Phone no ▶ 360-748-8212 For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. EEA Form 990 (2009)

Form	990 (2009) WASHINGTON STATE GRANGE 153 FOREST	23-25640	07 Page 2
Pa	1911 Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission:	•	
	MAINTAIN PHYSICAL GRANGE HALL		
~_	Did the organization undertake any significant program services during the year which were not listed on		
2	the prior Form 990 or 990-EZ?	Πva	Пис
	·	le	, [] NO
_	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	Ων	
	services?	· · · · · U Yes	i ∐ No
	If "Yes," describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants	and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 69,627 including grants of \$ 50) (Revenue	S	59,084)
	PROVIDE ONGOING MAINTENANCE TO THE GRANGE HALL AND		
	PROVIDE INFORMATION TO THE FAMILY FARMER		
	THOTALD THE CHARLES TO THE THEORY OF THE CHARLES THE C		
			
			
			
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	S)
			
			
			
	- 141		
			
4c	(Code:) (Expenses S including grants of S) (Revenue	S)
			· · · · ·
			
			
			
4d	Other program services. (Describe in Schedule O.)		
	(Expenses S including grants of S) (Revenue S	1	
	······································		
46			
	EEA	F	orm 990 (2009)

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services

Did the organization report more than \$15,000 of gross income from garning activities on Part VIII, line 9a?

17

18

Form 990 (2009)

Х

Х

17

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500

۳. ت				T
•-	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	B25.22.	Yes	No Section
1a		%		
	0.0. miles			200
ь	Line; sie verree; ever ever ever ever ever ever	\$ 3000 \$ 2000 \$		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	100	OMY V	SAKIY.
_	gaming (gambling) winnings to prize winners?	1c	X	190.80
Za	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1000 is 1		
_	Statements, filed for the calendar year ending with or within the year covered by this return	2b	40 m	
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	200	X	8000
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	100 mg		
_	instructions)		2000 A	X.40
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	2. (B)	**************************************	Minich
_	this return?	3a	X	
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ъ	X	 - -
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	į į	l	l
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	١.	j	۱
	account)?	4a		X
Ь	If "Yes," enter the name of the foreign country: ▶	(2)	2.3	M.
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	1000	10 % A	106.79
	and Financial Accounts	:	200	J
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<u> </u>	X
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5ь		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			1
	organization solicit any contributions that were not tax deductible?	6a	<u> </u>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	'		}
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		Being
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		Ç	130
	and services provided to the payor?	7a		X
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7Ь		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		_ X
d	If "Yes," indicate the number of Forms 8282 filed during the year	17.00	32.3	337
e	Did the organization, during the year, receive any lunds, directly or indirectly, to pay premiums on a personal	10000	, 2500 U	200 1
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		Х
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	\$4.5×.50	2	Sex.
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		3000	
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	anne.		W.0
a	Did the organization make any taxable distributions under section 4966?	9a		x `
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9ь		Х
10	Section 501(c)(7) organizations. Enter:	200	₹~°₹	\$35,44
а	Initiation fees and capital contributions included on Part VIII, line 12	1600		100 m
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	變級		
11	Section 501(c)(12) organizations. Enter:	83	ِ افَ قَوْرِيْ	\$345.
a	Gross income from members or shareholders		137m 4	
þ	Gross income from other sources (Do not net amounts due or paid to other sources against	1772		
-	amounts due or received from them)		20 . A	
12#	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	3.34.3.5	(6·37.)
	If "Yes " enter the amount of tax-exempt interest received or accrued during the year	38	S 145 %	20,000

[Part VI] Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management			
		\Box	Yes	No
1a	Enter the number of voting members of the governing body	J. W. S.		
ь	Enter the number of voting members that are independent	_&	7	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			%3.74
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	Х	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		Seg.	70.22.3
•	the year by the following	1	(48) (48)	
_	The governing body?	8a	X	W. Co
a	Each committee with authority to act on behalf of the governing body?	8b	X	
Ъ	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
9	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	ا و ا		х
500	tion B. Policies (This Section B requests information about policies not required by the Internal			
Heve	nue Code.)		Yes	No
10-	Does the organization have local chapters, branches, or affiliates?	10a	X	
10a	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,		-11	
Þ	affiliates, and branches to ensure their operations are consistent with those of the organization?	10ъ	Х	
	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	105		
11		11	х	
	form?	- ~ ~ ~	<u>۲</u>	20078×3
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	لاشب	X
12a	5000 110 - 5	128		
Ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	126		
	nse to conflicts?	128		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
	describe in Schedule O how this is done	12c		X
13	Does the organization have a written whistleblower policy?	13		$\frac{\hat{x}}{x}$
14	Does the organization have a written document retention and destruction policy?	14		**************************************
15	Did the process for determining compensation of the following persons include a review and approval by	\$ 3.69		Segue 6
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	N.4	30.37	474
а	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>
ь	Other officers or key employees of the organization	15b	, –	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	k in A	źsy)	16/10/15
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			S.M. C.
	with a taxable entity during the year?	16a		X
Ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			3,75°° 3.
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	223	: \$ \$ ^	77.73 17.73
	the organization's exempt status with respect to such arrangements?	166		<u>X</u>
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filled WA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection, Indicate how you make these available. Check all that apply			
	Own website Another's website 🗓 Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization: ► DOROTHY TORBIN (360)748-0358		_	
	1098 SE ADAMS CHEHALIS, WA 98532	_		

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee). who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees, officers; key employees; highest compensated employees; and former such persons.

