Form **990**

Department of the Treasury
Internal Revenue Service (77)

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)

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

OMB No 1545-0047

2007

Open to Public Inspection

A For the 2007 calendar year, or tax year beginning July 1 **, 2007, and ending** June 30, 2008

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

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

C Name of organization: CAT TALES

Number and street (or P O box if mail is not delivered to street address): 17020 N. NEWPORT HWY | Room/suite

City or town, state or country, and ZIP + 4: MEAD, WA 99021-9539

D Employer identification number 91-1538226

E Telephone number (509) 238-4126

F Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) ▶

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

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? ☐ Yes ☐ No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? ☐ Yes ☐ No (If "No," attach a list. See instructions)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☐ No

G Website: ▶ www.cattales.org

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

K Check here ▶ ☐ if the organization is not a 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

I Group Exemption Number ▶

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 433,581

M Check ▶ ☐ if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

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

Revenue	1	Contributions, gifts, grants, and similar amounts received:			
	a	Contributions to donor advised funds	1a	0	
	b	Direct public support (not included on line 1a)	1b	336,790	
	c	Indirect public support (not included on line 1a)	1c	0	
	d	Government contributions (grants) (not included on line 1a)	1d	0	
	e	**Total** (add lines 1a through 1d) (cash $ 336,790 noncash $ 0)		1e	336,790
	2	Program service revenue including government fees and contracts (from Part VII, line 93)		2	0
	3	Membership dues and assessments		3	3,769
	4	Interest on savings and temporary cash investments		4	784
	5	Dividends and interest from securities		5	0
	6a	Gross rents	6a	0	
	b	Less: rental expenses	6b	0	
	c	Net rental income or (loss). Subtract line 6b from line 6a		6c	0
	7	Other investment income (describe ▶)		7	0

		(A) Securities		(B) Other	
8a	Gross amount from sales of assets other than inventory	0	8a	0	
b	Less: cost or other basis and sales expenses	0	8b	0	
c	Gain or (loss) (attach schedule)	0	8c	0	
d	Net gain or (loss). Combine line 8c, columns (A) and (B)			8d	0

9	Special events and activities (attach schedule). If any amount is from **gaming**, check here ▶ ☐				
a	Gross revenue (not including $ 0 of contributions reported on line 1b)	9a	0		
b	Less: direct expenses other than fundraising expenses	9b	0		
c	Net income or (loss) from special events. Subtract line 9b from line 9a			9c	0
10a	Gross sales of inventory, less returns and allowances	10a	0		
b	Less: cost of goods sold	10b	0		
c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a			10c	0
11	Other revenue (from Part VII, line 103)			11	92,238
12	**Total revenue.** Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			12	433,581
Expenses 13	Program services (from line 44, column (B))			13	371,881
14	Management and general (from line 44, column (C))			14	36,251
15	Fundraising (from line 44, column (D))			15	0
16	Payments to affiliates (attach schedule)			16	0
17	**Total expenses.** Add lines 16 and 44, column (A)			17	408,132
Net Assets 18	Excess or (deficit) for the year. Subtract line 17 from line 12			18	25,449
19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	144,161
20	Other changes in net assets or fund balances (attach explanation)			20	[12,077]
21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20			21	156,238

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

Cat No 11282Y Form **990** (2007)

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others *(See the instructions.)*

