Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0047 2018

Department of the Treasury

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A	For the		I dar year ar tay year beginning	2010	, and endi	na		, 20
<u>~</u>			O Name of organization				D Employ	er identification number
В	Check if a		C Name of organization VIKING	B00578R	<u> </u>	<u>ح</u>		2-6008957
ᆜ	Address c	~	Doing business as		Dec	to		
닏	Name cha	•	Number and street (or PO box if mail is not de 5530 N学 45 51		Room/s	uite		8-667-4507
닏	Initial retui						1	
닏		/terminated	City or town, state or province, country, and ZI		-		1	eceipts \$ 331,802.6
\sqcup	Amended	return	COBUR D'ALENE	120 83815			G Gross re	eceipts \$ 77 1,000,0
Ш	Applicatio	n pending	F Name and address of principal officer					subordinates? Yes No
					- ^			s included? Yes No
<u></u>	Tax-exem	pt status	□ 501(c)(3) 🛮 501(c)(3) 🔻	(insert no) 4947(a)(1) or	r ∐ 527)	/ 		a list (see instructions)
<u>J</u>	Website:						up exemption	
				ther LY	ear of form	ation 197	4 M State	of legal domicile ZD
Р	art I	Summ	ary					
	1 E	Briefly de	scribe the organization's mission or m	ost significant activitie	es: 001	R (1) 15	5510N) is socar
ခ်	l <u>.</u>	70	SUPPORT COEUR	D'ALBUE !	4/64	SCHOOL	<u> 58</u>	ORTING AND
Governance	<u> </u>	BX.	IRA CURRICULAR	A-CTIVIT	185			
éri	2 (Check th	s box ▶☐ if the organization discontin	nued its operations or	disposed	of more th	an 25% of	its net assets.
Ĝ	3 1	Number (of voting members of the governing bo	dy (Part VI, line 1a) .			. 3	4
	4 1	Number (of independent voting members of the	governing body (Part \	VI, line 1b)	. 4	4
ies	5	Total nur	ber of individuals employed in calenda	ar year 2018 (Part V, III	ne 2a)		. 5	6
Activities &	6 7	Total nur	ber of volunteers (estimate if necessa	ry)			. 6	50
Ą	7a 7	Total unr	elated business revenue from Part VIII,	potenim (C), line 12	<u> </u>		. 7a	9
			ated business taxable income from Eo	47 99 627 HNE 38 U			. 7b	0
			8))))	Prior	Year	Current Year
4	8	Contribut	ions and grants (Part VIII, line 1h)	MAY 1 7 2019 .	Ö.	15. 45	2.30	14.815.65
ž			service revenue (Part VIII, line 2g).		HAS.			~~
Revenue					=	_		
č	11 (Other rev	nt income (Part VIII, column (A), lines 3 enue (Part VIII, column (A), lines 66d	SCHOOL PARTY (P)	╝.	56,59	1.60	257,681,34
			nue-add lines 8 through 11 (must equ		line 12)	72,0	43.30	272,496.99
_			d similar amounts paid (Part IX, colum				0.10	245,648.41
	1		paid to or for members (Part IX, column			_		_
	45 6		other compensation, employee benefits (s 5–10)	18,89	7.50	6,192.50
Expenses	16a F		nal fundraising fees (Part IX, column (A			1010.		
ě	b 1		Iraising expenses (Part IX, column (D),					
Ä	17 (penses (Part IX, column (A), lines 11a-				2.81	1,938,02
			enses. Add lines 13–17 (must equal Pa		 25)	57.85		7.53,778,93
		-	less expenses. Subtract line 18 from li		20) .	14,19		18,718.06
		nevenue	less expenses. Subtract line to from it	<u> </u>	<u> </u>	Beginning of		End of Year
is o	20	Total aca	ets (Part Y line 16)				95,89	53,813.95
Net Assets or	20 21		ets (Part X, line 16) lities (Part X, line 26)			-	.710	
tet/	22		s or fund balances. Subtract line 21 fr			35.09	< 2C	53.813.95
			ure Block	JIII III 16 20	<u> </u>	17.0	7.8	55,813. 12
	art II					lamanta and t	o the best of	my knowledge and heliof it is
Ur	nder penalti ie correct.	ties of perju	y, I declare that I have examined this return, incliete Declaration of preparer (other than officer) is	uding accompanying scriedu based on all information of w	yhich prepar	er has any kno	wledge	my knowledge and beller, it is
_	T	L Comp	, , , , , , , , , , , , , , , , , , , ,		<u> </u>			
e:	- I	Suga	iture of officer		-		Date	
Sig	-	y Sign	nure of officer Right A. P.				S~	-1Z~19
пе	ere	_	1900 Fair	0	70	24500		
		<u>, , , , , , , , , , , , , , , , , , , </u>		RASMUSSON		BASUR C	<u> </u>	PTIN
Pa	aid	Print/Ty	pe preparer's name Preparer's	s signature	'	Jaic	Check	<u> </u>
	eparer	r		 	<u></u>		self-em	pioyea
	se Only	1	ame ►			F	irm's EIN ▶	
		Firm's a	ddress ►			F	hone no	
Ma	y the IR	S discus	this return with the preparer shown a	bove? (see instruction	s) . <u>.</u>	<u></u>	<u> </u>	Yes No
For	r Panerw	ork Redu	tion Act Notice, see the separate instru	ctions.	Cat	No 11282Y		Form 990 (2018)