Week	1	(D)	(E)	Œ
DOROTHY TORBIN SECT/TREASUER MILDRED HICKMAN CHAPLIN JULIE HORSLEY EX2 DIANE SMITH EX3 DUANE SKINNER OVERSEER/GATEKEEPER RHONDA CHUMLEY LAS SUSAN FORDYCE CWA MICHAELLE FRIES LECTURER 22.00 X X X X X X X X X X X X	apply) Hce Foom gmp rhpi meeo rise ae t	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
DOROTHY TORBIN SECT/TREASUER MILDRED HICKMAN CHAPLIN JULIE HORSLEY EX2 DIANE SMITH EX3 DUANE SKINNER OVERSEER/GATEKEEPER RHONDA CHUMLEY LAS SUSAN FORDYCE CWA MICHAELLE FRIES LECTURER 22.00 X X X X X X X X X X X X				
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MILDRED HICKMAN CHAPLIN JULIE HORSLEY EX2 DIANE SMITH EX3 DUANE SKINNER OVERSEER/GATEKEEPER RHONDA CHUMLEY LAS SUSAN FORDYCE CWA MICHAELLE FRIES LECTURER 23.00 X X X X X X X X X X X X X X X X X X				
CHAPLIN		9,004	0	
JULIE HORSLEY EX2 DIANE SMITH EX3 DUANE SKINNER OVERSEER/GATEKEEPER RHONDA CHUMLEY LAS SUSAN FORDYCE CWA MICHAELLE FRIES LECTURER 18.00 X X X X X X X X				
EX2 18.00 X DIANE SMITH EX3 27.00 X DUANE SKINNER OVERSEER/GATEKEEPER X RHONDA CHUMLEY LAS X SUSAN FORDYCE CWA X MICHAELLE FRIES LECTURER X		7,554	00	
DIANE SMITH EX3 DUANE SKINNER OVERSEER/GATEKBEPER RHONDA CHUMLEY LAS SUSAN FORDYCE CWA MICHAELLE FRIES LECTURER Z7.00 X X X X X X X				
EX3 27.00 X DUANE SKINNER OVERSEER/GATEKBEPER X RHONDA CHUMLEY LAS SUSAN FORDYCE CWA MICHAELLE FRIES LECTURER Z 7.00 X X X		5,715	0	
DUANE SKINNER OVERSEER/GATEKBEPER RHONDA CHUMLEY LAS SUSAN FORDYCE CWA MICHAELLE FRIES LECTURER X X X	[]			
OVERSEER/GATEKEEPER X RHONDA CHUMLEY LAS X SUSAN FORDYCE CWA X MICHAELLE FRIES LECTURER X		5,385	0	
RHONDA CHUMLEY LAS SUSAN FORDYCE CWA MICHAELLE FRIES LECTURER X				
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SUSAN FORDYCE CWA MICHAELLE FRIES LECTURER X]		
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MICHAELLE FRIES LECTURER X		İ		
LECTURER				
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Pa	rt VII- Section A. Officers, Directors, Trustees	, Key Emplo	yees,	and	Hig	nes	t Com	pen	sated Employees	(continued)		
	. (4)	(B)			. (1	7			(D)	(E)]	(F)
	Name and Title	Average hours per	I t d	11	0		at apply)	F	Reponable compensation	Reportable compensation	1	sirmated mount of
		week	nri dur i se vic i e t de o u r a o i r	5 U C C C C C C C C C C C C C C C C C C	- U	e y e n p l o y e	OMPION COMPION	0 1 E B 1	from the organization (W-2/1099-MISC)	Irom related organizations (W-2/1099-MISC)	compensation) trum the organization and related organizations	
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			<u> </u>					<u> </u>				
ib	Total								35,732	L	0	0
2	Total number of individuals (including but not limited to reportable compensation from the organization	O Those listed	above) WID	o rec	cerve	ed mor	e un	an 5100,000 in		0	
3	Did the organization list any former officer, director or	r trustee, kev	emplo	/ee.	or h	lahe	st com	nea	sated		(A)	Yes No
	employee on line 1a? If "Yes," complete Schedule J for	or such individ	iual						. 		3	X
4	For any individual listed on line 1a, is the sum of reporting organization and related organizations greater that										74 4 Å. 24 4 Å. 249 Å.	
	individual				··					. <i>.</i>	. 4	X
5	Did any person listed on line 1a receive or accrue cor										1,000 1,000	804445
- -	services rendered to the organization? If "Yes," comp	lete Schedule	J for s	uch	per	son			<u> </u>	· · · · · · · ·	. 5	X
<u>se</u> 1	ction B. Independent Contractors Complete this table for your five highest compensated	l independent	contra	ctor	s the	at re	cerved	mor	e than \$100,000 of			
•	compensation from the organization.	посреносн			,,,							
	W								(B)			(C)
	Name and business address								Description of si	Brvices	Сопр	ensation
-	Table	d ant limited:	a #ba-	, E	- س	h.c.	مارد. خارما		nhad.		1 (11212a. airi	Mariah kadas
2	Total number of independent contractors (including by		U INOS(: IISt	.eo a	DOV.	e) wno	rec	eiv e u			