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash $ 0 noncash $ 0) If this amount includes foreign grants, check here ▶ ☐	22a	0	0		
22b Other grants and allocations (attach schedule) (cash $ 0 noncash $ 0) If this amount includes foreign grants, check here ▶ ☐	22b	0	0		
23 Specific assistance to individuals (attach schedule)	23	0	0		
24 Benefits paid to or for members (attach schedule)	24	0	0		
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	25a	0	0	0	0
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b	0	0	0	0
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c	0	0	0	0
26 Salaries and wages of employees not included on lines 25a, b, and c	26	0	0	0	0
27 Pension plan contributions not included on lines 25a, b, and c	27	0	0	0	0
28 Employee benefits not included on lines 25a – 27	28	0	0	0	0
29 Payroll taxes	29	0	0	0	0
30 Professional fundraising fees	30	0	0	0	0
31 Accounting fees	31	0	0	0	0
32 Legal fees	32	0	0	0	0
33 Supplies	33	120,929	120,929	0	0
34 Telephone	34	10,364	10,364	0	0
35 Postage and shipping	35	649	649	0	0
36 Occupancy	36	35,063	26,297	8,766	0
37 Equipment rental and maintenance	37	10,131	10,131	0	0
38 Printing and publications	38	1,140	1,140	0	0
39 Travel	39	25,157	25,157	0	0
40 Conferences, conventions, and meetings	40	5,963	1,478	4,486	0
41 Interest	41	2,146	2,146	0	0
42 Depreciation, depletion, etc. (attach schedule)	42	22,062	22,062	0	0
43 Other expenses not covered above (itemize):					
a Animal Food	43a	42,134	42,134	0	0
b Contracted Labor	43b	93,154	70,154	23,000	0
c Veterinary & Medical	43c	18,357	18,357	0	0
d Advertising	43d	14,491	14,491	0	0
e Licenses & Memberships	43e	4,452	4,452	0	0
f Misc.	43f	1,940	1,940	0	0
g	43g	0	0	0	0
44 **Total functional expenses.** Add lines 22a through 43g. (Organizations completing columns (B)–(D), carry these totals to lines 13–15)	44	408,132	371,881	36,251	0

Joint Costs. Check ▶ ☐ if you are following SOP 98-2. N/A

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? ▶ ☐ **Yes** ☐ **No**

If "Yes," enter **(i)** the aggregate amount of these joint costs $ _____; **(ii)** the amount allocated to Program services $ _____; **(iii)** the amount allocated to Management and general $ _____; and **(iv)** the amount allocated to Fundraising $ _____

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

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶ Zoological Park All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)	**Program Service Expenses** (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
a Acquisition + Maintenance of 100+(-) animals including large felines, bears, domestic petting zoo, & other zoo animals including supplies & food (Grants and allocations $ -0-) If this amount includes foreign grants, check here ▶ ☐	130,576
b Construction & Maintenance of animal exhibits, signage, park grounds & landscaping (Grants and allocations $ -0-) If this amount includes foreign grants, check here ▶ ☐	101,423
c On site visits of ~50,000 guests Off site environmental programs for K-College (Grants and allocations $ -0-) If this amount includes foreign grants, check here ▶ ☐	98,908
d Zookeeper Training Program (Grants and allocations $ -0-) If this amount includes foreign grants, check here ▶ ☐	40,974
e Other program services (attach schedule) NONE (Grants and allocations $ -0-) If this amount includes foreign grants, check here ▶ ☐	-0-
f **Total of Program Service Expenses** (should equal line 44, column (B), Program services). . . . . ▶	371,881

Part IV Balance Sheets *(See the instructions.)*

Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*

				(A) Beginning of year		(B) End of year
Assets	45	Cash—non-interest-bearing		(3,389)	45	(10,418)
	46	Savings and temporary cash investments		30,000	46	60,784
	47a	Accounts receivable	47a 0			
	b	Less: allowance for doubtful accounts	47b 0	0	47c	0
	48a	Pledges receivable	48a 0			
	b	Less: allowance for doubtful accounts	48b 0	0	48c	0
	49	Grants receivable		0	49	0
	50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		0	50a	0
	b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		0	50b	0
	51a	Other notes and loans receivable (attach schedule)	51a 0			
	b	Less: allowance for doubtful accounts	51b 0	0	51c	0
	52	Inventories for sale or use		0	52	0
	53	Prepaid expenses and deferred charges		0	53	0
	54a	Investments—publicly-traded securities ▶ ☐ Cost ☐ FMV		0	54a	0
	b	Investments—other securities (attach schedule) ▶ ☐ Cost ☐ FMV		0	54b	0
	55a	Investments—land, buildings, and equipment: basis	55a 0			
	b	Less. accumulated depreciation (attach schedule)	55b 0	0	55c	0
	56	Investments—other (attach schedule)		0	56	0
	57a	Land, buildings, and equipment: basis	57a 321,077			
	b	Less: accumulated depreciation (attach schedule)	57b 215,205	117,550	57c	105,872
	58	Other assets, including program-related investments (describe ▶)		0	58	0
	59	**Total assets** (must equal line 74). Add lines 45 through 58		144,161	59	156,238
Liabilities	60	Accounts payable and accrued expenses		0	60	0
	61	Grants payable		0	61	0
	62	Deferred revenue		0	62	0
	63	Loans from officers, directors, trustees, and key employees (attach schedule)		44,500	63	44,500
	64a	Tax-exempt bond liabilities (attach schedule)		0	64a	0
	b	Mortgages and other notes payable (attach schedule)		0	64b	0
	65	Other liabilities (describe ▶)		0	65	0
	66	**Total liabilities.** Add lines 60 through 65		44,500	66	44,500
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶** ☐ and complete lines 67 through 69 and lines 73 and 74.				
	67	Unrestricted		(3,389)	67	(10,418)
	68	Temporarily restricted		30,000	68	60,784
	69	Permanently restricted		117,550	69	105,872
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74.				
	70	Capital stock, trust principal, or current funds		0	70	0
	71	Paid-in or capital surplus, or land, building, and equipment fund		0	71	0
	72	Retained earnings, endowment, accumulated income, or other funds		0	72	0
	73	**Total net assets or fund balances.** Add lines 67 through 69 **or** lines 70 through 72. (Column (A) **must** equal line 19 and column (B) **must** equal line 21)		144,161	73	156,238
	74	**Total liabilities and net assets/fund balances.** Add lines 66 and 73		188,661	74	200,738

