

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



Form **990-EZ**

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

OMB No 1545-1150

2009

Open to Public Inspection

A F	or the	2009 calendar ye	ear,	or tax year beginning June 01 , 2009, and e	រាding	May 3	1	, 20	10
Вс					D Employer identification num			fication numb	
	Address change			PALOUSE HILLS DOG FANCIERS INC		9	1-60	35250	
_ <u></u> '	Name cha	nge print		Number and street (or P O box, if mail is not delivered to street address) Room	n/suite E Tele	phone r	numb	er	
=	nıtıal retui	2.		131953 SR 26		5	09-39	97-4508	
=	Specific City or town, state or country and ZIP + 4					F Group Exemption			
=	Amended Annlicatio	mber		ЮП					
<u> </u>									
	 Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). G Accounting Met Other (specify) 								(Ccruai
	H Check ► ✓ If t								
	I Website: ► www.phdf.org required to attact								990,
J Tax-exempt status (check only one) — ✓ 501(c) (4) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 990-EZ, or 990-									
	Check •			ration is not a section 509(a)(3) supporting organization and its gross recei					. A
				urn is not required, but if the organization chooses to file a return, be su		plete re	turn.	•	
				9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of F		<u>► </u>			
12	art I			enses, and Changes in Net Assets or Fund Balances (S	ee the instr	uction	s to	r Part I.)	
	1	Contributions,	gıft	s, grants, and similar amounts received		1			1873.
	2	Program service	ce r	evenue including government fees and contracts		2			39,978.
	3	Membership d	ues	and assessments		3			870.
	4	Investment inc	om	9		4			80.
	5a	Gross amount	fro	n sale of assets other than inventory 5a					
	b	Less: cost or o	the	r basis and sales expenses		靈			
5	c	Gain or (loss) f	ron	sale of assets other than inventory (Subtract line 5b from line 5a	a)	5c	1		
~ <u>e</u>	6	Special events and	2.4.1.4						
₽	a	Gross revenue	***						
∞	_	reported on lin							
JAN Revehu2011	ь	•		ses other than fundraising expenses 6b					
$\stackrel{\sim}{\rightarrow}$	c			s) from special events and activities (Subtract line 6b from line 6	a)	6c	1		
	7a		-	entory, less returns and allowances	ω,		-		
	Ь.	Less: cost of g							
SCANNED 	C	_		s) from sales of inventory (Subtract line 7b from line 7a)		7c			
Z	8	Other revenue				8			
S	9			Id lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		9	┢		42,801.
% —	 				–	+	⊢	•	42,001.
	10			amounts paid (attach schedule) RECEIVED		10			
	11	•		io mombolo	1	11			
Expenses	12	Salaries, other	со	npensation, and employee denepts [12			
e	13	Professional fe	ees			13			
. <u>×</u>	14	Occupancy, re	ent,	utilities, and maintenance	<u> </u>	14			
ш	15	Printing, public	cati	ons, postage, and shipping	. [15	_		
	16	Other expense	es (c	escribe See Statement 1 OGDEIN, OT)	16	_		27,885.
	17	Total expense	es. ,	Add lines 10 through 16	<u> ▶</u>	17			27,885.
ţ	18	Excess or (def	ıcıt)	for the year (Subtract line 17 from line 9)		18			14,916.
Net Assets	19			d balances at beginning of year (from line 27, column (A)) (mus		1			
ĕ				reported on prior year's return)		19	<u> </u>	;	<u>30,658.</u>
Ē	20			net assets or fund balances (attach explanation)		20	<u> </u>		
	21	Net assets or	func	balances at end of year. Combine lines 18 through 20	<u> ▶</u>	21			45,574.
Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 i							ad o	f Form 990	-EZ.
	(See the instructions for Part II.) (A) Beginning					(B) End of ye	ear		
22	2 Cash, savings, and investments				30,658.	22		45,574.	
23	3 La	nd and building	s.				23		
24				e▶)			24		
25	5 То	tal assets .				30,658.	25		45,574.
26) To	tal liabilities (d	lesc	ribe ▶			26		0
27	7 Ne	et assets or fur	ıd b	alances (line 27 of column (B) must agree with line 21)		30,658,	-		45,574.