EEA

59,084

57,977

Total revenue. See instructions

Part IX Statement of Functional Expenses

Section 501(cX3) and 501(cX4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). Do not include amounts reported on lines 6b. (A) Total expenses (B) Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. general expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 50 50 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 4 Compensation of current officers, directors, 28,457 28,457 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Pension plan contributions (include section 401(k) 8 and section 403(b) employer contributions) 9 9,868 9,868 10 Fees for services (non-employees): 11 2,039 2,039 Carrier and business inter-3000 CONC. Professional fundraising services. See Part IV, line 17 . 384 384 12 3,432 3,432 13 14 15 13,375 13,375 16 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 21 4,744 22 Depreciation, depletion, and amortization 4,744 Insurance 1,648 1,648 23 Other expenses. Itemize expenses not 24 covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 2,246 2,246 LICENSES 3,384 3,384 69,627 Total functional expenses. Add lines 1 through 24f . . 69,627 0 Joint Costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Part	\X'	Balance Sheet				,
				(A) .		(B)
				Beginning of year	1	End of year
	1	Cash - non-interest-bearing		33,850	1	28,613
1	2	Savings and temporary cash investments		85,442	2	92,607
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors, trustees, key	•	2016161614 (VV VV)	1	March FYX
	_	employees, and highest compensated employees. Complete Part II of			Services Control	
		Schedule L		200700 2 004 24400 000 4	5	ŀ
	6	Receivables from other disqualified persons (as defined under section		00000000000000000000000000000000000000	26.190	
	-	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			3354	Knowing and Ward or home
A		Part II of Schedule L			1 ^ 6``	
5	7	Notes and loans receivable, net			7	
e	В	Inventones for sale or use			8	
t	وا	Prepaid expenses and deferred charges			9	
S,		· · · · · · · · · · · · · · · · · · ·		Service resistant survey (17822	5
	10a	Land, buildings, and equipment: cost or	205 557		(38 m)	
	1.	other basis. Complete Part VI of Schedule D 10a	296,557	160 107	10c	
	Ь	Less; accumulated depreciation 10b	129,730	169,187	11	166,827
	11	Investments - publicly traded securities			12	
	12	Investments - other securities. See Part IV, line 11			13	
	13	investments - program-related. See Part IV, line 11			14	
	14	Intangible assets		ļ	+	}
	15	Other assets. See Part IV, fine 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			16	288,047
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
L	19	Deferred revenue			19	<u> </u>
a	20	Tax-exempt bond liabilities	· · · · · · · ·		20	
ь	21	Escrow or custodial account liability. Complete Part IV of Schedule D		Southern 19, 10, 10, 10, 10, 10, 10, 10, 10, 10, 10	21	\$1.0 mag \$1.00 \$1.
1	22	Payables to current and former officers, directors, trustees, key			30%	
i		employees, highest compensated employees, and disqualified		British C.	1.200	
t		persons. Complete Part II of Schedule L			22	
e	23	Obcarde mongages and notes payable to anti-			23	ļ
s	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities. Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		39	26	0
	[Organizations that follow SFAS 117, check here ▶ ☐ and		The street of the second of th	100 8,00	
NF		complete lines 27 through 29, and lines 33 and 34.			14.7	\$5 \$3 \$3 \$3 \$3 \$4 \$50
e u	27	Unrestricted net assets			27	ļ
t n	28	Temporarily restricted net assets			28	
Α_	29	Permanently restricted net assets	<i></i>		29	
s B sa		Organizations that do not follow SFAS 117, check here 🕨 🗓				
e I		and complete lines 30 through 34.			1	
t a	30	Capital stock or trust principal, or current funds			30	ļ
s N C	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
0 B	32	Retained earnings, endowment, accumulated income, or other funds			32	288,047
r S	33	Total net assets or fund balances			33	288,047
	34	Total liabilities and net assets/fund balances	. <u></u> .	288,479	34	288,047

Form 990 (2009)

Form	1990 (2009) WASHINGTON STATE GRANGE 153 FOREST 23-25640	107	Р	age 17
Pa	rtXI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: 🛛 Cash 🔲 Accrual 🗍 Other	80.0	120	\$
	If the organization changed its methods of accounting from a prior year or checked "Other," explain in	23		12 S.
	Schedule O.	730		137
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a	X ~	
ь	Were the organization's financial statements audited by an independent accountant?	. 2ь		X
¢	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	. 2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in	100	5%	(35)
	Schedule O.	2.55		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	- Cor		9
	issued on a consolidated basis, separate basis, or both:		kš,	وسنحز
	Separate basis Consolidated basis Both consolidated and separate basis	1300		Spenson of the second
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	. 3a		Ĺ
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	. 3b	<u> </u>	1
_	EEA	Form	1990 (2009)

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below Do not complete Part I-B.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Section 527 organizations: Complete Part I-A only.

OMB No 1545-0047

2009

Open to Public inspection

	Section 501(c)(3) organizations that have I	•			
If th	e organization answered "Yes," to Form	990, Part IV, line 5 (Proxy Tax), then			
•	Section 501(c)(4), (5), or (6) organizations:	: Complete Part III.			
Na	me of organization			Employer id	entification number
W	SHINGTON STATE GRANGE 153 E			23-256	
Pa	rt A Complete if the organ	ization is exempt under sect	on 501(c) or i	s a section 527 org	janization.
1	Provide a description of the organization's				
2	Political expenditures				
3	Volunteer hours			· · · · · · · · · · · · · · · · · · ·	
Pa		ization is exempt under secti			
1	Enter the amount of any excise tax incurr				
2	Enter the amount of any excise tax incurre				
3	If the organization incurred a section 4955				
4a	Was a correction made?			• • • • • • • • • • • •	. Yes No
ь	If "Yes," describe in Part IV.				
Pa		ization is exempt under sect		cept section 501(c)(3)
1	Enter the amount directly expended by the				
	activities			<i>.</i>	
2	Enter the amount of the filing organization				
	527 exempt function activities				· · · · · · · · · · · · · · · · · · ·
3	Total exempt function expenditures Add				
	line 17b				
4	Did the filing organization file Form 1120-				
5	State the names, addresses and employe				
	were made. For each organization listed,				
	contributions received that were promptly				aled
	fund or a political action committee (PAC)	. If additional space is needed, provide i	nformation in Part	IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds if none, enter -0-	contributions received and promptly and directly
				101103 2 10010, 0110.	delivered to a separate
			1		political organization. If none, enter -0-
					1000, 0000
					1
					