Part IV-A **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** *(See the instructions.)*

a	Total revenue, gains, and other support per audited financial statements			a	N/A
b	Amounts included on line **a** but not on Part I, line 12:				
1	Net unrealized gains on investments	b1	N/A		
2	Donated services and use of facilities	b2	N/A		
3	Recoveries of prior year grants	b3	N/A		
4	Other (specify):	b4	N/A		
	Add lines **b1** through **b4**			b	N/A
c	Subtract line **b** from line **a**			c	N/A
d	Amounts included on Part I, line 12, but not on line **a**:				
1	Investment expenses not included on Part I, line 6b	d1	N/A		
2	Other (specify):	d2	N/A		
	Add lines **d1** and **d2**			d	N/A
e	**Total revenue** (Part I, line 12). Add lines **c** and **d** ▶			e	N/A

Part IV-B **Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

a	Total expenses and losses per audited financial statements			a	N/A
b	Amounts included on line **a** but not on Part I, line 17:				
1	Donated services and use of facilities	b1	N/A		
2	Prior year adjustments reported on Part I, line 20	b2	N/A		
3	Losses reported on Part I, line 20	b3	N/A		
4	Other (specify):	b4	N/A		
	Add lines **b1** through **b4**			b	N/A
c	Subtract line **b** from line **a**			c	N/A
d	Amounts included on Part I, line 17, but not on line **a**:				
1	Investment expenses not included on Part I, line 6b	d1	N/A		
2	Other (specify):	d2	N/A		
	Add lines **d1** and **d2**			d	N/A
e	**Total expenses** (Part I, line 17). Add lines **c** and **d** ▶			e	N/A

Part V-A **Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) *(See 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 plans	(E) Expense account and other allowances
Kristine Birdsell PO Box 18933, Spokane, WA 99208	President	-0-	-0-	-0-
Robert Holman 16925 N. Newport Hwy, Mead, WA 99021	Vice President	-0-	-0-	-0-
Deborah Wyche 17020 N. Newport Hwy, Mead, WA 99021	Zoo Director Treasurer 60 hr/week	-0-	$24,000 Deferred compensation	-0-
Jenifer Schaub 7617 E Baldwin, Spokane, WA 99223	Secretary	-0-	-0-	-0-
Mike Wyche 17020 N. Newport Hwy, Mead, WA 99021	Curator Executive Director 60 hrs/week	-0-	$24,000 Deferred compensation	-0-
Steve Corker 2025 W. First, Spokane, WA 99204	Director	-0-	-0-	-0-
Alan Birdsell 507 W. Columbia, Spokane, WA 99208	Director	-0-	-0-	-0-

Part V-A **Current Officers, Directors, Trustees, and Key Employees** *(continued)*

		Yes	No
75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ▶ 7			
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b	X	
c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization." ▶	75c		X
If "Yes," attach a statement that includes the information described in the instructions			
d Does the organization have a written conflict of interest policy?	75d	X	

Part V-B **Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits** (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
NONE				

