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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code

may use this form

(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 2009

OMB No 1545 1150

Open to Public Inspection

Internal Revenue Service

Total liabilities (describe

Net assets or fund balances (line 27 of column (B) must agree with line 21)

The organization may have to use a copy of this return to satisfy state reporting requirements For the 2009 calendar year, or tax year beginning 7/01 2009, and ending 2010 D Employer identification number Check if applicable Please Address charge TANANA VALLEY SPORTSMEN'S FOUNDATION INC use IRS label or 26-1832485 PO BOX 70669 Name change E Telephone number print or type See Specific FAIRBANKS, AK 99707 Initial return 907-488-2884 Termination Instruc Amended return Group Exemption tions Number Application pending Cash X Accounting method Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). Accrual Other (specify) Check ► if the organization is not Website: ► N/A required to attach Schedule B (Form 990, 990-EZ, or 990-PF) X Tax-exempt status (check only one) -501(c) (3) **◄** (insert no) 4947(a)(1) or Check X f the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ 13,984. Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) Part I Contributions, gifts, grants, and similar amounts received 13,973 Program service revenue including government fees and contracts 2 3 Membership dues and assessments 3 4 4 $1\overline{1}$ Investment income 5a 5a Gross amount from sale of assets other than inventory 5b b Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a) 5с 6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here a Gross revenue (not including \$ of contributions 6a reported on line 1) 6b b Less direct expenses other than fundraising expenses c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 7a Gross sales of inventory, less returns and allowances 7a b Less cost of goods sold 7b c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 8 Other revenue (describe 9 13,984. Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 Grants and similar amounts paid (attach schedule) See Statement 1 10 8,468 Benefits paid to or for members 11 11 12 Salaries, other compensation, and employee benefits 12 680. Professional fees and other payments to independent contractors 13 13 14 14 Occupancy, rent, utilities, and maintenance 15 15 Printing, publications, postage, and shipping 9,982. Other expenses (describe ► See Statement 2 16 16 AUG 1 1 2010 Total expenses. Add lines 10 through 16 17 19,130. 17 -5,146. Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 Net assets or fund balances at beginning of year (from line 27, column (a) Columbia declarith end-of-year 19 19 672,557. figure reported on prior year's return) Other changes in net assets or fund balances (attach explanation) 20 20 667,411. Net assets or fund balances at end of year. Combine lines 18 through 20 Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ (See the instructions for Part II) (A) Beginning of year (B) End of year 1,988. Cash, savings, and investments 6,884. 22 665, 423. 23 665,423. Land and buildings Other assets (describe - See Statement 3 250. 24 667.411 Total assets 672,557. 25

BAA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions. TEEA08031 01/30/10

Form 990-EZ (2009)

667.411

0. 26

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672,557.

	990-EZ (2009) TANANA VALLEY S	PORTSMEN'S FOUNDAT	ION INC		<u>6-18</u>	32485	Paqe 2						
Par			s (See the instruct	ions.)	J /Bac	Expenses pured for section							
What i	s the organization's primary exempt purpose? Se	<u>e Statement 4</u>			15017	c)(3) and (4)							
Desc	ribe what was achieved in carrying out th ribe the services provided, the number of	orga 4947	nizations and sec (a)(1) trusts, opti	ction									
progr	ram title			 	for o	thérs)							
28	DIRECT SUPPORT FOR TANANA					İ							
	CONSTRUCTION OF NEW FACILITIES AFTER A FIRE BURNED THEIR STRUCTURE												
	TO THE GROUND												
	(Grants \$ 8,468.) If th	is amount includes foreign gr	ants, check here	.	28 a		_						
29													
					7								
			- <i></i>		1	ļ							
	(Grants \$) If th	1 29 a	İ										
30													
		1											
	(Grants \$) If th		30 a										
31	Other program services (attach schedule				<u> </u>								
	(Grants \$) If th	is amount includes foreign gr	ants, check here	▶ [31 a								
32	Total program service expenses (add lin			-	32								
Par	IV List of Officers, Directors	, Trustees, and Key En	1ployees. List each o	ne even if not co	mpens	ated. (See the in	strs)						
		(b) Title and average hours		(d) Contribution		(e) Expense ac							
	(a) Name and address	per week devoted to position	not paid, enter -0)	employee benefit pl deferred compens	ans and	and other allow	ances						
CPA	NT LEWIS	President	0.	deterred compens	0.		0.						
	BOX 70669	1.00			٥.		0.						
	RBANKS, AK 99707	1.00											
		Secretary/Treas	0.		0.		0.						
	LEWIS	_	٥.		υ.		0.						
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	RBANKS, AK 99707	D'											
	RY_HANNESSON	Director	0.		0.	i	0.						
	BOX_70669	0											
	RBANKS, AK 99710	5.				·····							
	TT_BOTHWELL	Director	0.		0.		0.						
	BOX_70669	0											
FAI	RBANKS, AK 99707												
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BAA		TEEA0812L 0	1/30/10	·		Form 990-EZ	(2009)						