Part	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	<u> </u>
	Briefly describe the organization's mission: () UR MISSIAN IS SOLECY TO SUPPORT CHS SPORTING AND DXIRA CURRICULAR ACTIVITES	
	SPORTING AND OXIVA CURRICULAR ACTIVITOS	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	40
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program	
•	services?	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth the total expenses, and revenue, if any, for each program service reported.	ers,
4a	(Code) (Expenses \$ including grants of \$) (Revenue \$)	
	•	
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)	
	·	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
		 -
4d	Other program services (Describe in Schedule O.)	
4-	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶	

Form 99	0 (2018)		ſ	Page 3
Part				
	•		Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	×	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		۸
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		\langle
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		×
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	-	Ĭ	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Χ
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		X
L	Man the assessment is included in concelled and independent audited financial statements for the tay year? If	I		٠. <i>-</i>

			\longrightarrow
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	-	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	<i>X</i>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	*
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b	Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	X
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X

Part	Checklist of Required Schedules (continued)			
	1		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		4
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c 24d		X
d		24U		-
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		入
b	Is the organization 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	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		*
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		\langle
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		×
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		λ
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		$-\gamma$
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		χ
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		ャ
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		_×_
b	If "Yes" to line 35a, 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," complete Schedule R, Part V, line 2	35b		×
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38		K.
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			凶
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 7			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	reportable gaming (gambling) winnings to prize winners?	1c	X	
		Forr	n 990	(2018)

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2		<u>;</u>	- 4
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			. ;
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X'
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		1
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			<u> </u>
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×
b	If "Yes," enter the name of the foreign country: ▶		٠.,	ا د. ``
~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			[]
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		X
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			١,
Ųů.	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			1
	gifts were not tax deductible?	6b		X
7	Organizations that may receive deductible contributions under section 170(c).			003
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	12		767
a	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		X
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			' \
•	required to file Form 8282?	7c		$ \lambda $
d	If "Yes," indicate the number of Forms 8282 filed during the year			•
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		×
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		R
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	. ,	٠. ش	, in
•	sponsoring organization have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		λ
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:	_	ंद्र	
а	Initiation fees and capital contributions included on Part VIII, line 12	ر در 1	٠, '	. ~]
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	* (3.5)		
11	Section 501(c)(12) organizations. Enter:] .		3
а	Gross income from members or shareholders	, ",	3. 3	. 4
b	Gross income from other sources (Do not net amounts due or paid to other sources	gr!	7 2 14	47 2
	against amounts due or received from them.)	9.4.		الم الم
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		X
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		,	33.51
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	. **	. :	., .,
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		X
	Note. See the instructions for additional information the organization must report on Schedule O.	* **	آء	- 1
b	Enter the amount of reserves the organization is required to maintain by the states in which	1 to 1	3	المسيد ،
	the organization is licensed to issue qualified health plans	2	Ŷ	
C	Enter the amount of reserves on hand	40 3	• . 2	1,1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		X
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Į Ϋ́
	If "Yes," see instructions and file Form 4720, Schedule N.	4 44	3 '5	لختا
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, Schedule O.	12		14.74
		Forr	n 99 0	(2018)