Part VI **Other Information** *(See the instructions.)*

		Yes	No
76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	76		X
77 Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
If "Yes," attach a conformed copy of the changes.			
78a Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		X
b If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b	N/A	
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b If "Yes," enter the name of the organization ▶ ____ and check whether it is ☐ exempt **or** ☐ nonexempt			
81a Enter direct and indirect political expenditures. (See line 81 instructions.) 81a -0-			
b Did the organization file **Form 1120-POL** for this year?	81b	N/A	

Part VI Other Information *(continued)*

			Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b N/A			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to *quid pro quo* contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85a	*501(c)(4), (5), or (6).* Were substantially all dues nondeductible by members?	85a	N/A	
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	85b	N/A	
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members 85c N/A			
d	Section 162(e) lobbying and political expenditures 85d N/A			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A	
86	*501(c)(7) orgs* Enter: **a** Initiation fees and capital contributions included on line 12 86a N/A			
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A			
87	*501(c)(12) orgs.* Enter: **a** Gross income from members or shareholders 87a N/A			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them) 87b N/A			
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI ▶	88b		X
89a	*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			
b	*501(c)(3) and 501(c)(4) orgs.* 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 a statement explaining each transaction	89b		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0			
d	Enter. Amount of tax on line 89c, above, 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?	89e		X
f	*All organizations.* Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		X
g	*For supporting organizations and sponsoring organizations maintaining donor advised funds.* Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	N/A	

90a List the states with which a copy of this return is filed ▶ Washington

b Number of employees employed in the pay period that includes March 12, 2007 (See instructions.) 90b NONE

91a The books are in care of ▶ Deborah Wyche Telephone no. ▶ (509) 238-4126

Located at ▶ 17020 N. Newport Hwy, Mead, WA 99021 ZIP + 4 ▶ 99021-9539

			Yes	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)?	91b		X
	If "Yes," enter the name of the foreign country ▶ N/A			
	See the instructions for exceptions and filing requirements for **Form TD F 90-22.1,** Report of Foreign Bank and Financial Accounts.			

Part VI Other Information *(continued)*

		Yes	No
c At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶	91c		X

92 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* ***Form 1041***—Check here . . . . . ▶ ☐
and enter the amount of tax-exempt interest received or accrued during the tax year . . ▶ | 92 | N/A

Part VII Analysis of Income-Producing Activities *(See the instructions.)*

Note: *Enter gross amounts unless otherwise indicated.*

		Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
		(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93	Program service revenue:					
a			0		0	0
b			0		0	0
c			0		0	0
d			0		0	0
e			0		0	0
f	Medicare/Medicaid payments		0		0	0
g	Fees and contracts from government agencies		0		0	0
94	Membership dues and assessments . . .		0		0	3,769
95	Interest on savings and temporary cash investments		0		0	784
96	Dividends and interest from securities . .		0		0	0
97	Net rental income or (loss) from real estate:					
a	debt-financed property		0		0	0
b	not debt-financed property		0		0	0
98	Net rental income or (loss) from personal property		0		0	0
99	Other investment income		0		0	0
100	Gain or (loss) from sales of assets other than inventory		0		0	0
101	Net income or (loss) from special events .		0		0	0
102	Gross profit or (loss) from sales of inventory		0		0	0
103	Other revenue: a Zoological Training		0		0	92,238
b			0		0	0
c			0		0	0
d			0		0	0
e			0		0	0
104	Subtotal (add columns (B), (D), and (E)) .		0		0	96,791
105	**Total** (add line 104, columns (B), (D), and (E)) . . . . . ▶					96,791

Note: *Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes *(See the instructions.)*

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
94	Membership dues were used to pay for basic animal care
95	Interest earned is still in savings
103a	School tuition & fees went to purchase supplies for the students, the animals in their care & to cover contracted labor for instructors

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities *(See the instructions.)*

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts *(See the instructions.)*

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: *If "Yes" to* ***(b),*** *file Form 8870* ***and*** *Form 4720 (see instructions).*

Part XI **Information Regarding Transfers To and From Controlled Entities.** *Complete only if the organization is a controlling organization as defined in section 512(b)(13).*

		Yes	No
106	Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.		X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	NONE			
b				
c				
Totals				

		Yes	No
107	Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.		X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	NONE			
b				
c				
Totals				