			 		
					<u> </u>
					

EEA

Schedule C (Form 990 or 990-EZ) 2009

Sched		TATE GRANGE 1			23-2564	
	rt II-A Complete if the organization	n is exempt ur	der section 50	1(c)(3) and filed	Form 5768 (ele	ection
	under section 501(h)).	-		•		
A	Check ▶ ☐ if the filing organization belongs to	an affiliated group				
в	Check ▶ ☐ if the filing organization checked b		ntrol" provisions app	ly		
	Limits on Lob	bying Expenditures	;		(a) Filing	(b) Affiliated
	(The term "expenditures"	means amounts pa	id or incurred.)		organization's totals	group totals
1a	Total lobbying expenditures to influence public or	pinion (grass roots lo	obbying)			
ь	Total lobbying expenditures to influence a legisla	itive body (direct lobi	bying)			
c	Total lobbying expenditures (add lines 1a and 1b)	• • • • • • • • • •			
d						
e	Total exempt purpose expenditures (add lines 1c and 1d)					
f	Lobbying nontaxable amount. Enter the amount from the following table in both					
_	columns.		·			
	If the amount on line 1e, column (a) or (b) is:	: The lobbying	nontaxable amoun	t is:		
1	Not over \$500,000	20% of the am	ount on line 1e.			
Į	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	ver \$500,000.		
į	Over \$1,000,000 but not over \$1,500,000		10% of the excess of			
1	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess ov	er \$1,500,000.		
	Over \$17,000,000	\$1,000,000.			hat But Had to Britan	
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	• • • • • • • • • •		L	
h	Subtract line 1g from line 1a. If zero or less, ente		• • • • • • • • • •			
i	Subtract line 1f from line 1c. If zero or less, enter				L	l
j	If there is an amount other than zero on either lin					D., D.,
	section 4911 tax for this year?	· · · · · · · · · · · · · · · · · · ·	 	<u> </u>	· · · · · · · · · · · · · · · · · · ·	Yes No
	(Some organizations that	I-Year Averaging P made a section 50 ow. See the instruct	1(h) election do no		all of the five .)	
	Lobb	ying Expenditures	During 4-Year Ave	raging Period		
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
ъ	Lobbying ceiling amount	VII. VIA SON				
_	(150% of line 2a, column (e))			######################################	**************************************	
c	Total lobbying expenditures					
ď	Grassroots nontaxable amount				The Victor Control of the Control of	
е	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					
			EE	A	Schedule C (Fo	rm 990 or 990-EZ) 2009

