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Short Form

Return of Organization Exempt From Income Tax

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

OMB No 1545-1150

2016

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public.

► Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A For the 2016 calendar year, or tax year beginning		, 2016, and ending		20
B Check if applicable		C Name of organization		D Employer identification number
<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		Nezperce Prairie Grass Growers Association Number and street (or P O box, if mail is not delivered to street address) 55 SW 5th Ave, Suite 100 City or town, state or province, country, and ZIP or foreign postal code Meridian, ID 83642		35-2300331
				E Telephone number (208) 888-0988
G Accounting Method		<input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ►		F Group Exemption Number ►
I Website: ►				H Check ► <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)
J Tax-exempt status (check only one) —		<input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (5) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
K Form of organization		<input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input checked="" type="checkbox"/> Association <input type="checkbox"/> Other		
L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ				► \$ 6426
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)				
Check if the organization used Schedule O to respond to any question in this Part I <input checked="" type="checkbox"/>				
Revenue	1 Contributions, gifts, grants, and similar amounts received			1
	2 Program service revenue including government fees and contracts			2
	3 Membership dues and assessments			3 2,943
	4 Investment income			4 33
	5a Gross amount from sale of assets other than inventory	5a		
	b Less, cost or other basis and sales expenses	5b		
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)			
	6 Gaming and fundraising events			5c
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a		
	b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b 3,450		
	c Less, direct expenses from gaming and fundraising events	6c 1,653		
	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)			6d 1,797
	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)			7c
	8 Other revenue (describe in Schedule O)			8
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	RECEIVED		9 4,773
Expenses	10 Grants and similar amounts paid (list in Schedule O)			10
	11 Benefits paid to or for members			11
	12 Salaries, other compensation, and employee benefits	MAY 30 2017		12 9,650
	13 Professional fees and other payments to independent contractors	DENVER		13
	14 Occupancy, rent, utilities, and maintenance			14 2,883
	15 Printing, publications, postage, and shipping			15 352
	16 Other expenses (describe in Schedule O)			16 7,891
	17 Total expenses. Add lines 10 through 16			17 20,776
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)			18 -16,003
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)			19 72,195
	20 Other changes in net assets or fund balances (explain in Schedule O)			20
	21 Net assets or fund balances at end of year. Combine lines 18 through 20			21 56,192

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V.

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O Yes No
33

34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) Yes No
34

35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? Yes No
35a

b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Yes No
35b

c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III Yes No
35c

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 Yes No
36

37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► **37a** Yes No
37a

b Did the organization file Form 1120-POL for this year? Yes No
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 tax year covered by this return? Yes No
38a

b If "Yes," complete Schedule L, Part II and enter the total amount involved Yes No
38b

39 Section 501(c)(7) organizations. Enter. Yes No
39a

a Initiation fees and capital contributions included on line 9 Yes No
39b

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ► **40a**, section 4912 ► **40b**; section 4955 ► **40c** Yes No
40a

b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Yes No
40b

c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 Yes No
40c

d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization Yes No
40d

e 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 Yes No
40e

41 List the states with which a copy of this return is filed ► Yes No

42a The organization's books are in care of ► Nezperce Prairie Grass Growers Association Telephone no. ► **208-888-0988**
 Located at ► 55 SW 5th Ave, Suite 100, Meridian, ID ZIP + 4 ► **83642** Yes No
42a

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ► Yes No
 See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Yes No
42b

c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ► Yes No
42c

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► **43** Yes No

44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ Yes No
44a

b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ Yes No
44b

c Did the organization receive any payments for indoor tanning services during the year? Yes No
44c

d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O Yes No
44d

45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? Yes No
45a

b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions) Yes No
45b

46✓ Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI.

		Yes	No
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	47	
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
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?	49b	
50	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."		

f Total number of other employees paid over \$100,000

51 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 business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A.

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	 Signature of officer	Date
	Benjamin Kelly, Executive Director	5/10/17
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ►			Firm's EIN ►	
	Firm's address ►			Phone no. _____	

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

Form 990-EZ (2016)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

**Open to Public.
Inspection**

Name of the organization

Nezperce Prairie Grass Growers Association

Employer identification number

35-2300331

Form 990-EZ, Part 1, Line 16, Other expenses

Affiliate Memberships \$806

ANRI-PAC \$1000

Computer Service \$43

Director Expenses \$716

Industry Relations \$4283

Legislative Expense \$553

Office Supplies \$38

Storage \$89

Telephone \$148

Web Page \$215

Total Other Expenses \$7891