		Yes	No
108	Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?		X

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

Deborah J Wyche — 2-15-09

Signature of officer — Date

Deborah J Wyche Treasurer

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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SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2007

Name of the organization: CATTALES

Employer identification number: 91-1538226

Part I **Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over $50,000 ▶	-0-			

Part II-A **Compensation of the Five Highest Paid Independent Contractors for Professional Services**
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over $50,000 for professional services ▶	-0-	

Part II-B **Compensation of the Five Highest Paid Independent Contractors for Other Services**
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over $50,000 for other services ▶	-0-	

Part III **Statements About Activities** (See page 2 of the instructions.)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ $ 0 (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)	1		X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions)*			
a	Sale, exchange, or leasing of property?	2a	X	
b	Lending of money or other extension of credit?	2b	X	
c	Furnishing of goods, services, or facilities?	2c	X	
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	2d		X
e	Transfer of any part of its income or assets?	2e		X
3a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)	3a		X
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		X
b	Did the organization make any taxable distributions under section 4966?	4b	N/A	
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c	N/A	
d	Enter the total number of donor advised funds owned at the end of the tax year ▶	N/A		
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶	N/A		
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶	1		
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶	60,784		

Part IV **Reason for Non-Private Foundation Status** (See pages 4 through 8 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)

7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

8 ☐ A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).

9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶ .....

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)

11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

12 ☐ An organization that normally receives: **(1) more than 33⅓%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and **(2) no more than 33⅓%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:

☐ Type I ☐ Type II ☐ Type III-Functionally Integrated ☐ Type III-Other

Provide the following information about the supported organizations. (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents? Yes	No	(e) Amount of support
N/A					
Total . . . . . ▶					

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) ***Use cash method of accounting.***

Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.*

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	267,759	232,726	210,963	225,562	937,010
16 Membership fees received	21,701	21,686	35,076	27,310	105,773
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	0	0	0	0	0
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	0	0	0	0	0
19 Net income from unrelated business activities not included in line 18	0	0	0	0	0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge	0	0	0	0	0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	117,518	100,291	74,555	88,242	380,606
23 Total of lines 15 through 22	406,978	354,703	320,594	341,114	1,423,389
24 Line 23 minus line 17	406,978	354,703	320,594	341,114	1,423,389
25 Enter 1% of line 23	4,069	3,547	3,205	3,411	

26 Organizations described on lines 10 or 11: **a** Enter 2% of amount in column (e), line 24 ▶ **26a** 28,468

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. **Do not file this list with your return.** Enter the total of all these excess amounts ▶ **26b** 0

c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶ **26c** 1,423,389

d Add: Amounts from column (e) for lines: 18 0 19 0 22 380,606 26b 0 ▶ **26d** 380,606

e Public support (line 26c minus line 26d total) ▶ **26e** 1,042,783

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ **26f** 73 %

27 Organizations described on line 12: **a** For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." **Do not file this list with your return.** Enter the sum of such amounts for each year

(2006) ..... (2005) ..... (2004) ..... (2003) .....

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year

(2006) ..... (2005) ..... (2004) ..... (2003) .....

c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶ **27c** _____

d Add: Line 27a total _____ and line 27b total _____ ▶ **27d** _____

e Public support (line 27c total minus line 27d total) ▶ **27e** _____

f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶ **27f** _____

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ **27g** %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ **27h** %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. **Do not file this list with your return.** Do not include these grants in line 15.

Part V **Private School Questionnaire** (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV) N/A

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 11 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768) N/A

Check ▶ a ☐ if the organization belongs to an affiliated group. Check ▶ b ☐ if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table—			
If the amount on line 40 is— / **The lobbying nontaxable amount is—**			
Not over $500,000 / 20% of the amount on line 40			
Over $500,000 but not over $1,000,000 / $100,000 plus 15% of the excess over $500,000			
Over $1,000,000 but not over $1,500,000 / $175,000 plus 10% of the excess over $1,000,000	41		
Over $1,500,000 but not over $17,000,000 / $225,000 plus 5% of the excess over $1,500,000			
Over $17,000,000 / $1,000,000			
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720.*