(a) (b)	enedue C (Form 990 or 990-EZ) 2009 WASHINGTON, ST Part II-B Complete if the organization (election under section 501)	n is exempt under section 501(c)(3) and has NOT filed (h))	For	m 5768
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? 1 Volunteers? 2 Part III-B. 1 Complete if the organization for the public opinion on a legislative matter or referendum, through the use of a Volunteers? 2 Publications, or published or broadcast statements? 3 Direct contact with legislators, or the public? 4 Publications, or published or broadcast statements? 5 Direct contact with legislators, their staffs, government officials, or a legislative body? 5 Direct contact with legislators, their staffs, government officials, or a legislative body? 5 Direct contact with legislators, their staffs, government officials, or a legislative body? 6 Direct contact with legislators, their staffs, government officials, or a legislative body? 7 Total. Add times to through tile. 8 Direct contact with legislators are the organization to be not described in section 501(c)(3)? 8 If Yes, enter the amount of any tax incurred under section 4912 9 If Yes, enter the amount of any tax incurred under section 4912 9 If Yes, enter the amount of any tax incurred under section 4912 9 Use a substantially all (90% or more) dues received nondeductible by members? 1 Vere substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying and political expenditures from the prior year? 3 Dit (c)(6) If BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Dit (c) (d) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Dit (and the state of the propriets in the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions) 3 If no	lesection ander Section 2016		(a)	(ь)
legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? b Pard staff or management (include compensation in expenses reported on fines to through til)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct Contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? i Other activities? If "Yes," describe in Part IV 10 bid the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part-IIII—Aj Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? 2 Did the organization agree to carryover lobbying and political expenditures from the prior year? Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section \$27(f) tax was paid). 2 Carryover from last year 2 Carryover from last year 2 Aggregate amount reported in section 603(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization gete to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 Aggregate amount of lobbying		Ye	s No	Amount
referendum, through the use of Volunteers? Pad staff or management (include compensation in expenses reported on fines 1c through 1i)? Media advertisements? Media advertisements? Media povertisements?	During the year, did the filing organization attempt	to influence foreign, national, state or local	2003	
referendum, through the use of a Volunteers? b Pard staff or management (include compensation in expenses reported on fines to through til)? b Mailings to members, legislators, or the public? Publications, or published or broadcast statements? I Grans to other organizations for lobbying purposes? Piblications, or published or broadcast statements? I Grans to other organizations for lobbying purposes? Piblications, or published or broadcast statements? I Grans to other organizations, seminars, conventions, speeches, lectures, or any other means? I Other activities? If Yes, "describe in Part IV Total. Add fines to through til a Did the activities? If the organization to be not described in section 501(c)(3)? If Yes, "enter the amount of any tax incurred under section 4912 If Yes, "enter the amount of any tax incurred under section 4912 If the filing organization incurred a section 4912 tax, did if file Form 4720 for this year? Part-III—A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (30% or more) dues received nondeductible by members? Did the organization agree to carryover lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? 2 and III—B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III—A, lines 1 and 2 are answered "No" OR if Part III—A, line 3 is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures for which the section 527(f) tax was paid). 2 a Current year C Corrior year Aggregate amount reported in section 603(e)(1)(A) notices of nondeductible section 162(e) dues 3 It notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonab	legislation, including any attempt to influence publi	ic opinion on a legislative matter or		
b Paid staff or management (include compensation in expenses reported on lines to through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? By Direct contact with legislators, their staffs, government officials, or a legislative body? Raillies, demonstrations, seminars, conventions, speeches, lectures, or any other means? Other activities? If "Yes," describe in Part IV Total. Add lines to through 1i Did the activities? in ine 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If It the fitting organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III—A. Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization make only in-house lobbying and political expenditures from the prior year? 3 a "art' IIII—B. Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III—A, lines 1 and 2 are answered "No" OR if Part III—A, line 3 is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year De Carryover from last	referendum, through the use of			
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h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? i Other activities? If "Yes," describe in Part IV a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Ord the organization agree to carryover lobbying and political expenditures from the prior year? Part III—B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III—A, lines 1 and 2 are answered "No" OR if Part III—A, line 3 is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Implete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part III-B, line 1i.	•	<u> </u>	i –	
i Other activities? If "Yes," describe in Part IV j Total. Add lines to through 11 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did the Form 4720 for this year? Part-III-A. Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Part-III-B. Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total C Carryover from last year Total sepandation agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Total Supplemental Information Total Supplemental Information Total Supplemental Information or Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i.			+-	
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expenses for which the section 527(f) tax was paid). a Current year				
a Current year			1923	3
b Carryover from last year			11.54	1
C Total			<u> </u>	
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information proplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i.	b Carryover from last year			
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excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?				
and political expenditure next year?				¥
Taxable amount of lobbying and political expenditures (see instructions)	excess does the organization agree to carryover t	o the reasonable estimate of nondeductible lobbying		Ä
Part IV: Supplemental Information complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i.	and political expenditure next year?		4	<u> </u>
Part IV: Supplemental Information complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i.			5	
omplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i.			<u> </u>	
		or Part LA line 1: Part LB line 4: Part LC line 5: and Part ILB line 1i		
so, complete this part for any accitional information.				
	so, complete this part for any additional information.			
· · · · · · · · · · · · · · · · · · ·				
				-

SCHEDULE D (Form 990)

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV. line 6, 7, 8, 9, 10, 11, or 12,

OMB No 1545-0047 2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► See separate instructions.

Name of the organization Employer identification number WASHINGTON STATE GRANGE 153 FOREST 23-2564007 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Aggregate contributions to (during year) z 3 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ... Yes No Part III Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

Sched	uie D (Form 990) 2009 WASHINGTON STATE	GRANGE 153	POREST				23-256	4007	Page 2
	t'lli. Organizations Maintaining C	ollections of A	Art, Histo	rical '	Treasures	, or C	ther Similar A	ssets (c	ontinued)
3	Using the organization's acquisition, accession, ar								
	collection items (check all that apply):		-		_				
а	Public exhibition	d 📗 Loan	or exchan	ge progr	ams				
ь	Scholarly research	e 🗍 Othe							
-	Preservation for future generations	_							
4	Provide a description of the organization's collection	ons and explain how	w they furth	er the or	oanization's e	exempt	ouroose in		
•	Part XIV.				_		FF-		
5	Ouring the year, did the organization solicit or rece	eive donations of an	t. historical	treasure	s or other sin	nilar			
•	assets to be sold to raise funds rather than to be n							П [,]	Yes No
Pai	tilVa Escrow and Custodial Arran								····
<u> </u>	Part IV, line 9, or reported an amount of	-							
12	Is the organization an agent, trustee, custodian or			tions or	other assets r				
16	included on Form 990, Part X?							п	Yes No
.	If "Yes," explain the arrangement in Part XIV and o							·	
J	ii 1es, explain de allangement ul Fait XIV and t	complete the tollow	ing assic				Ar	nount	
_	Beginning balance					🗔			
C C	Additions during the year						d		
•	Distributions during the year								
	Ending balance								
2-	Did the organization include an amount on Form 9							m ·	Yes 🗌 No
2a		30, Fall X, IIII9 211		• • • •			· · · · · · · · ·	٠. ت	163 [] 140
	If "Yes," explain the arrangement in Part XIV. T.V. Endowment Funds. Complete if	the ereanization an	swored Ve	s" to Fo	m 000 Part I	V line	10		
Fai	t.V Endowment Funds. Complete if	(a) Current year			1			(0) 500	
••	De linear of coar belones	(a) Current year	(b) Pnor	year	(c) Two year	Cac.	(d) Three years back	(a) FO	r years back
1a	Beginning of year balance						a Bangalilla mangga Bangalilla mangga Bangalilla mangga	V - V - V - V - V - V - V - V - V - V -	<u></u>
Ь	Contributions		_		n mi Sori	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	tott ii ii neddien	h Milaini	mark it i mika
C,	Net investment earnings, gains, and losses				1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	~~~			* : : : : : : : : : : : : : : : : : : :
G	Grants or scholarships				1 1000	7.5 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 /	A STATE OF THE STA		<u>a araban kata dalah</u> Basan Sarah
e	Other expenditures for facilities				Service Control				
	and programs				80, 60,80,80,80,90,90 100, 60,80,80,80,90,90,90				100x my 100x 10 78×109521 15
T	Administrative expenses				1088527				
9	End of year balance				(2000 A 7 7 22 80)	**********	<u> Barwingsmandar</u>	<u> </u>	regain registant
2	Provide the estimated percentage of the year end								
a	Board designated or quasi-endowment	%							
ь	Permanent endowment > %								
C	Term endowment ▶ %		al - a - 1 - 1		4				
3a	Are there endowment funds not in the possession	of the organization	that are ne	o ano a	oministered to	n ine			V 1 N-
	organization by:							(2-(:)	Yes No
	(i) unrelated organizations				• • • • • •			. 3a(i)	
	(ii) related organizations				• • • • •			. 3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations liste							. 3b	11
4	Oescribe in Part XIV the intended uses of the orga				000 D-4 V E	10			
Pai	1 VI Investments - Land, Buildin	gs, and Equip	ment. Se	e rom	990, Pan X, II	ne IU.			
	Description of investment	(a) Cost or othe			st or other	(€	Accumulated	(d) Bo	ok vatue
		(investme		basi	s (other)	27 E.	depreciation		
1a	Land		97,208			00 5000 A	***********		97,208
ь	Buildings	··	99,349			 	129,730		69,619
c	Leasehold improvements	• •				<u> </u>			
ď	Equipment					 			
e	Other			line 404	-11	L			366 005
ota	 Add lines 1a through 1e. (Column (d) must equal 	rom 990, Par X, (wunn (8),	une 10(ί))				166,827