Par	Statement of Program Service Accom	plishments (See the instr	uctions for Part II	1.)	Γ	Expenses			
What is the organization's primary exempt purpose? see statement 2						(Required for section			
	Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise					501(c)(3) and 501(c)(4) organizations and sectio			
	nanner, describe the services provided, the number of persons benefited, and other relevant information for								
	program title.	,				a)(1) trusts, optional hers.)			
28	Organized shows for the American Kennel Club, ass	isted with 4H club and dog re	elated events, prov	ided		,			
	denstions to esimal shorition				1				
	•••••								
	(Grants \$) If this amount	includes foreign grants, chi	eck here	▶ □	28a	27,885.			
29						,			
	, ,								
	(Grants \$) If this amount	includes foreign grants, ch	eck here	. ▶ □	29a				
30									
	······································								
	(Grants \$) If this amount	includes foreign grants, ch	eck here	. ▶ □	30a				
31	Other program services (attach schedule)								
	(Grants \$) If this amount				31a				
32	Total program service expenses (add lines 28a t	through 31a)		. •	32				
Par					instruc	tions for Part IV.)			
	(a) Name and address	(b) Title and average hours per week	(c) Compensation	(d) Contributio		(e) Expense account and			
	(a) Name and address	devoted to position	(If not paid, enter -0)	employee benefit deferred compe		other allowances			
GAY	E BROCKETT,	DDECIDENT A Lawre							
PO	BOX 215, ENDICOTT WA 99125	PRESIDENT - 0 hours	0		0	0			
JUD	Y ARNESON	VICE PRESIDENT O house							
401 I	DEAN ST, ENDICOTT, WA 99125	VICE PRESIDENT - 0 hours	0		0	0			
MAR	IE TAYLOR	TREASURER - 0							
1319	53 SR 26, COLFAX, WA 99111	REASURER - U	0		0	0			
KAR	EN MARQUARDT	- SECRETARY - 0							
3773	70 HWY 95, DESMET, ID 83824		0		0	0			
CINE	OY CURRY	- SECRETARY - 0							
PO	BOX 77, ENDICOTT, WA 99125		0		0	C			
	BIE FOY	DIRECTOR - 0							
1325	MTN VIEW RD, MOSCOW, ID 83843	DIRECTOR = 0	0		0	0			
	ISE WAITING	DIRECTOR - 0							
1612	ROSE CREEK RD, PULLMAN WA 99163		0		0	O			
	TI WILKISON	DIRECTOR - 0		i					
2398	HARMONY, OROFINO, ID 83544		0		0	0			
				1					
						<u> </u>			
		-			`				
					-				
				-					
		-				1			
				 					
		-	1						

Fart	Other information (Note the statement requirements in the instructions for Part V.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, 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.	<u> </u>		
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section			
L	6033(e) notice, reporting, and proxy tax requirements?	35a 35b		
	If "Yes," has it filed a tax return on Form 990-T for this year?	350		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		✓
	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0.00			لــِـــ
	Did the organization file Form 1120-POL for this year?	37b		✓,
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?			
		38a		
	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9			
	Gross receipts, included on line 9, for public use of club facilities			
	section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
	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 has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		✓
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on			
	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		√
41	List the states with which a copy of this return is filed ▶ NONE			
42a	The organization's books are in care of ▶ MARIE TAYLOR Telephone no. ▶	509 39	7 4508	3
	Located at ► 131953 SR 26, COLFAX, WA 99111 ZIP + 4 ►	99	111	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	account)?	42b		✓
	If "Yes," enter the name of the 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.?	42c	<u></u>	✓
	If "Yes," enter the name of the foreign country: ▶			_
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. 1	▶ ⊔
	and enter the amount of tax-exempt interest received or accrued during the tax year			
4.4	Did the assessment as a selection and decreased find 0.16 W/V - N. E. v. 000 vs. at the second 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.		Yes	NO
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	-		
45		44	⊢-	✓
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If			
	"Yes," Form 990 must be completed instead of Form 990-EZ	45		✓