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B **Lobbying Activity by Nonelecting Public Charities** N/A
(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h.**)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines **c** through **h.**)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 14 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:			
(i) Cash	51a(i)		X
(ii) Other assets	a(ii)		X
b Other transactions.			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii) Rental of facilities, equipment, or other assets	b(iii)		X
(iv) Reimbursement arrangements	b(iv)		X
(v) Loans or loan guarantees	b(v)		X
(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d *If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization.* If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line no	(b) Amount involved	(c) Name of nonchantable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		NONE	

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
NONE		

Cat Tales Zoological Park

Zoological Training Center

N.17020 Newport Hwy, Mead, WA 99021 (509) 238-4126

http://www.cattales.org - http://www.zooschool.org

EI# 91-1538226

Attachments to Form 990 - Tax Year 2007

Part I #20 – Change in net assets or fund balances due to accumulated construction, land, building, and equipment costs adjusted with depreciation. See attached Form 4562.

Part IV #57 - Land, buildings, and equipment

$22,062 was spent on construction of exhibits and landscaping.
Items from 2001 and before have depreciated to -0-

Part IV #63 - Loans from officers, directors, trustees and key employees

Lenders Name	Original Amount	Balance Due	Date of Note	Maturity Date	Repayment Terms	Interest Rate	Purpose of the Loan
Debbie Wyche	$44,500.00	$44,500.00	2-5-2002	open	when possible	-0-	Operating costs

Part V-A (b) – Mike and Debbie Wyche are husband and wife.
Kristine and Alan Birdsell were husband and wife, are currently divorced, and their involvement is still in the best interest of the animals and the zoo.

Form **4562**

Department of the Treasury
Internal Revenue Service

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2007

Attachment Sequence No **67**

Name(s) shown on return: CAT TALES

Business or activity to which this form relates:

Identifying number: 91-1538226

Part I **Election To Expense Certain Property Under Section 179**

Note: *If you have any listed property, complete Part V before you complete Part I.*

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	$125,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	$500,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	125,000

	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6			

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2006 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12 ▶	13	

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V.*

Part II **Special Depreciation Allowance and Other Depreciation (Do not** include listed property.) (See instructions.)

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III **MACRS Depreciation (Do not** include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2007	17	33,740
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B—Assets Placed in Service During 2007 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property		23,758	GDS-7	HY	S/L	1696
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV **Summary** (see instructions)

21	Listed property. Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instr.	22	35,436
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Cat No 12906N Form **4562** (2007)

Part V **Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete* ***only*** *24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.*

Section A—Depreciation and Other Information (Caution: *See the instructions for limits for passenger automobiles.*)

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ Investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special allowance for qualified Gulf Opportunity Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						**25**		
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L –		
		%				S/L –		
		%				S/L –		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1. .						**28**		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1.								**29**

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (**do not** include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
	Yes	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions).

	Yes	**No**
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: *If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.*

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2007 tax year (see instructions):					
43 Amortization of costs that began before your 2007 tax year.				**43**	
44 **Total.** Add amounts in column (f). See the instructions for where to report.				**44**	

Accumulated Depreciation Worksheet – 2008 Cat Tales Zoological Park

Description Of Property	Date Placed in service	Cost or Other Basis	2000 Depr	2001 Depr	2002 Depr	2003 Depr	2004 Depr	2005 Depr	2006 Depr	2007 Depr	2008 Depr	Accum Depr 6/30/08	Net Depreciated Value 2008
Construction	2000	34,073	2434	4869	4865	4,869	4,866	4,869	4865	2436	0	34073	0
Landscape	2000	5,658	404	808	808	809	808	809	808	404	0	5658	0
Construction	2001	47,433		3386	6778	6,778	6,773	6,778	6773	6778	3389	47433	0
Landscape	2001	1,680		120	240	240	240	240	240	240	120	1680	0
Construction	2002	33,442			2388	4,779	4,776	4,779	4775	4779	4776	31052	2390
Construction	2003	45,689				3,205	6,529	6,524	6524	6529	6524	35835	9854
Construction	2004	37,689					2,691	5,386	5381	5386	5385	24229	13460
Classroom computer	2004	2,400					240	480	480	480	480	2160	240
Classroom desks	2004	1,600					114	229	228	229	228	1028	572
Construction	2005	13,623						973	1947	1945	1947	6812	6811
Landscape	2005	11,824						844	1690	1688	1690	5912	5912
Computer	2005	1,407						141	141	281	281	844	563
Construction	2006	15,133							1080	2162	2161	5403	9730
Landscape	2006	7,228							516	1033	1032	2581	4647
Laptop computer	2006	1,100							110	220	220	550	550
Construction	2007	29,646								2117	4236	6353	23293
Landscape	2007	4,694								335	671	1006	3688
Ford Dump truck	2007	3000								3000	600	900	2100
Totals prior years		**297319**	**2838**	**9183**	**15079**	**20680**	**27037**	**32052**	**35558**	**37342**	**33740**	**213509**	**83810**
Construction	2008	19696									1406	1406	18290
Landscape	2008	4062									290	290	3772
Total 2008		**23758**									**1696**	**1696**	**22062**
Totals		**321077**	**2838**	**9183**	**15079**	**20680**	**27037**	**32052**	**35558**	**37342**	**35436**	**215205**	**105872**