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Schedule D (Form 990) 2009

Schedule D (Form 9			E GRANGE 153 FORE		564007 Page:
Part VII	Investments - Of	ther Securities. Se	e Form 990, Part X, line 12	<u> </u>	
	(a) Description of security or cat (including name of securit		(b) Book value,	(c) Method of valu Cost or end-of-year mar	
Financial derva	itives				
	uity interests	ſ			
Other	juny				
			···		
					
		·			
					
			· · · · · · · · · · · · · · · · · · ·		
					may of the state of the state of the
	must equal Form 990, Part X, co	L (B) line 12.)	- F - 000 D- 4V fire 40	Manager Commission of the Comm	Child the take the Same the Sales to
Part VIII	Investments - Pr	ogram Helated. Se	ee Form 990, Part X, line 13	3	
	(a) Description of Investment	туре	(b) Book value	(c) Method of valu Cost or end-of-year mar	
					····
Total. (Column (b)	must equal Form 990, Part X, co	(B) line (3)			Same Care Commence
Part IX	Other Assets. See	Form 990, Part X, line 1	15.		
		(a) D	escription		(b) Book value
Total. (Column	(b) must equal Form 990	Part X, col. (B) line 15.)	<u></u>	
Part X	Other Liabilities. S				
	(a) Description of liability		(b) Amount	Secretary and the second secon	
Federal income					
	······				
					griffied to the state of the st
<u> </u>					ing punjak 1903 bilan 19 mga baga i
			<u> </u>		
·					
					allef (5 St.)
					graping military graph and the color
Total (Catana	Com OOA Ded V A	V (R) line 25)			
		2. (0) ~ 0 00 1	n the organization's financia	al statements that remote the	2.0% (000000) w. A.w. ()
2. FIN 48 Foot) must equal Form 990, Part X, co note. In Part XIV, provide iability for uncertain tax po	the text of the footnote t	o the organization's financia	al statements that reports the	

Sched	ute D (Form 990) 2009 WASHINGTON STATE GRANGE 153 FOREST	23-2564007	Page 4
Pa	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ts	
1 .	Total revenue (Form 990, Part VIII, column (A), line 12)	11	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	
	Net unrealized gains (losses) on investments	4	
4	Donated services and use of facilities	5	
5	Investment expenses	6	
6			
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net) Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	
Pai	teXII Reconciliation of Revenue per Audited Financial Statements With Revenue	per Return	
1	Total revenue, gains, and other support per audited financial statements	. 1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	9x2	
a	Net unrealized gains on investments	V 76300	
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
	Add lines 2a through 2d		
e	Subtract line 2e from line 1		
3	• •		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
þ	Other (Describe in Part XIV.)	Cest	
C	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Pai	t:XIII. Reconciliation of Expenses per Audited Financial Statements With Expense		·····
1	Total expenses and losses per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		
а	Donated services and use of facilities		
ь	Prior year adjustments	(C)22	
С	Other losses · · · · · · · · · · · · · · · · · ·		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	533	
-	Investment expenses not included on Form 990, Part VIII, line 7b	2000	
a	Other (Describe in Part XIV.)		
D	Add tines 4a and 4b		
_		-	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	1 3 1	
	1 XIV: Supplemental Information		
	plete this part to provide the descriptions required for Part II, tines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b		
	b, Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete		
this p	art to provide any additional information.		
			-
			
			
		•	

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities Complete It the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or d the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See Separate instructions.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