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b be	low. and	for a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule			
	Check if Schedule O contains a response or note to any line in this Part VI			. 🗆
Secti	ion A. Governing Body and Management			
	5		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	-	1	2,4
	If there are material differences in voting rights among members of the governing body, or		1 82	£ 2.
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	·	ابي الثير	و وقد ا
	Γ	٠.,		1.5
b	Enter the number of voting members included in line 1a, above, who are independent . 1b		1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship wany other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the directions of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the control over management duties customarily performed by or under the control over management duties and the control over management duties customarily performed by or under the control over management duties and the control over management duties are control over management duties.			X
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	 	<u> </u>
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	5	 	X
6	Did the organization become aware during the year of a significant diversion of the organization is assets? . Did the organization have members or stockholders?	6		 X'
7a	Did the organization have members of stockholders, or other persons who had the power to elect or appo			 ×
	one or more members of the governing body?	7a	ļ	X
b	Are any governance decisions of the organization reserved to (or subject to approval by) member			1
0	stockholders, or persons other than the governing body?	7b	+	1 1
— o—	the year by the following:	ng – : []		32.52
а	The governing body?	8a	-	X
b	Each committee with authority to act on behalf of the governing body?	<u> </u>	†	1
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	at		
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Re	venue C	ode.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	 	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapte affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			X
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form	m? 11a	<u> </u>	X
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	. 3.	<u> :</u>	أرتن
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		ĮŽ.
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflict		<u> </u>	14
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes			\ \r
10	describe in Schedule O how this was done			 } -
13 14	Did the organization have a written whistleblower policy?			<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval	L	, to	71
10	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		1 6 77	1 2
а	The organization's CEO, Executive Director, or top management official			18
b	Other officers or key employees of the organization	_		Ϋ́
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	F 3	, t ₃₃ (° .	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	146	2.75	147
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		1-32	13, 1
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard t		~ 4 12	64.6
	organization's exempt status with respect to such arrangements?	16b		<u> </u>
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 9 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O)	30-T (Sed	ction (501(c)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict o financial statements available to the public during the tax year.	f interest	policy	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and CL RASMUSEN SSON HEST CON 120 83815	d records	•	

		7
-	age	•

Form 990 (2018)

Form 990 (2018)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers, key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

				(0	C)					
(A)	(B)	Position				(D)	(E)	(F)		
Name and Title	Average	(do not check more than one box, unless person is both an				Reportable	- Reportable -	Estimated -		
	hours per	officer and a director/trustee				compensation	compensation from	amount of		
	week (list any	2 5	5	0	ᄌ	ØΞ	Ţ	from	related	other
	hours for related	, div	stat	Officer	ey e	향호	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	ect	ㅎ	4	ďμέ	yst c	er	(W-2/1099-MISC)	(organization
	below dotted	Individual trustee or director	Institutional trustee		Key employee	"ÿ				and related
	line)	ste	Trus		ě	pen				organizations
		Ö	tee			Highest compensated employee				
						ä				
0,1,50,100	11.0								_	
(1) ALISAWARD	46			X				2105.00	 	σ×
PROSIDENT				\ 	<u> </u>			2/07.00		<u> </u>
(2) RICK SPARKS								Ð		Ð
(1) A LISA WARD PRESIDENT (2) RICK SPARKS WILE PRESIDENT (3) ANN WILKEY SECRETRAN (4) RICK RASMUSEN TREASURER				χ.]			0	.⊕	-0
(3) ANN WILKEY	8			J				LIKOCA		Ð
SECRETRAN				X				488750	Θ	0
(4) RICK RASMUSEAN	1			. /				_	V	\$
TREASURER				X				O	6	-6
	-							-		
(9)	†									
(6)										
<u></u>	†									
(7)	 					<u> </u>				
	†]		
(8)					\vdash		-	-		
(0)	 	1								
(0)			\vdash		-	 	┝一			
(9)										
(40)	-	ļ —	\vdash		_		┢─			
(10)										
7.0		-	 		-	-	├─			
(11)		ł	1							
		 	\vdash	<u> </u>	-				-	
(12)										
	ļ		<u> </u>	_	-	-	_	ļ		
(13)		ł								
	ļ	ļ	_	<u> </u>	<u> </u>	⊢ –	<u> </u>			
(14)										
<u></u>	1								L	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)																
	1				•	C)										
	(A)	(B)	(do n	ot ch		ition more	than o	one	(D)	(E)		(F)				
	Name and title	Average	òοx,	box, unless person is both				n an	Reportable	Reportabl		Estimated				
		nours per week (list any			officer and a director/trustee			eek (list anv l				·	compensation from	compensation related	Irom	amount of other
		hours for	or d	Insti	Officer	Key employee	뺣	Former	the	organizatio		compensation				
		related organizations	rect	tutio	Ĕ	emp	est o	ĕ	organization (W-2/1099-MISC)	(W-2/1099-M	130)	from the organization				
		below dotted	입 하는	nal		οğ	e on					and related				
		line)	Individual trustee or director	Institutional trustee		ď	pens					organizations				
			"	ee			Highest compensated employee									
(15)			-	\vdash	\vdash	\vdash			Ì							
1.197			ĺ													
(16)																
32.27		†														
(17)																
																
