

Part II Balance Sheets (see the instructions for Part II)Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	122,974	22 124,399
23 Land and buildings		23
24 Other assets (describe in Schedule O)	2,925	24 1,702
25 Total assets	125,899	25 126,101
26 Total liabilities (describe in Schedule O)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	125,899	27 126,101

Part III Statement of Program Service Accomplishments (see the instructions for Part III)Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose?

Promote and Educate the Public on Purebred Dogs

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28

See Additional Data Table

(Grants \$)

If this amount includes foreign grants, check here ▶

28a

29 See Additional Data Table

29a

(Grants \$)

If this amount includes foreign grants, check here ▶ 30 See Additional Data Table

30a

(Grants \$)

If this amount includes foreign grants, check here ▶

31 Other program services (describe in Schedule O)

(Grants \$)

If this amount includes foreign grants, check here ▶

31a

32 Total program service expenses (add lines 28a through 31a)

32

68,561

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
KIMBRA WOOD Vice President	2 00	0		
NELDA REED Secretary	10 00	0		
FRANCIS KEAYS Director	2 00	0		
DONNA COOKNELL Director	2 00	0		
TERI BUCH Director	2 00	0		
KAREN TILBURY Director	2 00	0		
BRADY TURNER Director	2 00	0		
ROBYN FOUST President	5 00	0		
VICTORIA RUNNOE Director	2 00	0		
SARAH NOTT Treasurer	10 00	0		

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 **33** Yes **33** No

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) **34** Yes **34** No

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)? **35a** Yes **35a** No

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 **35b** Yes **35b** No

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 **35c** Yes **35c** No

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** Yes **36** No

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

b Did the organization file **Form 1120-POL** for this year? **37b** Yes **37b** No

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? **38a** Yes **38a** No

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

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

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

b Gross receipts, included on line 9, for public use of club facilities **40a** **40a** Yes **40a** No

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

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 **40c** **40c** Yes **40c** No

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 ► **40d** **40d** Yes **40d** No

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

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 **41** **41** Yes **41** No

List the states with which a copy of this return is filed ► **42a** The organization's books are in care of ► **SARAH NOTT** Telephone no ► **(208) 724-3026** **42a** Yes **42a** No

Located at ► **5221 NORTH SORRENTO DRIVE BOISE, ID** ZIP + 4 ► **83704** **42b** **42b** Yes **42b** No

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)? **42c** **42c** Yes **42c** No

If "Yes," enter the name of the foreign country ► **43** **43** Yes **43** No

See the instructions for exceptions and filing requirements for **FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)** **44a** **44a** Yes **44a** No

c At any time during the calendar year, did the organization maintain an office outside the U.S.? **44b** **44b** Yes **44b** No

If "Yes," enter the name of the foreign country ► **44c** **44c** Yes **44c** No

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** - Check here **43** **43** Yes **43** No

and enter the amount of tax-exempt interest received or accrued during the tax year ► **44d** **44d** Yes **44d** 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 **45a** **45a** Yes **45a** No

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 **45b** **45b** Yes **45b** No

c Did the organization receive any payments for indoor tanning services during the year? **45c** **45c** Yes **45c** No

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 **45d** **45d** Yes **45d** No

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

45b 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) **45f** **45f** Yes **45f** No

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	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	46		No

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

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	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	47		
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	48		
49a Did the organization make any transfers to an exempt non-charitable related organization?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	49a		
b If "Yes," was the related organization a section 527 organization?	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	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"			

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
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
NONE		

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 ► Yes No

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	*****	2018-10-17
	Signature of officer	Date
SARAH NOTT Treasurer		
Type or print name and title		

Paid Preparer Use Only	Print/Type preparer's name ALLAN R BOSCH	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00258680
	Firm's name ► CAPITOL LAW GROUP PLLC			Firm's EIN ► 26-0835148	
	Firm's address ► 205 N 10TH ST 4TH FL BOISE, ID 837025773			Phone no (208) 424-8872	

May the IRS discuss this return with the preparer shown above? See instructions ► Yes No

Additional Data

Software ID: 17005038
Software Version: 2017v2.2
EIN: 82-0325873
Name: Idaho Capital City Kennel Club Inc

