Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

▶ Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than $100,000 and total assets less than $250,000 at the end of the year may use this form.

▶ *The organization may have to use a copy of this return to satisfy state reporting requirements.*

OMB No. 1545-1150

2006

Open to Public Inspection

A For the 2006 calendar year, or tax year beginning July 1 **, 2006, and ending** June 30 **, 20** 07

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☑ Initial return
- ☐ Final return
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: Tilicum Club

Number and street (or P.O. box, if mail is not delivered to street address): P.O. Box 457 | Room/suite

City or town, state or country, and ZIP + 4: Cheney, WA 99004-0457

D Employer identification number 91 1248642

E Telephone number (509) 235-9015

F Group Exemption Number . . ▶

● ***Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).***

G Accounting method: ☑ Cash ☐ Accrual
Other (specify) ▶

H Check ▶ ☑ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ www.cheneymuseum.org

J Organization type (check only one)— ☑ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check ▶ ☑ if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than $25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if $100,000 or more, file Form 990 instead of Form 990-EZ . . ▶ $ 3230

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 47 of the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	2548
	2	Program service revenue including government fees and contracts		2	0
	3	Membership dues and assessments		3	0
	4	Investment income		4	83
	5a	Gross amount from sale of assets other than inventory	5a 0		
	b	Less: cost or other basis and sales expenses	5b 0		
	c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)		5c	0
	6	Special events and activities (attach schedule). If any amount is from **gaming,** check here ▶ ☐			
	a	Gross revenue (not including $ _____ of contributions reported on line 1)	6a 0		
	b	Less: direct expenses other than fundraising expenses	6b 0		
	c	Net income or (loss) from special events and activities (line 6a less line 6b)		6c	0
	7a	Gross sales of inventory, less returns and allowances	7a 516		
	b	Less: cost of goods sold	7b 245		
	c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)		7c	271
	8	Other revenue (describe ▶ Gifts in kind of materials for museum programs)		8	83
	9	**Total revenue** (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8) ▶		9	2985
Expenses	10	Grants and similar amounts paid (attach schedule)		10	1150
	11	Benefits paid to or for members		11	0
	12	Salaries, other compensation, and employee benefits		12	0
	13	Professional fees and other payments to independent contractors		13	0
	14	Occupancy, rent, utilities, and maintenance		14	0
	15	Printing, publications, postage, and shipping		15	23
	16	Other expenses (describe ▶ See attached)		16	1771
	17	**Total expenses** (add lines 10 through 16) ▶		17	2944
Net Assets	18	Excess or (deficit) for the year (line 9 less line 17)		18	41
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	7761
	20	Other changes in net assets or fund balances (attach explanation)		20	0
	21	Net assets or fund balances at end of year (combine lines 18 through 20) ▶		21	7802

Part II Balance Sheets—If Total assets on line 25, column (B) are $250,000 or more, file Form 990 instead of Form 990-EZ.

(See page 51 of the instructions.)

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	7206	22	8348
23	Land and buildings	0	23	0
24	Other assets (describe ▶ Inventory for sale in support of program activities)	555	24	310
25	**Total assets**	7761	25	8658
26	**Total liabilities** (describe ▶ Grants, Scholarships, & Sales Tax payable)	150	26	856
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	7611	27	7802

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 10642I Form **990-EZ** (2006)

Part III **Statement of Program Service Accomplishments** (See page 51 of the instructions.)

What is the organization's primary exempt purpose? Scholarships; Museum; social welfare; civic & cultural work

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)
28 Approximately 225 visitors, 22 active volunteers, open 155 hours, 1116 volunteer hours used for museum program services. Serve local school, child care, preschool, & youth camp groups as well as general public. Projects ongoing to improve access & educational value of information & better preserve artifacts. (Grants $) If this amount includes foreign grants, check here ▶ ☐	28a	1227
29 Educational scholarships awarded to 2 Cheney High School students for use at higher educational institution in Washington. Selected by financial need, school & community involvement, & grade average by committee of 3. Follow-up ensures proper use of funds and offers encouragement to student in pursuing goals. (Grants $ 800) If this amount includes foreign grants, check here ▶ ☐	29a	800
30 Social Welfare: Monetary donation to Cheney Outreach for swimming pool passes for needy children; delivered 16 container of cookies to elderly singles & shut-ins; delivered clothing & hygiene items to Hope House Women's Shelter several times; delivered Christmas Candy to Hope House Women's Shelter; (see attached) (Grants $ 50) If this amount includes foreign grants, check here ▶ ☐	30a	50
31 Other program services (attach schedule) (Grants $ 300) If this amount includes foreign grants, check here ▶ ☐	31a	300
32 **Total program service expenses** (add lines 28a through 31a) ▶	32	2377

Part IV **List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated. See page 52 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Marilyn Nichols 633 W. 5th St., Cheney, WA 99004	President; .5 hr/wk	0	0	0
Catherine Abbott 9510 W. Kite Dr., Cheney, WA 99004	Secretary; .5 hr/wk	0	0	0
Chris Stewart 17810 W. Skylark Rd., Cheney, WA 99004	Treasurer; .5 hr/wk	0	0	0
Joan Mamanakis 1122 Gary St., Cheney, WA 99004	Museum Director; 30 hr/wk	0	0	0

Part V **Other Information** (Note the statement requirement in General Instruction V.)

		Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✔
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34		✔
35 *If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but* ***not*** *reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.*			
a Did the organization have unrelated business gross income of $1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a		✔
b If "Yes," has it filed a tax return on **Form 990-T** for this year?	35b		
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)	36		✔
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0			
b Did the organization file **Form 1120-POL** for this year?	37b		✔
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or** were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		✔
b If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved 38b 0			
39 *501(c)(7) organizations.* Enter:			
a Initiation fees and capital contributions included on line 9 39a 0			
b Gross receipts, included on line 9, for public use of club facilities 39b 0			

Part V **Other Information** (Note the statement requirement in General Instruction V.) *(Continued)*

40a *501(c)(3) organizations.* Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0

	Yes	No
40b		✔
40e		✔

b *501(c)(3) and (4) organizations.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation . .

c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ 0

d Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ 0

e *All organizations.* At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? . . . . . .

41 List the states with which a copy of this return is filed. ▶ Washington

42a The books are in care of ▶ Joan Mamanakis Telephone no. ▶ (509) 235-9015

Located at ▶ 614 3rd St.(P.O.Box 457), Cheney, WA ZIP + 4 ▶ 99004-0457

	Yes	No
42b		✔
42c		✔

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . . .

If "Yes," enter the name of the foreign country: ▶

See the instructions for exceptions and filing requirements for **Form TD F 90-22.1.**

c At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . .

If "Yes," enter the name of the foreign country: ▶

43 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of* ***Form 1041***—Check here . . . . . ▶ ☐

and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ **43**

Please Sign Here

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.

Signature of officer Date

Marilyn Nichols, President

Type or print name and title.

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed ▶ ☐	Preparer's SSN or PTIN (See Gen. Inst. X)
Firm's name (or yours if self-employed), address, and ZIP + 4		EIN ▶	
		Phone no. ▶ ( )	

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