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Form **990-EZ**

OMB No 1545-1150

44

Department of the Treasury Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

Open to Public Inspection

Check applica		and endi		25,	2010				
	ible Please C Name of Organization		D	Employer	identification number				
Addr									
Jchan	Anne print or JOB'S DAUGHTERS INTERNATIONAL, INC. 82-6026592								
]Initia	notial eturn See Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Telephone number								
Tern	Termin- Specific Q A Q 2 7 TTNT TD T 3 7 F								
Amended trions City or town, state or country, and ZIP + 4 F Group Exemption									
Appli pend	BOISE, ID 83704			Number	→ 3740				
• Se	ction 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a comp	leted	G Accountin	g method:	X Cash Accrual				
	Schedule A (Form 990 or 990-EZ).		Other (spe	ecify) ►					
Vebs	ite: ► WWW.JOBSDAUGHTERS.ORG		H Check ▶	• X if	the organization is not				
	xempt status (check only one) $- \mathbb{X} = 501(c)(3)$ (insert no.) $\boxed{} = 4947(a)(1)$ or	527	required to at	tach Sche	dule B (Form 990, 990-EZ, or 990-PF)				
heck	If the organization is not a section 509(a)(3) supporting organization and its gross rec	eipts are n	normally not m	ore than \$	25,000. A Form 990-EZ or				
	Form 990 return is not required, but if the organization chooses to file a return, be sur								
\dd li	nes 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 inste			▶ \$	39,148.				
rt I	Revenue, Expenses, and Changes in Net Assets or Fund Bala			ons for Pa					
1	Contributions, gifts, grants, and similar amounts received			1	718.				
2	Program service revenue including government fees and contracts			2	20,479.				
3	Membership dues and assessments			3	4,298.				
4	Investment income			4					
5a				<u> </u>					
b									
C	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	· 		5c					
6	Special events and activities (complete applicable parts of Schedule G). If any amount is from g	amina ch	eck here	┑┝╩╾					
	0	uming, on	LOOK HOLD L	_					
a	reported on line 1) 6a		5,455	5					
	· ·		3,43.	'					
b	3. 1.				5,455.				
7-	Net income or (loss) from special events and activities (Subtract line 6b from line 6a) Gross sales of inventory, less returns and allowances STMT 4 7a		3,449		3,433.				
7a			2,455						
b	<u></u>	 	4,45		994.				
C	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) Other revenue (describe ► SEE \$	ים חגמים	MENIO 2	7c	4,749.				
8		TWIE		· —					
9	Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8			 -	36,693.				
10	Grants and similar amounts paid (attach schedule)			10	3,500.				
11	Benefits paid to or for members			11	.				
12	Salaries, other compensation, and employee benefits			12	450				
13	Professional fees and other payments to independent contractors			13	450.				
14	Occupancy, rent, utilities, and maintenance			14	0.534				
15	Printing, publications, postage, and shipping			15	2,534.				
		TATE	MENT 1	' 	33,639.				
16			,	▶ 1 7	40,123.				
16 17	Total expenses. Add lines 10 through 16) 	1	1 2 4 2 2				
16	Excess or (deficit) for the year (Subtract line 17 from line 9)	040	<u> </u>	18	-3,430.				
16 17	Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, columes)) NOV 2 6 2	010		18					
16 17 18	Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, column NOV 2 6 2 (must agree with end-of-year figure reported on prior year's return)	010		18	-3,430. 117,809.				
16 17 18 19	Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, column NOV 2 6 2 (must agree with end-of-year figure reported on prior year's return) Other changes in net assets or fund balances (attach explanation)	010		18	117,809.				
16 17 18 19 20 21	Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, column (must agree with end-of-year figure reported on prior year's return) Other changes in net assets or fund balances (attach explanation) Net assets or fund balances at end of year. Combine lines 18 through 20 OGDEN,	010 C	2	18 19 20 21					