(18)																
(19)																
(20)		ļ									İ					
(21)		ļ						İ	i							
						<u> </u>		├								
(22)		ļ														
(00)				\vdash	-	<u> </u>		_								
(23)									į							
(O.4)				_	├	_		⊢			-					
(24)		 			İ											
(25)				\vdash	┢┈			\vdash	 		<u> </u>					
(23)		 									ļ					
1b	Sub-total				_			<u> </u>	6192,50							
c	Total from continuation sheets to Part							•	<u> </u>							
d	Total (add lines 1b and 1c)							•	619250							
2	Total number of individuals (including but							e) w		ore than \$10	00,000	of				
	reportable compensation from the organi							•								
												Yes No				
3	Did the organization list any former of	ficer, direc	tor, c	or tr	uste	ee,	key e	emp	oloyee, or high	est compe	nsated					
	employee on line 1a? If "Yes," complete	Schedule J	for s	uch	ındı	ıvıdı	ual					3 ^				
4	For any individual listed on line 1a, is the	sum of re	portal	ble d	com	npei	nsatio	n a	nd other comp	ensation fro	om the					
	organization and related organizations	greater the	an \$1	150,	000	? /:	f "Ye	s, "	complete Sch	nedule J foi	r such					
	ındıvıdual											4 X				
5	Did any person listed on line 1a receive of	or accrue co	ompe	nsat	tion	fro	m any	un un	related organiz	zation or ind	ividual					
	for services rendered to the organization	? If "Yes," c	ompi	ete	Scr	nedu	ıle J f	or s	such person	<u> </u>	· ·	5 /				
Section	on B. Independent Contractors															
1	Complete this table for your five highest	compensat	ed ind	depe	end	ent	contr	act	ors that receive	ed more tha	n \$100),000 of				
	compensation from the organization. Rep	ort compe	nsatio	on fo	or th	ne c	alend	lar y	ear ending wit	th or within t	he org	anization's tax				
	year.							$\overline{}$				(0)				
	(A) Name and business add	Iress							(B) Description of s	ervices		(C) Compensation				
								-	· · · · · · · · · · · · · · · · · · ·			<u> </u>				
								-	R/							
								1-	-11	· ·						
								+-								
								Т								
2	Total number of independent contractor	ors (includir	na hi	ıt n	ot I	limıt	ed to	th	ose listed abo	ove) who	1.	a garage				
_	received more than \$100,000 of compens									-,		1 2 2 3				

Form **990** (2018)

Part	VIII	Statement of Revenue				
		Check if Schedule O contains a response or note to				
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns 1a Membership dues 1b / 4,8/5.65 Fundraising events 1c Related organizations 1d Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above 1f				
Contril and O	g h	Noncash contributions included in lines 1a–1f \$ Total. Add lines 1a–1f	14815.65			
Program Service Revenue	2a b c	Business Code				
ogram Servi	d e f	All other program service revenue .		N/C	NA	N/Q
	g 3	Total. Add lines 2a–2f ▶ Investment income (including dividends, interest,	0			
	4 5	and other similar amounts) ▶ Income from investment of tax-exempt bond proceeds ▶ Royalties ▶	9			
	6a b c d	Gross rents	Q			
	7a	Gross amount from sales of assets other than inventory (i) Securities (ii) Other				
	b c d	Less: cost or other basis and sales expenses . Gain or (loss)	₽			
evenue	8a	Gross income from fundraising events (not including \$				
Other Revenue		of contributions reported on line 1c). See Part IV, line 18 a Less: direct expenses b (29,447,347)				
	9a	Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV, line 19	261,206.39			
	С	Less: direct expenses b Net income or (loss) from gaming activities ▶ Gross sales of inventory, less returns and allowances a ∠6, ∠8, 3, ∠4	6	:		
	,	Less: cost of goods sold b 29 8661297 Net income or (loss) from sales of inventory ▶ Miscellaneous Revenue Business Code	<i>(24,</i> 25,05)			
	11a b c d	All other revenue				
	e 12	Total. Add lines 11a-11d	17,406,90			