Part VI

Part \	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 and	17(a)(1) nonexempt cha	exempt charitab ritable trusts mus	ile trusts only. A at answer question	ll sec ns 46	tion -49l	э Э	
46	Did the organization engage in direct or indirect	political campaign activi	ties on behalf of or	in opposition to		Yes	No	
	candidates for public office? If "Yes," complete				46		1	
	Did the organization engage in lobbying activities	•			47 48	-	√	
	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization make any transfers to an exempt non-charitable related organization?						√	
			_		49a		/	
	If "Yes," was the related organization a section 5 Complete this table for the organization's five hi-				49b	es an	d kev	
	employees) who each received more than \$100,0							
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) acc	Expen ount a allowa	ise and	
					_			
f	Total number of other employees paid over \$100),000 ▶		- -				
	Complete this table for the organization's five I \$100,000 of compensation from the organizatio (a) Name and address of each independent contractor	n. If there is none, enter "	None."	pe of service	(c) Con			
d	Total number of other independent contractors e	each receiving over \$100,	000▶	L				
	Under penalties of penury, I declare that I have examine and belief, it is true, correct, and complete Declaration	ed this return, including accompa of preparer (other than officer) is	anying schedules and sta based on all information	atements, and to the bes	t of my any kno	knowledge	edge e	
Sign Here								
	Type or print name and title	trasurer		10101	<u>U</u>			
Paid Prepare	Preparer's signature	Date	Check if self- employed ▶	Preparer's identifying nur	nber (See	instruc	tions)	
Use On	i rimis name (or		EII Pr	N ►				
May th	e IRS discuss this return with the preparer show	n above? See instructions		🕨 🗀	Yes		No	
				Fo	rm 99 0)-EZ	(2009)	

FEDERAL EXEMPT ORGANIZATION TAX SUMMARY (EZ) Palouse Hills Dog Fanciers, Inc. c/o Marie Taylor

2009

Page 1 91-6035250

	2009	2008	D:ff
CORA COCET DEVENUE	2009	2008	Diff
FORM 990EZ REVENUE			
Contributions, gifts, and grants	1,873.	7,131.	-5 <i>,</i> 258.
Program service revenue	39,978.	32 <i>,</i> 079.	7,899.
Membership dues, assessments	870.	814.	56.
Investment income	80.	154.	-74.
Total Revenue	42,801.	40,178.	2,623.
EXPENSES			
Other expenses	27,885.	29,965	-2,080.
NET ASSETS OR FUND BALANCES			
Excess or (deficit) for the year	14,916.	10,213.	4,703.
Net assets/fund bal at beg of year	30,658.	20,445.	10,213.
Net assets/fund bal at end of year	45,574.	30.658.	14.916.

FEDERAL STATEMENTS Palouse Hills Dog Fanciers, Inc. c/o Marie Taylor

2009 91-6035250

Statement 1
Form 990-EZ Part I, Line 16
Other Expenses

AKC Fees	2,873.
Insurance	649.
Equipment purchased	338.
Club picnic & parties	193.
Building rental	
Instruction	
Donations	1,200.
Professional fee	
Entry Refunds	230.
Flowers	
Agility trial expenses	
Conformation/obedience/rally expenses	
TOTAL	

Statement 2
Form 990-EZ, Part III
Organization's Primary Exempt Purpose

The objects of the club shall be: a) to further the advancement of all breeds of purebred dogs; b) to do all in its power to protect and advance the interests of all breeds of purebred dogs and to encourage sportsmanlike conduct at dog shows and obedience trials; c) to conduct sanctioned matches, dog shows and obedience trials under the rules of the American Kennel Club; d) to promote responsible ownership of all dogs.