16 17 18 19 20 21	Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, column 20)) (must agree with end-of-year figure reported on prior year's return) Other changes in net assets or fund balances (attach explanation) Net assets or fund balances at end of year. Combine lines 18 through 20 OGDEN, Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file F	010 0 010 0 010 0 010 0 010 0	nstead of Form	18 19 20 ▶ 21 990-EZ.	117,809. 114,379.				
16 17 18 19 20 21	Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, column (must agree with end-of-year figure reported on prior year's return) Other changes in net assets or fund balances (attach explanation) Net assets or fund balances at end of year. Combine lines 18 through 20 OGDEN,	010 0 010 0 010 0 010 0 010 0	nstead of Form Beginning of ye	18 19 20 21 990-EZ.	117,809. 114,379. (B) End of year				
16 17 18 19 20 21	Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, column 20)) (must agree with end-of-year figure reported on prior year's return) Other changes in net assets or fund balances (attach explanation) Net assets or fund balances at end of year. Combine lines 18 through 20 OGDEN, Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file F	010 0 010 0 010 0 010 0 010 0	nstead of Form	18 19 20 21 990-EZ.	117,809. 114,379.				
16 17 18 19 20 21 rt II	Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, column 19) Other changes in net assets or fund balances (attach explanation) Net assets or fund balances at end of year. Combine lines 18 through 20 Goden 18 Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file F (See the instructions for Part II)	010 0 010 0 010 0 010 0 010 0	nstead of Form Beginning of ye	18 19 20 21 990-EZ.	117,809. 114,379. (B) End of year				
16 17 18 19 20 21 art II	Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, column (must agree with end-of-year figure reported on prior year's return) Other changes in net assets or fund balances (attach explanation) Net assets or fund balances at end of year. Combine lines 18 through 20 Goden, Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file F (See the instructions for Part II) sh, savings, and investments	010 0 010 0 010 0 010 0 010 0	nstead of Form Beginning of ye	18 19 20 ≥ 21 990-EZ. ar5 22	117,809. 114,379. (B) End of year				
16 17 18 19 20 21 ert II	Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, column (must agree with end-of-year figure reported on prior year's return) Other changes in net assets or fund balances (attach explanation) Net assets or fund balances at end of year. Combine lines 18 through 20 GEDEN, Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file F (See the instructions for Part II) sh, savings, and investments and and buildings	010 0 010 0 010 0 010 0 010 0	nstead of Form Beginning of ye	18 19 20 21 990-EZ. ar 5 22 23 4 24	117,809. 114,379. (B) End of year 110,242.				
16 17 18 19 20 21 Irt II	Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, columnity)) Other changes in net assets or fund balances (attach explanation) Net assets or fund balances at end of year. Combine lines 18 through 20 Goden, Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file F (See the instructions for Part II) sh, savings, and investments and and buildings her assets (describe SEE STATEMENT 2) tal assets	010 0 010 0 010 0 010 0 010 0	Instead of Form Deginning of year 112,51	18 19 20 21 990-EZ. ar 5 22 23 4 24	117,809. 114,379. (B) End of year 110,242. 4,137.				
16 17 18 19 20 21 rt II Cas Lar Oth	Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, column (IIII)) Other changes in net assets or fund balances (attach explanation) Net assets or fund balances at end of year. Combine lines 18 through 20 Get the instructions for Part III) Sh, savings, and investments and and buildings rer assets (describe SEE STATEMENT 2)	010 0 010 0 010 0 010 0 010 0	Instead of Form Deginning of year 112,51	18 19 20 21 990-EZ. ar 23 24 24 99 25 0 26	117,809. 114,379. (B) End of year 110,242. 4,137. 114,379.				