2009 Open to Public Inspection

ne of the organization						Employer ider	tdication number
ASHINGTON STATE GRAN	IGE 153 F	OREST				23-2	564007
Fundraising Activitie Form 990-EZ filers are not re	S. Complete if the	e organization	answered	"Yes" to Form 990, P	art IV, line 1	7.	
Indicate whether the organization rais			lowing act	wities. Check all that	apply.		
a Mail solicitations				of non-government o			
b Internet and email solicitations				of government grant	S		
c Phone solicitations		g 🗌	Special fur	ndraising events			
d In-person solicitations							
la Did the organization have a written o							-
or key employees listed in Form 990							es [_] No
b If "Yes," list the ten highest paid indiv			pursuant to	agreements under w	thich the tun	draiser is	
to be compensated at least \$5,000 by	y the organization	1.					
(i) Name of Individual	(ii) Activity	(iii) Did fundi	reiser have	(fv) Gross receipts	(v) Amos	int paid to	(M) Amount paid to
or entity (fundraiser)	(-,,	custody or o	ontrol of	from activity	(or reta	ined by)	(or retained by)
		contribu	itions?		1	arlisted un ol. (i)	organization
		Yes	No		 		
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otal <u></u>	<u></u> . <u>.</u> .	<u> </u>	<u>.</u> >		<u></u>		
List all states in which the organization				or has been notified it	is exempt fr	om	
registration or licensing							
							
							
							
							
							

	EEA Schotule	e G (Form 990 or	990-EZ) 2	009
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	X	2%
11	Does the organization operate gaming activities with nonmembers?	11	X	
b	If "Yes," Explain:			
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a		X
	If "No," Explain:	Š		
9 a	Enter the state(s) in which the organization operates gaming activities. WA, Is the organization licensed to operate gaming activities in each of these states?	9a	1	మాచ
•	Enter the state(s) to which the organization operates garming activities. WA,	10 m		

Sched	tule G (Form 990 or 990-EZ) 2009 WASHINGTON STATE GRANGE 153 FOREST	23-256400)7	P	age 3
		- ···-		Yes	No
13	Indicate the percentage of gaming activity operated in:				8325
а	The organization's facility	100.000 %		~	
ь	An outside facility	%	es e Cenim	(A. 10)	
14	Provide the name and address of the person who prepares the organization's gaming/special events books	- S	X:::.		
	and records:	Į.		3.00	
	Name ► DOROTHY TORBIN	N			
	Manie Boxolni lokbin			3.64	
	Address ► 1098 SE ADAMS CHEHALIS, WA 98532			200	******
	Addiess - 1000 SE ADAMS CREMADIS, WA 10032	 *			ved.
15-	Done the expensation have a contract with a third early from whom the expensions consists promise	ř			
128	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	p p	15a	aaaxx	X
_	·		80,000	ر مريد سر	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
		į.			TO S
	amount of gamung revenue retained by the third party ► \$				%
c	If "Yes," enter name and address:	la constant de la con		eng side Litar	449?°
		þ	(3) (9)(3)	(0%) €% (4	
	Name ►	——— <u>[</u> :	300	5 W	
		K		1 (1) 1 (1) m	22 C
	Address ▶	f			N. W
16	Gaming manager information.	Į.	13 (S)	200	33.7
		[.		27 J. S.	M4.55
	Name ▶	\		2000 2000	10.00
		į.		())	
	Gaming manager compensation ► \$			<i>`</i> ``\`\$\	
				\$	7 / S
	Description of services provided			الأورين	
		į,	(Š	**************************************	
	Director/officer Employee Independent contractor	,		N	(3)
		þ	1		44 5
17	Mandatory distributions:	.	ا ٠٠٠٠	44°	(4.3
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	k	Sal	۲.(.)	ويخذي
	retain the state gaming license?		17a		Х
ь	Enter the amount of distributions required under state law distributed to other exempt organizations or spent	Γ	138	أنسهر	en.
	in the organization's own exempt activities during the tax year ► \$;	p.	Some	a gaid

990	Overflow Statement		. Page 1
lame(s) as shown on return			FEIN
WASHINGTON STAT	E GRANGE 153 FOREST		23-2564007
	PAYROLL TAXES		
Description			Amount
FEDERAL FICA FE			\$ 8,637
STATE SUI WORKE	RSCOMP FUTA	Total:	1,231 \$ 9,868
		iotai.	3,000
	OCCUPANCY EXP		
Description			Amount
JTILITIES			\$ 7,368
REPAIRS			4,959
PROPERTY TAX		Total:	\$ 13,375
		iotai.	4 13,371
	ALL OTHER EXPENSES		
Description			Amount
SUPPLIES			\$ 821
STATE TAX			876
STATE SALES TAX	COLLECTED		847
ADVERTISING			384 50
MISC EXP BANK FEES			406
BANK FEES		Total:	\$ 3,384
	TAXES AND LICENSES		
			Amount
Description			
LICENSES	OFFICE AND O		\$ 611
Description LICENSES STATE OF WASHIN PAYROLL TAXES	GTON B AND O		