of Form 990-EZ

Form 990 must be completed instead of Form 990-EZ

Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,'

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Х

► X Yes No Form **990-EZ** (2009)

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 and 51. Yes No Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I 46 46 47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II X 47 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 48 X 49a Did the organization make any transfers to an exempt non-charitable related organization? 49 a Х **b** If 'Yes,' was the related organization a section 527 organization? 49 b 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' (b) Title and average hours per week devoted to position (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (e) Expense (a) Name and address of each employee paid account and other allowances None f 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 (a) Name and address of each independent contractor paid more than \$100,000 (b) Type of service (c) Compensation None 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 Signature of officer Here GRANT LEWIS President Type or print name and title Preparer's Identifying Number (See instructions) Date Preparer's Paid signature RICK SCHIKORA 8/03/10 P00621197 employed Pre-Warwick & Schikora, P.C Firm's name (or parer's yours if self employed), address, and ZIP + 4 1416 Gillam Way 92-0064623 EIN Use (907) 456-1566 Only Fairbanks, AK 99701 Phone no

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

BAA

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

2009

OMB No 1545 0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

			ORTSMEN'S FO								83248				
Par	t I	Reason for I	Public Charity S	<u>itatus (</u> A	II organization:	s must	comp	<u>lete th</u>	ıs par	t.) See	<u>instru</u>	ctions			
The o	orga		private foundation be		•			•	•						
1	Ц	A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).													
2	Ш	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)													
3	Щ	A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii).													
4		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													
5		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	П		• • •	or govern	nmental unit descri	bed in s e	ection 1	70(b)(1)(Ά)(ν).						
7	X	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	Щ	A community tru	st described in sect i	on 170(b)(1)(A)(vi). (Complet	e Part II)								
9	Ш	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 opera	ited exclus	sively to test for pu	blic safe	ty See	section	509(a)(4	4).					
11		more publicly su	organized and opera pported organizatio be of supporting org	ns describ	ed in section 509(a	a)(1) or s	ection 5	09(a)(2)	tions of . See s	i, or carr ection 5	y out the 09(a)(3) .	e purposes Check the	of one box t	or nat	
		a Type I	b	e II	c Type II	II — Fund	ctionally	ıntegrat	ed		d 🗌	Type III-	Other		
е		By checking this than foundation is 509(a)(2)	box, I certify that th managers and other	e organiza than one	ition is not controlle or more publicly su	ed direct ipported	ly or ind organiz	irectly b ations d	y one o escribe	r more o d in sect	disqualification 509(ed persons a)(1) or sec	s other ction	r	
f		If the organization check this box	n received a written	determina	ation from the IRS	that is a	Туре І,	Type II (or Type	III supp	orting or	ganization,			
g		Since August 17	, 2006, has the orga	nization ad	cepted any gift or	contribu	ition froi	m any o	f the fol	lowing p	ersons?				
		(i) a person w	ho directly or indired governing body of th	tly control	s, either alone or t	ogether	with per	sons de	scribed	ın (ıı) ar	nd (III)	11g (i)	Yes	No	
			ember of a person of		-							11g (ii)			
			rolled entity of a per			0.042						11g (iii)			
h		• •	wing information abo		., .,							119(111)			
<u>''</u>		Name of Supported Organization	(ii) EIN	(iii) (de a	Type of organization escribed on lines 1 9 bove or IRC section see instructions))	(iv) i organizat (i) listed gove	is the ion in col I in your irning ment?	(v) Did y the organ col i your su	nzation in (i) of	(vi) Is the organization in col (i) organized in the U S ?				port	
						Yes	No	Yes	No	Yes	No				
														-	
otal													_		