GRAND GUARDIAN COUNCIL OF IDAHO

Fori	m 990-EZ (2009) · JOB'S DAUGHTERS INTERNAT	IONAL, INC.		<u>82-</u>	<u>-60265</u>	92 Page :
P	art III Statement of Program Service Accomplishme	ents (See the instructions for	Part III.)		E	xpenses
Wh	at is the organization's primary exempt purpose? SEE STATEMEN	T 7			1 ' '	or section 501(c)(3)
	scribe what was achieved in carrying out the organization's exempt pu		ise manner descr	ibe	1	4) organizations and
	services provided, the number of persons benefited, and other releva	· ·			for others)	7(a)(1) trusts, optiona
28	SEE STATEMENT 6	<u> </u>			†	
20	DEE STRIEMENT 0					
		 				
					امما	
	(Grants \$) If this amount includes foreign	grants, cneck nere			28a	
29			-		1	
		<u> </u>				
			·		,	
	(Grants \$) If this amount includes foreign	grants, check here		لييا	29a	
30					1 1	
	(Grants \$) If this amount includes foreign	grants, check here			30a	
31	Other program services (attach schedule)				T	
	(Grants \$) If this amount includes foreign	grants, check here	•		31a	
32	Total program service expenses (add lines 28a through 31a)				32	0.
P	art IV List of Officers, Directors, Trustees, and Key	Employees. List each one ev	en if not compensated	(See the		
		1			ontributions]
		(b) Title and average hours	(c) Compensation		employee	(e) Expense
	(a) Name and address	per week devoted to	(If not paid, enter		efit plans &	account and
		position	-0-)		leferred	other allowances
	DD1D1 V1VOVDV	CD LID CHILDRE		COIII	pensation	
	RBARA MAHONEY	_GRAND GUARDIA	_		•	
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	VIN SULLIVAN	ASSOCIATE GRA		AN	_	_
	83 ZUNI DRIVE, BOISE, ID 83704	10.00	0.	<u> </u>	0.	0.
	RLEEN CLAYVILLE		ARDIAN			
<u>94</u>	83 ZUNI DRIVE, BOISE, ID 83704	20.00	0.		0.	0.
BC	B MAHONEY	_VICE ASSOCIAT	E GRAND G	UAR	RDIAN	
94	83 ZUNI DRIVE, BOISE, ID 83704	20.00	0.		0.	0.
ΜE	LODY SMALL	GRAND GUIDE				
94	83 ZUNI DRIVE, BOISE, ID 83704	10.00	0.	}	0.	0.
ΜE	L BROWN	GRAND INNER G	UARD			
94	83 ZUNI DRIVE, BOISE, ID 83704	20.00	0.		0.	0.
	RY JANE MUNCY	GRAND MARSHAL				
	83 ZUNI DRIVE, BOISE, ID 83704	20.00	0.		0.	0.
	REMY VAUGHN	GRAND OUTER G				
	83 ZUNI DRIVE, BOISE, ID 83704	10.00	0.		0.	0.
	HN KINNEY	GRAND SECRETA				
	83 ZUNI DRIVE, BOISE, ID 83704	20.00	0.		0.	0.
	NDY BROWN	GRAND TREASUR				
	83 ZUNI DRIVE, BOISE, ID 83704	10.00	0.		0.	0.
74	ZUNI DRIVE, BOISE, ID 63704	10.00				
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Page 3

Form 990-EZ (2009) • JOB'S DAUGHTERS INTERNATIONAL, INC.

Part V Other Information (Note the statement requirements in the instructions for Part V)