Form **990** (2018)

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con				olumn (A).
	Check if Schedule O contains a respon				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	245,698,41		-	
2	Grants and other assistance to domestic individuals. See Part IV, line 22				0.19
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees			•	3
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	6,192.50			
7 8	Other salaries and wages	7			
9	Other employee benefits	<i>,</i> –			
10	Payroll taxes	_			
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying			• 7	
е	Professional fundraising services. See Part IV, line 17			, , ,	
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	1,938,02			
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	_			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance				ونتال بالمائدة المائدة
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If		· u		
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	* ** *	and the state of t		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a					
b					
C			·	 	
d		-		 	
е	All other expenses	2 57 100 57			
25	Total functional expenses. Add lines 1 through 24e	253,778,93			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2018) Page 11 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 53,813.99 35,095.89 1 2 2 3 3 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Assets 7 8 8 9 Prepaid expenses and deferred charges . . . 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10c 10b Less: accumulated depreciation 11 11 Investments—publicly traded securities ------12 Investments—other securities. See Part IV, line 11 12 Investments—program-related. See Part IV, line 11 13 13 14 14 15 15 39,095,89 16 53.813,95 16 **Total assets.** Add lines 1 through 15 (must equal line 34) 17 17 18 18 19 19 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons, Complete Part II of Schedule L. 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here > and or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds .

32

33

32

33

Form **990** (2018)

Pari	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	272	496	<u>.99</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	253,	778	.93
3	Revenue less expenses. Subtract line 2 from line 1	3		718	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	35,0	<u> 995.</u>	89
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line		12	م 12	9
	33, column (B))	10	53,	812	·, .
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	• • •			· <u> </u>
	Assessed to see the discould be assessed that Faure 2000, T. Carella, T. Assessed, T. Othory		4:564	Yes	No No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		-		¥ 8
	If the organization changed its method of accounting from a prior year or checked "Other," exp Schedule O.	olalli i	"	TO S	
0-			2383 2a	1 100 100 E	- The state of the
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		22.4.0	1 13.57:30	AN SAN AN
	If "Yes," check a box below to indicate whether the financial statements for the year were computer and on a separate basis, consolidated basis, or both:	nieu c	"		
********	Separate basis Consolidated basis Both consolidated and separate basis			1	3.5
h	Were the organization's financial statements audited by an independent accountant?		. 2b	100000	×
	If "Yes," check a box below to indicate whether the financial statements for the year were audite			E identical	1,45,5384
	separate basis, consolidated basis, or both:	u 011			33
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov	ersiał	nt l	-	<i>y</i>
•	of the audit, review, or compilation of its financial statements and selection of an independent account				A
	If the organization changed either its oversight process or selection process during the tax year, ex			· 数对	1017
	Schedule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	n		X
	the Single Audit Act and OMB Circular A-133?		. <u>3a</u>		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo th			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	ıdıts.	3b	_1	LX_
	•		Fo	rm 99 0	(2018)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047 2018