TANANA VALLEY SPORTSMEN'S FOUNDATION INC 26-1832485 Schedule A (Form 990 or 990-EZ) 2009 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total beginning in) Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.') 670,723 2,650 13,973 687,346. Tax revenues levied for the organization's benefit and either paid to it or expended 0. on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge 0. 0 0 670,723 Total. Add lines 1-through 3 2,650 13,973 687,346. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount 0. shown on line 11, column (f) Public support. Subtract line 5 687,346. from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total beginning in) 0 0 2,650 670,723 13,973 687,346. 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 2 24 37. similar sources 11 Net income from unrelated business activities, whether or not the business is regularly 0. carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 0. Total support. Add lines 7 687,383. through 10 0. 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) ► X organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) 14 % 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 % 16a 33-1/3 support test - 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 33-1/3 support test - 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 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 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 BAA

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

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

Schedule A (Form 990 or 990-EZ) 2009 TANANA VALLEY SPORTSMEN'S FOUNDATION Part III Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you che	cked the box on l	ne 9 of Part I)					
Sec	tion A. Public Support							
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	9 ((f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the 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							
7 a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, 3 received from disqualified persons Amounts included on lines 2							
	and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b							
8	Public support (Subtract line							
	7c from line 6)							
Sec	tion B. Total Support							
Caler	ndar year (or fiscal yr beginning in) 🟲	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6							
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources							
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b Net income from unrelated business activities not included inline 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)							
	Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 is organization, check this box and	s for the organiza	tion's first, second	l, third, fourth, or	fifth tax year as a	section 501	(c)(3)	▶□
	tion C. Computation of Pu							
			 	12 column (6)		T	15	0/
	Public support percentage for 200			13, column (t))		F	15	<u>%</u>
	Public support percentage from 2						16	<u></u> %_
	tion D. Computation of Inv				7		1	
	Investment income percentage fo		* *	•	n (f))		17	<u> </u>
	Investment income percentage fro					L	18	%
	33-1/3 support tests — 2009. If the more than 33-1/3%, check this bo 33-1/3 support tests — 2008. If the	x and stop here.	The organization of	qualifies as a pub	licly supported orq	ganization		▶ [_]
•	33-1/3 SUPPORT TESTS — 2008. If the	e organization did	THOU CHECK S DOX (n line 14 of 19a.	and line to is mor	re man 33-17.	sw. and line	= 10
	is not more than 33-1/3%, check? Private foundation. If the organization	this box and stop	here. The organiz	ation qualifies as	a publicly support	ed organizati	on	•

Schedule A	(Form 990	or 990	EZ) 200	09	TANA	I AN	/ALLE	Y SE	PORTS	SMEN'S	FOU	NDATIO	N INC	26-	183248	5	Page 4
Part IV	Suppler	nental	Infor	matic	on. C	ompl	ete th	nis pa	irt to	provid	e the	explana	itions i	required	d by Par	t II, line	10;
	Part II, I	line 17	a or 1	7b; a	and F	art II	l, line	12.	Provi	de any	othe	r addıtic	nal in	formati	on. See	ınstructı	ons.
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Page 1
TANANA VALLEY SPORTSMEN'S FOUNDATION INC

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103/10

Statement 1 Form 990-EZ, Part I, Line 10 Grants and Similar Amounts Paid

Donee's Name: Donee's Address: TANANA VALLEY SPORTSMEN'S ASSN

PO BOX 70669

FAIRBANKS, AK 99707

RELATED ORG

Relationship of Donee:

Cash Amount Given:

\$

8,468.

Statement 2 Form 990-EZ, Part I, Line 16 Other Expenses

PROPERTY TAXES

\$ 9,982. Total \$ 9,982.

Statement 3 Form 990-EZ, Part II, Line 24 Other Assets

Accounts Receivable

 Beginning
 Ending

 \$ 250.
 \$ 0.

 Total
 \$ 250.
 \$ 0.

Statement 4
Form 990-EZ, Part III
Organization's Primary Exempt Purpose

RAISE AND RECEIVE FUNDS TO SUPPORT TANANA VALLEY SPORTSMEN'S ASSOCIATION (TVSA) FIREARM SHOOTING PROGRAMS, ESPECIALLY YOUTH PROGRAMS, AND TVSA'S SHOOTING FACILITY CONSTRUCTION AND MAINTENANCE.

Statement 5
Form 990-EZ, Part V
Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

No

No