33 Dut the organization engage in any activity not previously reported to the IRSP If Yes,* statch a detailed description of each activity 34 Were any changes made to the organization governing documents? If Yes,* statch a conformed copy of the changes 35 If the organization had income from business activities, such as those reported on fines 2, 6a, and 7a (among others), but not reported on Form 990-7, statch a statement explaning why the organization of the report do nine 2, 6a, and 7a (among others), but not reported on Form 990-7, statch a statement explaning why the organization of the report of the report of the previous of the properties of the	1 6	THE VIOLETTI CONTROL OF THE STATEMENT REQUIREMENTS IN THE INSTRUCTIONS FOR THE VY		1	T
34 Were any changes made to the organizing or governing documents? If Yes, 1 statich a conformed copy of the changes If the organization had mome from business activities, such as those reported on lines 2, 6s, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T. Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(a) notice, reporting, and proxy tax requirements? Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes,* So the filed a fax return on Form 990-T for this year? Did the organization brorow from, or make any loans to, any officer, director, fusitee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 37b				Yes	
If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among othors), but not reported on Form 990-1, stach a satement explaining with the organization did not report the income on Form 990-1. Did the organization have unrelated business gross some of \$1,000 or more or was it subject to section 6033(a) notice, reporting, and proxy tax requirements? Did the organization have unrelated business gross some of \$1,000 or more or was it subject to section 6033(a) notice, reporting, and proxy tax requirements? Did the organization brown form 990-1 for this year? Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, someties applicable parts of Schi, N. A. Set Enter amount of political expenditures, direct or indirect, as described in the instructions. Did the organization berow from rom, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this raturn? Bid N/A Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9 Bid Gross receiptis, included on line 9, for public use of club sacilities Initiation fees and capital contributions included on line 9 Bid Gross receiptis, included on line 9, for public uses of club sacilities Bid Gross receiptis, included on line 9, for public uses of club sacilities Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on the organization during the year under section 911(x) and 501(c)(3) organizations. Enter amount of tax imposed on the organization and provided provided tax sheller transaction during the year under sections 491(x) 495, and 4950 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualitied persons during the year under sections 491(x) 495, and 4950 Section 501(c)(3) and 501(c)(4) organizat	33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	ļ	
reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T. a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? b If "Yes," has it filled a tax return on Form 990-T for this year? 50 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Sch. N 73 Enter amount of political expenditures, direct or indirect, as described in the instructions. b Oth the organization 16 Form 1120-PDL for this year? 36 Did the organization 16 Form 1120-PDL for this year? 37 Enter amount of political expenditures, direct or indirect, as described in the instructions. b Oth the organization 16 Form 1120-PDL for this year? 37 Enter amount of political expenditures, direct or indirect, as described in the instructions. b Oth the organization 16 Form 1120-PDL for this year? 38 Did the organization 16 Form 1120-PDL for this year? 38 Did the organization 16 Form 1120-PDL for this year? 39 Section 501(c)(7) organizations. Enter: 30 Int "Yes," complete Schedule L, Part II and enter the total amount involved 30 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on the organization during the year under section 4911 PDL DL Schedules. 50 Section 501(c)(3) and 501(c)(4) organizations Finter amount of tax imposed on organization managers or disqualified person during the year under sections 4912, 4955, and 4958 C Section 501(c)(3) and 501(c)(4) organizations Finter amount of tax imposed on organization managers or disquired person during the year under sections 4912, 4955, and 4958 C Section 501(c)(3) and 501(c)(4) organizations Finter amount of tax on line 40c reimbursed by the organization and person during the part of the organization for the amount of tax organization organization managers or disqualified person during the year u	34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes			
and prory tax requirements? b If the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and prory tax requirements? b If Yes, has it field a tax return on Form 990-T for this year? 550 N/A 570 Enter amount of political expenditures, director indirect, as described in the instructions. b Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, complete a political expenditures, direct or indirect, as described in the instructions. b Did the organization before Whom, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 580 N/A 581 If Yes, complete Schedule I, Part II and enter the total amount involved 582 N/A 583 N/A 584 X 585 N/A 586 X 586 X 587 Enter amount of political expenditures, director, invisee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 588 N/A 589 Section 501(c)(7) organizations. Enter: a Initiation fies and capital contributions included on line 9 5 Gross receipties, included on line 9 b, for public use of club bacilities 5 Gross receipties, included on line 9 b, for public use of club bacilities 5 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on the organization during the year under section 4912 b C Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction during the year year is the properties of the congruence of years and transaction during the year year is the	35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not	1		