Open to Public

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

Name	of the organization	00578R	CLUB		Employer identification 82 ~ 600	n number 0 8957
Pa	t Reason for Public	c Charity Status (A	II organizations must	complete this p	art.) See instruction	ons.
The 6 1 2 3 4	organization is not a private A church, convention of A school described in s A hospital or a cooperat A medical research organisms, city, ar	f churches, or associa ection 170(b)(1)(A)(ii) tive hospital service o anization operated in	ition of churches descr i. (Attach Schedule E (F rganization described i	bed in section 17 form 990 or 990-E in section 170(b) (1	70(b)(1)(A)(i). Z).) 1)(A)(iii).	(iii). Enter the
5	An organization operate section 170(b)(1)(A)(iv)		a college or university	owned or operate	ed by a government	tal unit described in
6 7	☐ A federal, state, or local ☐ An organization that no described in section 17	ormally receives a sub 70(b)(1)(A)(vi). (Compl	estantial part of its sup ete Part II.)	port from a gover		n the general public
8 9	☐ A community trust desc ☐ An agricultural research or university or a non-la university:	organization describe	ed in section 170(b)(1)	(A)(ix) operated in		
10	An organization that noi receipts from activities i support from gross inveacquired by the organiz	related to its exempt to estment income and u eation after June 30, 1	functions—subject to c inrelated business taxa 975. See section 509(a	ertain exceptions, ble income (less s a)(2). (Complete Pa	and (2) no more tha ection 511 tax) from art III.)	n 33¹/₃% of its
11 12	☐ An organization organized ☐ An organization organized of one or more publicly Check the box in lines 1	ed and operated exclusion expenses exclusion and operated exclusions.	usively for the benefit o ions described in sect i	f, to perform the form the form 509(a)(1) or se	unctions of, or to car ection 509(a)(2). Sec	e section 509(a)(3).
а	the supported organ supporting organiza	nization(s) the power t tion. You must comp	ed, supervised, or contr o regularly appoint or e plete Part IV, Sections	elect a majority of t	the directors or trust	ees of the
b	control or managem organization(s). You	nent of the supporting imust complete Part	rised or controlled in co organization vested in t IV, Sections A and C orting organization opei	the same persons	that control or man	age the supported
	its supported organi	ization(s) (see instruct	ions). You must comp	lete Part IV, Sect	ions A, D, and E.	
d	that is not functiona	lly integrated. The org	panization generally mu complete Part IV, Sec	st satisfy a distribi	ution requirement an	
е	functionally integrate	ed, or Type III non-fur	d a written determination actionally integrated sup			e II, Type III
f g	Enter the number of supp Provide the following info					
	(i) Name of supported organization		(III) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
		,	1	Yes No		
(A)	COEUR D'ALGNE SC	MGH N/A	(SCH60) 2	×		245,648.0
(B)						
(C)						
(D)						
(E)						
Tota	1			سنية أحسرا		24564841

			4
F	ar.	10	ž
•	4.		

Part							•
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)							
Socti	on A. Public Support	quality unde	er the tests iis	stea below, p	lease comple	ete Part III.)	
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and	(a) 2014	(b) 2013	(6) 2010	(u) 2017	(e) 2010	/ (i) Total
•	membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3			Y 			
5	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 shown on line 11, column (f)						
. 6	Public support. Subtract line 5 from line 4						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(ć) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4			/			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources			,			
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10	1					
12	Gross receipts from related activities, etc.					12	0
13	First five years. If the Form 990 is for the	ne organization					
	organization, check this box and stop he	"		<u> </u>	<u> </u>	<u> </u>	► □
	on C. Computation of Public Suppor			41: (6)			£)
14	Public support percentage for 2018 (line 6) Public support percentage from 201/2 Sch		-			15	** %
15 16a							
	331/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
b							
17a	a 10%-facts-and-circumstances test—2018. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						
b							
18	Private foundation. If the organization di instructions						
					Sch	nedule A (Form 996	or 990-EZ) 2018

ح

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.) If the organization fails to qualify under the tests listed below, please complete Part II.)

Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any 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	; 174,767.13
received. (Do not include any "unusual grants") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any 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	9 89, 423.79
Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose. Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the	
Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the	62 10 35, 790,9
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	bt 10 35, 790,9
furnished by a governmental unit to the	b 2 10 35, 790,9
organization without charge	<u>62 10 35, 790 ,</u> 9
6 Total. Add lines 1 through 5 ZPS, 497.99 IST, 331, 607, 407.94.11 331, 807, 78 Amounts included on lines 1, 2, and 3 received from disqualified persons .	
— b —Amounts- included—on -lines—2- and 3————————————————————————————————————	
c Add lines 7a and 7b	926,955.2
Section B. Total Support	
Calendar year (or fiscal year beginning in) ► (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018	(f) Total
9 Amounts from line 6	62 1035796,97
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	. *
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	
c Add lines 10a and 10b	8
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 VI.)	
13 Total support. (Add lines 9, 10c, 11, and 12.)	
First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a second organization, check this box and stop here	
Section C. Computation of Public Support Percentage	
15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	100.0 %
16 Public support percentage from 2017 Schedule A, Part III, line 15	100.0 %
Section D. Computation of Investment Income Percentage	
17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 17	<u> </u>
18 Investment income percentage from 2017 Schedule A, Part III, line 17	81 _m % and line
19a 331/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	zation . ► 🄼
and at the second secon	
line 18 is not more than 33½, check this box and stop here. The organization qualifies as a publicly supported organization	
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see ins	