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.		Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations; optional for others.)
28 Dog shows and trials- American Kennel Club sanctioned all breed shows are held each October in Boise, Idaho in conjunction with Obedience, Rally, and Agility trials. Throughout the year Obedience, Rally, and Agility trials are held. At the events, about exhibitors enter their dog(s) in the four venues each day and complete conformation, obedience, Rally, or agility titles. Junior Showmanship classes provide youth ages 10 to 18 a place to learn about becoming better dog show handlers. Youth are encouraged to participate in the companion events of obedience, rally, and agility through the AKC Junior program. Spectators attend each day's events. People who attend and exhibit at these events learn that not all AKC dogs are breeding quality. Each dog is judged according to a strict breed standard which maintains the purpose and appearance specific to that particular breed. People also realize that trained dogs make better pets. The dogs are socialized, non-aggressive, and actually enjoy going to dog shows and trials with their handlers and owners. These dogs can be taken anywhere and have impeccable manners. Another obvious learning experience for many is to see exactly how important, exercise, and grooming is for the health of every dog, not just those at the shows and trials. In view of the pet over-population problem in the United States, it must be noted that a person will leave these events realizing there is a lot more to breeding dogs than just putting a male and female together. A responsible educated owner breeds infrequently and only to improve the breed. It is made very clear that spayed and neutered dogs make the best pets, and even AKC champions are spayed and neutered when placed or kept as pets. Idaho Capital City Kennel Club (ICCKC) provides an information and education table and provides free of charge brochures on a myriad of dog-related subjects and activities. ICCKC provides concession space for the local humane society and rescue groups to display photos of dogs which have ended up at the shelter, and especially of their purebreds and mixed breeds which have been adopted and become competitors in AKC events through either the AKC Purebred Alternative Listing or Canine Partners programs.	28a	

Form 990EZ, Part III - Statement of Program Service Accomplishments

<p>Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.</p>	<p>Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)</p>
<p>30 Donations - Every year the Idaho Capital City Kennel Club donates money to an assortment of associations and societies that promote dogs and responsible dog ownership (Grants \$ 1,997)</p> <p>If this amount includes foreign grants, check here . . . ► <input type="checkbox"/></p>	<p>30a</p>

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

~~Internal Revenue Service~~

Name of the organization

Idaho Capital City Kennel Club Inc

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

2017**Open to Public
Inspection****Employer identification number**

82-0325873

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 1009	Depreciation \$1223

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 1	SHOWS \$36881

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 2	AGILITY TRIAL SPRING \$7971

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 3	AGILITY TRIAL SUMMER \$6164

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 4	AGILITY TRIAL FALL \$4452

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 5	EQUIPMENT \$4238

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 6	OBEDIENCE NOV \$3720

990 Schedule O, Supplemental Information

Return Reference		Explanation
Other Expenses 7	OBEDIENCE MARCH \$3490	

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 8	SEMINAR - AG \$3307

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 9	TRACKING \$1829

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 10	TAX PREP \$1235

990 Schedule O, Supplemental Information

Return Reference		Explanation
Other Expenses 11	Membership Meetings \$1202	

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 12	EQUIPMENT - AG \$1188

990 Schedule O, Supplemental Information

Return Reference		Explanation
Other Expenses 13	MEMBERSHIP AWARDS \$1110	

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 14	SCENTWORK \$1096

990 Schedule O, Supplemental Information

Return Reference		Explanation
Other Expenses 15	EQUIPMENT RENTAL \$1053	

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 16	SCHOLARSHIP \$1000

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 17	JR \$1000

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 18	INSURANCE \$887

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 19	CLASSES \$822

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 20	MATCH SPRING \$804

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 21	EDUCATION PROMOTION \$493

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 22	EDUCATION \$479

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 23	MEMBERSHIP HOSPITALITY \$312

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 24	LIBRARY \$281

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 25	TREASURER \$114

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 26	SECRETARY \$79

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 27	PRESIDENT EXPENSE \$75

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 28	CGC \$30

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 29	BANK CHARGES (NET) \$26

990 Schedule O, Supplemental Information

Return Reference		Explanation
Other Expenses 30	AKC DELEGATE & DUES \$25	

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 31	MEMBERSHIP MISC \$24

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Expenses 32	LESS FEES REPORTED ON LINE 13 \$-10200

990 Schedule O, Supplemental Information

Return Reference	Explanation
Other Assets 1003	Machinery and Equipment - Beginning \$2925 Machinery and Equipment - Ending \$1702