and prory tax requirements? b If the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and prory tax requirements? b If Yes, has it field a tax return on Form 990-T for this year? 550 N/A 570 Enter amount of political expenditures, director indirect, as described in the instructions. b Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, complete a political expenditures, direct or indirect, as described in the instructions. b Did the organization before Whom, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 580 N/A 581 If Yes, complete Schedule I, Part II and enter the total amount involved 582 N/A 583 N/A 584 X 585 N/A 586 X 586 X 587 Enter amount of political expenditures, director, invisee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 588 N/A 589 Section 501(c)(7) organizations. Enter: a Initiation fies and capital contributions included on line 9 5 Gross receipties, included on line 9 b, for public use of club bacilities 5 Gross receipties, included on line 9 b, for public use of club bacilities 5 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on the organization during the year under section 4912 b C Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction during the year year is the properties of the congruence of years and transaction during the year year is the		reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.	ŀ		
and proxy tax requirements? b If Yes,* has it filed a fax return on Form 990-T for this year? b If Yes,* has it filed a fax return on Form 990-T for this year? b If the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes,* complete applicable parts of Sch. N 37a	а	•			
b If Yes,* has it filed a tax return on Form 990-T for this year? 50 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes,* complete specified by the organization of softs. N 73 Enter amount of political expenditures, direct or indirect, as described in the instructions. 10 Did the organization file Form 1120-PDL for this year? 23 Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 10 If Yes,* complete Schedule L, Part II and enter the total amount involved 23 Section 501(c)(7) organizations. Enter: 2 Intiation fees and capital contributions included on line 9 2 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year or is it aware that it engaged in an excess benefit transaction of the organization has not been reported on any of the organizations of the organization engage in any section 4958 excess benefit transaction has not been reported on any of the organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year or is it aware that it engaged in an excess benefit transaction of tax in proof to the organization benefit of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 2 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax minused by the organization so the organization of tax in line 40c reimbursed by the organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete form 8886-1 2 List the states with which a copy of this return is filed. 3 NOBE 3 Telephone no. (208) 323–0789 3 Telephone n	_		35a		х
Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, "originate applicable parts of Sch. N 38	h		-	N/	
complete applicable parts of Sch. N 378 Enter amount of political expenditures, direct or indirect, as described in the instructions. Did the organization the Form 1120-PDL for this year? 389 Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? Did the organization section 501(c)(7) organizations. Enter in initiation fees and capital contributions included on line 9 Did Gross receipts, included on line 9, for public use of club facilities Did Gross receipts, included on line 9, for public use of club facilities Did Gross receipts, included on line 9, for public use of club facilities Did Gross receipts, included on line 9, for public use of club facilities Did Gross receipts, included on line 9, for public use of club facilities Did Gross receipts, included on line 9, for public use of club facilities Did Gross receipts, included on line 9, for public use of club facilities Did Gross receipts, included on line 9, for public use of club facilities Did Gross receipts, included on line 9 Did Gross receipts, and the did Gross receipts and facilities the state of the companization of the organization with a foreign country (such as a			-	/	
The Enter amount of political expenditures, direct or indirect, as described in the instructions. 37a	30		36		¥
b Did the organization file Form 1120-POL for this year? 38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 38b N/A 38c Complete Schedule L, Part II and enter the total amount involved 38c N/A 3	77-				- 41
Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 388			276		v
m a prior year and still outstanding at the end of the period covered by this return? b If Yes,* complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities a Section 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 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 ₱ ○ 0. b Section 501(c)(3) and 501(c)(4) organizations. Did the organization with a disqualified person in a priory year, and that the transaction has not been reported on any of the organizations Finter amount of tax imposed on organization managers or disqualitied persons during the year under sections 4912, 4955, and 4958 c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualitied persons during the year under sections 4912, 4955, and 4958 c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. c All three organizations. At any time during the tax year, was the organization a party to a prohibited tax sheller transaction? If Yes, complete Form 8886-T List the states with which a copy of this return is filed. ▶ NONE 11 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; ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If Yes, enter the name of the foreign country; ▶ See the instructions for excepti			3/0		Δ.
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GRAND GUARDIAN COUNCIL OF IDAHO