Part IV **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section	A. All	Suppo	rtina O	rganizations

- Are all of the organization's supported organizations listed by name in the organization's governir documents? If "No," describe in Part VI how the supported organizations are designated. If designated be class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of statu under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supporte organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answ. (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) are satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(l purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? "Yes." and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization use to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(l purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and El numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the actio was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class alread designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefite by one or more of its supported organizations, or (iii) other supporting organizations that also support benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contribute (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entiwith regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 3 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations describe in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefrom, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, determine whether the organization had excess business holdings.)

		Yes	No
ng by	, 4,	a ¹	78
,	1		- - - - -
us	٠, ١	4.1	
ed	, ,	2 - 3 2 -	9
-	2		7 2
er	1.12		
	За		X
nd		*	1.52
he	<u></u>	15,4	لبُ
B)	3b		
D)			~~~~
If	30	4	2 1
	4a		~~~~
an l	** 5	6	20 1
gn on .	4	1,3	
-	4b		X
on	3 1 1 45 4 T		2,5
ed	707		2.07
ed B)	1	1 360	1 V
	4c	<u>¥</u>	
s, <i>"</i>	- (7	-41 L	
N	-,	e. 1	
		-	
n; on		نوی د	1
,,,	5a		-
dy	Ja ≥	<u> </u>	المراجعة
_,	5b	*	Χ/
	5c		X
to	'n.	4	
ed	r,	i i	
or	1 3	. 194	1
٠.	6	<u> </u>	\sim
or	- 10	. 44.	62
ity		<u>د کې د</u>	. 63
,	7		-X'
7?		2.23	
	8		X
re	اليم		
ed	· (4	***	
	9a	1.2	
ch	1	1 65 I	التعتا
£:1	96	1 / 1 .	X
efit		 -	تبنا
on	30), s ²	X 1
ed	چ ح ب	F	
	10a	-	Ŋ
to	1	اء خوز	
	10b		<u> </u>
orm	990 ог	990-E	Z) 2018

_				
Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	٥,	÷ ,	3
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			لن
L	below, the governing body of a supported organization?	11a 11b		-
	A family member of a person described in (a) above? A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		\
	on B. Type I Supporting Organizations	110		
Jecu	on b. Type i Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		100	
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	Ĭ .	•	15
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		, ,	2m 3
	controlled the organization's activities. If the organization had more than one supported organization,		, .	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			لنــــا
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		X
2	Did the organization operate for the benefit of any supported organization other than the supported		*	· 1
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	٠.		241
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		<u> </u>	
	supervised, or controlled the supporting organization.	2_		LX_
Secti	on C. Type II Supporting Organizations		\ \ -	
_	181	Γ.	Yes	No
_' -	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		e\$t-7.4€	
	or management of the supporting organization was vested in the same persons that controlled or managed		2	
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
	,,		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	<i>i</i> # .	,	ړ. ت
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	- x	-1	777
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	<u>```</u>		ليند
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		LX.
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	- 4	1	2 4
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		X
2	By reason of the relationship described in (2), did the organization's supported organizations have a	-		秋1.
3	significant voice in the organization's investment policies and in directing the use of the organization's			7º F.
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	7:	· .	*
	supported organizations played in this regard.	3		-
Secti	on E. Type III Functionally Integrated Supporting Organizations	•	<u> </u>	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	instru	ction	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ın		1
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		4	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,) ·	.,0	:
	how the organization was responsive to those supported organizations, and how the organization determined	ľ .	, j.	
	that these activities constituted substantially all of its activities.	2a		استند کر
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	- 3	61.4	(1)
~	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	'	•	11.3
	reasons for the organization's position that its supported organization(s) would have engaged in these		¥ . E.	1 2 V
	activities but for the organization's involvement	2b		X
3	Parent of Supported Organizations. Answer (a) and (b) below.	, T	1	<u> </u>
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	<u> </u>	P-19:	, , ž
	trustees of each of the supported organizations? Provide details in Part VI.	3a	<u> </u>	\angle
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	\ <u>``</u>		لنجنا
	of its supported organizations? If "Yes" describe in Part VI the role played by the organization in this regard.	3b	l .	ı V