Form	4562	•	Depre	ciation ar	nd Amortia	zation			OMB No. 1545-0172
		((Including	Information	on Listed	Property	·)		2009
	meni of the Treasury Il Revenue Service (99)		► See separate	instructions.	► Attach to	your tax retur	n.		Attachment Sequence No. 67
	s) shown on return			Bus	siness or activity to whic	h this form relates			Identifying number
WAS	SHINGTON ST	ATE GRAI	NGE 153	FORE	FORM 990	- 1			23-2564007
Pa	tile Election	To Expense	e Certain Pro	operty Under	Section 179				
	Note: If you	have any liste	d property, comp	olete Part V before	you complete Part	1			·
1	Maximum amount. So	ee the instructi	ons for a higher i	limit for certain bus	sinesses			1	
2	Total cost of section	179 property pl	laced in service ((see instructions)				2	
3	Threshold cost of sec	ction 179 prope	erty before reduc	tion in limitation (se	ee instructions)			3	
4	Reduction in limitation	n. Subtract line	3 from line 2. If	zero or less, enter	-0-			4	<u> </u>
5	Dollar limitation for ta	x year. Subtra	ct line 4 from line	1. If zero or less,	enter -0 If married	d filing		l	
	separately, see instru	octions		<u> </u>		· · · · · · ·	<u> </u>	5	
) Description of pro	openy	(0)	Cost (business use only	(c) Ele	cted cost		
6									
7	Listed property. Ente			<i></i>	<u> </u>	<u>'l</u>			
8	Total elected cost of							8	
9	Tentative deduction.					• • • • • •		9	
10	Carryover of disallow							10	
11	Business income limi					ine 5 (see ins	tructions)	11	
12	Section 179 expense					· · · · · ·	<u></u>	12	
13	Carryover of disallow	ed deduction to	o 2010. Add line:	s 9 and 10, less lin	912 . ▶ 13	3			\$
Note	Do not use Part II or								
Pa							isted pro	perty.	(See instructions.)
14	Special depreciation	allowance for c	qualified property	(other than listed	property) placed in	service			
	during the tax year (s				· · · · · · · · · ·		• • •	14	
15	Property subject to se	ection 168(f)(1)	election		• • • • • • • • •		• • •	15	
16	Other depreciation (ir						• • • •	16	3,382
Pa	t III; MACRS	Depreciation	On (Do not inc		y.) (See instruction	ıs.)			
				Section	· · · · · · · · · · · · · · · · · · ·				2.50
17	MACRS deductions f	•					• • •	17	1,362
18	It you are electing to							J 3.	of a gray of the second
	asset accounts, chec				 		٠٠,	1.7.00	Committee of the 3 percent
	Secti	on B - Assets	(b) Month and	(c) Basis for deprecia	Tax Year Using th	ne General De	preciatii	оп зу	stem
	(a) Classification of pro	perty	year placed in service	(Dusiness/investment anly-see instruction	use (a) Recovery	(e) Convention	(f) Med	hod	(g)Depreciation deduction
19a	3-year property								
ь	5-year property		ĸŵŵń źźź			<u> </u>	ļ		
С	7-year property					<u> </u>	ļ		
d	10-year property						ļ		
•	15-year property					ļ	<u> </u>		
f_	20-year property					<u> </u>	ļ <u></u> -	····-	
9_	25-year property				25 yrs.	ļ <u>-</u>	SA		
h	Residential rental				27.5 yrs.	MM	SA		
	property				27.5 yrs.	MM	S/L		
i	Nonresidential real				39 yrs.	MM	S/L		
	property					MM	S/L		<u> </u>
	Section	n C - Assets	Placed in Servi	ice During 2009 T	ax Year Using th	e Alternative			System
20 a	Class life					<u> </u>	SA		<u></u>
ь	12-year			·	12 yrs.	 	SA		
_ c			<u> </u>	L	40 yrs.	MM	<u> </u> S/L		<u> </u>
Pa		y (see instruc							,
21	Listed property. Ente			• • • • • • • • • • • • • • • • • • •			• • •	21	ļ
22	Total. Add amounts f						ase	۱	
	and on the appropriat					tions	· · · ·	22	4,744
23	For assets shown ab				1				
	portion of the basis a								
For F	aperwork Reduction	Act Notice, s	ee separate ins	structions.	EEA				Form 4562 (2009)

SCHEDULE 0 (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

Open to Public Inspection Employer identification number

WASHINGTON STATE GRANGE 153 FORBST	23-2564007
01. Members or stockholder classes and rights (Part VI, line 6)	
52 VOTING MEMBERS	
02. Member election for additional members (Part VI, line 7a)	
MEMBERS ARE ALLOW TO VOTE FOR EACH GOVERNING POSITION	
03. Governing body decisions (Part VI, line 7b)	
ALL DECISIONS ARE REVIEW BY THE MEMBERSHIP	
	,
04. Governing body meeting documentation (Part VI, line 8a)	
ALL DECISIONS ARE REVEW BY THE MEMBERSHIP MONTHLY	
05. Form 990 unavailable to public (Part VI, line 18)	
ALL FINANCIAL DOCUMENTS ARE AVAILABLE UPON REQUEST	
06. Governing documents, etc, available to public (Part VI, line 19)	
ALL AND ANY INFORAMTION AND REPORTS AND RECORDS ARE AVAILABLE UPON REC	QUEST

X COMPUTATION WO	Identifying Number			
ASHINGTON STATE	23-2564007			
LOWER END OF BRACKET	UPPER END OF BRACKET	TAX RATE	INCOME IN BRACKET	INCOME TAX BY BRACKET
0	50,000	15 %		
50,000	75,000	25 %		
75,000	100,000	34 %		
100,000	335,000	39 %		
335,000	10,000,000	34 %		<u> </u>
10,000,000	15,000,000	35 %		
15,000,000	18,333,333	38 %		<u> </u>
18,333,333	AND UP	35 %		
		TOTALS		

TAX COM	PUTATIO	ON FOR	CONTRO	DLLED	GROUP:	S
						_

15.0/	1
15 %	
25 %	
34 %	
100 %	
100 %	
35 %	
	25 % 34 % 100 %

10

Lower End	Upper End	Tax Rate	Income in Bracket	Income Tax by Bracke
0	2,200	15%		
2,200	5,150	25%		
5,150	7,850	28%		<u> </u>
7,850	10,700	33%		
10,700	AND UP	35%		
		TOTALS		