Form 990-EZ (2009) JOB'S DAUGHTERS INTERNATIONAL, INC.

82-6026592

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Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 Yes No Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public 46 office? If "Yes." complete Schedule C, Part I 46 X 47 Х 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 48 Х Х 49a Did the organization make any transfers to an exempt non-charitable related organization? 49a b If "Yes," was the related organization a section 527 organization? Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None" (d) Contributions (b) Title and average hours (c) Compensation (e) Expense to employee (a) Name and address of each employee paid more per week devoted to account and benefit plans & than \$100,000 position deferred other allowances compensation NONE Total number of other employees paid over \$100,000 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None." NONE (a) Name and address of each independent contractor paid more than \$100,000 (b) Type of service (c) Compensation d Total number of other independent contractors each receiving over \$100,000 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here GRAND JOHN KINNEY Paid Preparer's signature Check if self-Preparer's identifying number (See instr.) Preparer's employed 🛌 Use Only VI\$ JEFFRIES, P.A. EIN > Firm's name (or yours W WASHINGTON ST Phone > if self-employed). 590 no. (208)345-5383BOISE ID 83702-5953

X Yes

May the IRS discuss this return with the preparer shown above? See instructions

SCHEDULE A .

(Form 990 or 990-EZ)

Name of the organization

GRAND

Public Charity Status and Public Support

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

GUARDIAN COUNCIL OF IDAHO JOB'S DAUGHTERS INTERNATIONAL, INC.

Employer identification number

82-6026592 Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III · Functionally integrated b Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(m) h Provide the following information about the supported organization(s) (iii) Type of (vi) Is the (iv) is the organization (v) Did you notify the (i) Name of supported (vii) Amount of (ii) EIN organization organization in col. in col. (i) listed in your organization in col. (i) organized in the U.S.? organization support (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes Yes Yes

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts and-circumstances" test, check this box and stop here. Explain in Part IV how the

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

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Schedule	A	ırorm	99U (OF.	990-	ᄕᄯ	2008

١, GRAND GUARDIAN COUNCIL OF IDAHO Schedule A (Form 990 or 990 EZ) 2009 JOB'S DAUGHTERS INTERNATIONAL, INC. 82-6026592 Page 3 Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and membership fees received (Do not 919 718. include any "unusual grants") 1,420. 895. 313 4,265. 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 38,775. 44,670. 35,975. 195,984. 37,423. 39,141. organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 38,843. 40,036. 39,694. 44,983. 36,693. 200,249. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 0. 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the 0. amount on line 13 for the year 0. c Add lines 7a and 7b 200,249. 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (d) 2008 (b) 2006 (c) 2007 (e) 2009 (f) Total (a) 2005 40,036. 39,694. 44,983 200,249. 38,843. 36,693. 9 Amounts from line 6 10a Gross income from interest. dividends, payments received on securities loans, rents, royalties