Part V. Type III Non-Functionally Integrated 509(a)(3) Supporting Organical	jani	izations	
1			ons A through E.
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			1, 200 (12)
instructions for short tax year or assets held for part of year):		7.0	أبدأ أصرر
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI).	2 *		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	NA	
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C-Distributable Amount		3 3 3 5 5	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2	بالجيد - الحال	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	- " " 1" - " " " " " " " " " " " " " " "	
4 Enter greater of line 2 or line 3.	4	garage to the garage	
5 Income tax imposed in prior year	5	1 0 12	'
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	1. 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 .	•
7 Check here if the current year is the organization's first as a non-functional	ly in	tegrated Type III supporting	g organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	
Sect	on D—Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	rted	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nızatıons	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.	<u> </u>		
8	Distributions to attentive supported organizations to whice (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
a	From 2013			
b	From 2014		11	
c	From 2015		1110	
d	From 2016			
е	From 2017		10.4	
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
	Remainder, Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			
	Section D, line 7:			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7			
а	Excess from 2014			
b	Excess from 2015			
С	Excess from 2016			
d	Excess from 2017			
	Excess from 2018			

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
VIKING BOOSTOR CLUB 82-6008957
FUR PUSE
OUR MISSION IS SOLBUTTO SUPPORT CHS
SPURTING AND BXTRA CURRICULAR ACTIVITIES AND
SPURTING AND BXTRA CURRICULAR ACTIVITIES AND THE STUDENTS WHO PARTICIPATE IN THEM
CONTRIBUTIONS AMO GRANT REVENUES
THIS COMBS FROM MEMBERSHIP DUES AND DONTHOUS
[M] Como , (Como) , (Como
OTHER REVENUES
7HIS COMES FROM FUMPRAISING GUENTS AMD SALPS OF
MERCHANDISE AT CHS BUT NITIES
GROMS PAID
ALL POYMENTS ARE MADE TO CHS ACTIVITIES
·
SALAR185
WE TREAT OUR PRESIDENT AND S GCRAAPP
AS INDEPENDENT CONTRACTORS FOR THE ORGANIZATION
07HBR BXPRNSS
WE RECORD OFFICE SUPPLIES, IN SURANCE AND
MEMBORSHIP DUES AS OTHER EXPONSES

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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization in ISBO DETOR CLUB

OUR MISSION IS SOUELY TO SUPPORT COEUR'D'ALBNO HIGH SCHOOL SPORTING AND EXTRA CURRICULAR ACTIVITIES. WE WERE ORGANIZED FOR THAT PURPOSE ONUY.

FORM 990 PART U

WE ONLY HAD TWO PAID POSITIONS LAST YEAR:

I-PRESIDENT AND I-SE CRETARY. WE TREAT ___

B.O. TH OF THEM. A.S.- INORPENDENT CONTRACTORS

AND GAVE THEM BOTH 1099, EAGH YEAR.

FORM 990 PART VI

BUARD LAST YEAR.

FORM 990 -PART VIII

WE COLLECT ANNUAL MENTBORSHIP DUES, AFOLD
FUND RAISING EVENTS AND SELL MERCHANDISE
AT HIGH SCHOOL ACTIVITIES, THESE ARE THE WAYS
WE MAKE MONKY, ALL EXCESS CASH AFTER EXPENSES
GOES BACK TO COEUR D'ALENE HIGH SCHOOL
AND THEIR STUDENT ACTIVITIES

Schedule O (Form 990 or 990-EZ	2) (2018)		Page 2
Name of the organization		41 110	Employer identification number
Name of the organization	\$10575R	CLUB	82-600008957
VICIN	1-00-1		1 2 00000
		· · · · · · · · · · · · · · · · · · ·	
			·
	•		