Depreciation Worksheet – 2008 Cat Tales Zoological Park

Description Of Property	Date Placed n service	Cost or Other Basis	Business Use %	Section 179 Deduct.	Depr. Prior Years	Basis for Depr.	Method/ Convention	Recovery Period	Rate / Table %	Depr. Deduction 2008
Construction	2000	34,073	100%		34073	34,073	S/L	GDS/7	14.29%	0
Landscape	2000	5,658	100%		5658	5,658	S/L	GDS/7	4.29%	0
Construction	2001	47,433	100%		44044	47,433	S/L	GDS/7	14.29%	3389
Landscape	2001	1,680	100%		1560	1,680	S/L	GDS/7	14.29%	120
Construction	2002	33,442	100%		26276	33,442	S/L	GDS/7	14.29%	4776
Construction	2003	45,689	100%		29311	45,689	S/L	GDS/7	14.29%	6524
Construction	2004	37,689	100%		18844	37,689	S/L	GDS/7	14.29%	5385
Classroom Computer	2004	2,400	100%		1680	2,400	S/L	GDS/5	20%	480
Classroom desks	2004	1,600	100%		800	1,600	S/L	GDS/7	14.29	228
Construction	2005	13,623	100%		4865	13,,623	S/L	GDS7	14.28	1947
Landscape	2005	11,824	100%		4222	11,824	S/L	GDS7	14.28	1690
Computer (Office)	2005	1,407	100%		563	1,407	S/L	GDS5	20%	281
Construction	2006	15133	100%		3242	15133	S/L	GDS7	14.29%	2161
Landscape	2006	7228	100%		1549	7228	S/L	GDS7	14.29%	1032
Laptop computer	2006	1100	100%		330	1100	S/L	GDS5	20%	220
Construction	2007	29646	100%		2117	29646	S/L	GDS7	7.14%	4236
Landscape	2007	4694	100%		335	4694	S/L	GDS7	7.14%	671
Ford dump truck	2007	3000	100%		300	3000	S/L	GDS5	10%	600
Construction	2008	19696	100%			19696	S/L	GDS7	7.14%	1406
Landscape	2008	4062	100%			4062	S/L	GDS7	7.14%	290
Totals		321077			179769	321077				35436

Cat Tales Zoological Park

Zoological Training Center

N.17020 Newport Hwy, Mead, WA 99021 (509) 238-4126

http://www cattales.org - http://www.zooschool.org

EI# 91-1538226

Attachments to Schedule A - Tax Year 2007

Part III - #2 (a, b and c)

2(a) The property that houses Cat Tales is leased from Mike and Debbie Wyche for the purpose of the zoological park for which the organization is exempt. This property is a 6.5 acre site with 2 double wide trailers which house the office, nursery, library, classroom, security system and food preparation room for the functioning of the zoo and care of the animals housed there.

2(b) Debbie Wyche loaned the zoo $44,500 in 2002 for operating costs. The loan has been extended until it can be paid.

2(c) Mike and Debbie Wyche furnish their services as volunteers.

Kristine Birdsell, President, volunteers her time as a secretary.

Robert Holman, Vice President, volunteers his time and the use of his tractor for the maintenance of the park grounds.

Jenifer Schaub, Secretary, volunteers her time as a zookeeper.

Part IV A - #22 – Other income

2003 - $88,242.00 from student tuition
2004 - $74,555.00 from student tuition
2005 - $100,291.00 from student tuition
2006 - $117,518.00 from student tuition