and income from similar sources	1,678	2,022.	2,240.	1,225.	18.	7,183.
b Unrelated business taxable income				1		
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b	1,678.	2,022.	2,240.	1,225.	18.	7,183.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				_,,		
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)		_				
13 Total support (Add lines 9, 10c, 11, and 12)	40,521.	42,058.	41,934.	46,208.	36,711.	207,432.
14 First five years. If the Form 990 is for	the organization's	first, second, third	, fourth, or fifth tax	cyear as a section	501(c)(3) organiz	ation,
check this box and stop here						▶□
Section C. Computation of Publ	ic Support Per	centage				
15 Public support percentage for 2009 (I	ine 8, column (f) div	ided by line 13, co	olumn (f))		15	96.54 %
16 Public support percentage from 2008	Schedule A, Part II	l, line 15			16	95.80 %
Section D. Computation of Inves	stment Income	Percentage				
17 Investment income percentage for 20	09 (line 10c, columi	n (f) divided by line	: 13, column (f))		17	3.46 %
18 Investment income percentage from 2	2008 Schedule A, P	art III, line 17		[18	4.20 %
19a 33 1/3% support tests - 2009. If the	organization did no	t check the box or	n line 14, and line	15 is more than 33	3 1/3%, and line 1	7 is not
more than 33 1/3%, check this box ai	nd stop here. The o	rganization qualifie	es as a publicly su	pported organizat	ion	▶X
b 33 1/3% support tests - 2008. If the	•	•				and
line 18 is not more than 33 1/3%, che						ightharpoons
20 Private foundation. If the organizatio	-	·				

FORM 990-EZ	OTHER EXPENSES		STATEMENT
DESCRIPTION			AMOUNT
OFFICE SUPPLIES			2,198.
TRAVEL			1,200.
AWARDS			1,380.
WEBSITE			71.
CARAVAN			10,872.
OFFICER EXPENSES			2,626.
MISCELLANEOUS			164.
GRAND SESSION			3,6 4 1. 550.
INSURANCE BANK FEES -			57.
BANK FEES - TAXES			98.
SUPREME COUNCIL DUES			7,263.
JDU EXPENSES			2,691.
75 YEAR CELEBRATION			828.
TOTAL TO FORM 990-EZ, LINE 16			33,639.
FORM 990-EZ	OTHER ASSETS		STATEMENT 2
DESCRIPTION		BEG. OF YEAR	END OF YEAR
INVENTORY		2,794.	2,887.
PREPAID		2,500.	1,250.
			
TOTAL TO FORM 990-EZ, LINE 24		5,294.	4,137.
FORM 990-EZ	OTHER REVENUE		STATEMENT 3
DESCRIPTION			AMOUNT
			18.
INTEREST			
			4,585.
INTEREST REIMBURSEMENT SPECIAL DISPENSATIONS			

FORM 990-EZ INCOME AND COST OF GOODS SOLD INCLUDED ON PART I, LINE 7A		STATEMENT 4
INCOME	***************************************	
1. GROSS RECEIPTS	3,449	
3. LINE 1 LESS LINE 2		3,449
4. COST OF GOODS SOLD (LINE 13) 5. GROSS PROFIT (LINE 3 LESS LINE 4)	2,455	994
COST OF GOODS SOLD		
6. INVENTORY AT BEGINNING OF YEAR	2,794 2,548	
11. ADD LINES 6 THROUGH 10		5,342
12. INVENTORY AT END OF YEAR	2,887	2,455

FO	RM 990-EZ	INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS		STATEM	ENT	5
A)	DIRECTLY OR	ANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL TRACT?	[] YES	[X]	NO
В)		ANIZATION, DURING THE YEAR, PAY PREMIUMS, INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?.	. [] YES	[X]	NO

STATEMENT 6

990-EZ PG 2

THE OBJECTIVE OF THE ORGANIZATION IS TO BAND TOGETHER GIRLS FOR SPIRITUAL AND MORAL UPBRINGING AND TO SEEK KNOWLEDGE, TO TEACH THE LOVE OF GOD, LOVE OF COUNTRY, RESPECT FOR THE FLAG, LOVE OF HOME AND FAMILY AND REVERENCE FOR THE TEACHINGS OF THE SCRIPTURES. MEMBERSHIP IS APPROXIMATELY 302.

STATEMENT 7 990-EZ PG 2

SPIRITUAL AND MORAL UPBRINGING FOR GIRLS; DEVELOP LEADERSHIP, SEEK KNOWLEDGE, AND TEACH RESPECT.