

CRITICAL MESSAGES

NONE

ELECTRONIC FILING

NONE

INFORMATIONAL MESSAGES

- FORM 8868 FOR FORM 990/990-EZ EXTENSION PREVIOUSLY PRINTED; VERIFY EXTENDED DUE DATE IN SCREEN EXT.
- EXTENSIONS FOR FORMS 990 OR 990-EZ AND 990-T MUST BE ELECTRONICALLY FILED TOGETHER. IF ONLY ONE EXTENSION IS SUBMITTED AT THIS TIME, THEN YOU MAY PAPER FILE THE OTHER EXTENSION AT A LATER DATE.
- PREPARER 'DAVID A GOESSL CPA'
- FORCE FIELD ENTERED WITH DATA "250.00" ON SCREEN LETTER

MISSING DATA

PRIOR YEAR DATA

FUNCTIONAL EXPENSES

- TOTAL %, OTHER FEES 70,450
- M/G PRINTING, PUB, POSTAGE 48

INCOME, ANALYSIS OF ACTIVITIES, ADDITIONAL INFORMATION

- FUNDRAISING EVENTS-CASH 320

Forms 990 / 990-EZ Return Summary

For calendar year 2010, or tax year beginning _____, and ending _____

PREMIER BIRD HUNTING TOURNAMENTS OF 26-1361395 WISCONSIN INC

Net Asset / Fund Balance at Beginning of Year		<u>856</u>
Revenue		
Contributions	<u>700</u>	
Program service revenue	<u>99,328</u>	
Investment income	<u>5</u>	
Capital gain / loss	_____	
Special events:		
Gross revenue	_____	
Direct expenses	_____	
Net income	_____	
Other income	_____	
Total revenue		<u>100,033</u>
Expenses		
Program services	_____	
Management and general	_____	
Fundraising	_____	
Total expenses		<u>96,726</u>
Excess / (deficit)		<u>3,307</u>
Other changes		_____
Net Asset / Fund Balance at End of Year		<u><u>4,163</u></u>

Reconciliation of Revenue	
Total revenue per financial statements	_____
Less:	
Unrealized gains	_____
Donated services	_____
Recoveries	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
Total revenue per return	<u><u>_____</u></u>

Reconciliation of Expenses	
Total expenses per financial statements	_____
Less:	
Donated services	_____
Prior year adjustments	_____
Losses	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
Total expenses per return	<u><u>_____</u></u>

Balance Sheet			
	Beginning	Ending	Differences
Assets	<u>856</u>	<u>4,163</u>	
Liabilities	_____	_____	
Net assets	<u><u>856</u></u>	<u><u>4,163</u></u>	<u><u>3,307</u></u>

Miscellaneous Information

Amended return _____
 Return / extended due date 08/15/11
 Failure to file penalty _____

**HANSEN AND GOESSL, LLP
605 E. BROADWAY
MEDFORD, WI 54451
715-748-5544**

August 12, 2011

CONFIDENTIAL

PREMIER BIRD HUNTING TOURNAMENTS OF
WISCONSIN INC
N300 BIRCH DR
THORP, WI 54771

Dear :

We have prepared the following returns from information provided by you without verification or audit.

Short Form of Organization Exempt From Income Tax (Form 990-EZ)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

HANSEN AND GOESSL, LLP

**HANSEN AND GOESSL, LLP
605 E. BROADWAY
MEDFORD, WI 54451
715-748-5544**

August 12, 2011

CONFIDENTIAL

PREMIER BIRD HUNTING TOURNAMENTS OF
WISCONSIN INC
N300 BIRCH DR
THORP, WI 54771

For professional services rendered in connection with the preparation of the following tax forms
for year ending 12/31/10.

Amount due \$ 250.00

Filing Instructions

PREMIER BIRD HUNTING TOURNAMENTS OF WISCONSIN INC

Short Form Exempt Organization Tax Return

Taxable Year Ended December 31, 2010

Date Due: August 15, 2011

Remittance: None is required. Your Form 990-EZ for the tax year ended 12/31/10 shows no balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return electronically. Sign the IRS e-file Authorization and mail it as soon as possible to:

HANSEN AND GOESSL, LLP
605 E. BROADWAY
MEDFORD, WI 54451

Other: Initial and date the copies of the IRS e-file Signature Authorization and the Form 990-EZ. Retain them for your records.

Your return is being filed electronically with the IRS and is not required to be mailed. Mailing a paper copy of your return to the IRS will delay the processing of your return.

**IRS e-file Signature Authorization
for an Exempt Organization**

For calendar year 2010, or fiscal year beginning _____, 2010, and ending _____, 20_____

▶ **Do not send to the IRS. Keep for your records.**

▶ **See instructions on back.**

2010

Department of the Treasury
Internal Revenue Service

Name of exempt organization **PREMIER BIRD HUNTING TOURNAMENTS OF
WISCONSIN INC**

Employer identification number
26-1361395

Name and title of officer **TERI L STEINBACH
PRESIDENT**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	
2a Form 990-EZ check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	100,033
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2010 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize **HANSEN AND GOESSL LLP** to enter my PIN **61395** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2010 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2010 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature _____ Date **08/12/11**

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

39566222646

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2010 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature _____ Date _____

**ERO Must Retain This Form—See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So**

Form **990-EZ**

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)

OMB No. 1545-1150

2010

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

Open to Public

Department of the Treasury
Internal Revenue Service

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

Inspection

A For the 2010 calendar year, or tax year beginning _____, and ending _____

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization PREMIER BIRD HUNTING TOURNAMENTS OF WISCONSIN INC	D Employer identification number 26-1361395
	Number and street (or P.O. box, if mail is not delivered to street address) Room/suite N300 BIRCH DR	E Telephone number 715-669-3303
	City or town, state or country, and ZIP + 4 THORP WI 54771	F Group Exemption Number

G Accounting Method: Cash Accrual Other (specify) _____ **H** Check if the organization is not required to attach Schedule B

I Website: **WWW.PBHT.ORG**

J Tax-exempt status (check only one) — 501(c)(3) 501(c) (**4**) (insert no.) 4947(a)(1) or 527 (Form 990, 990-EZ, or 990-PF).

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. \$ **100,033**

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

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

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	700
	2 Program service revenue including government fees and contracts	2	99,328
	3 Membership dues and assessments	3	
	4 Investment income	4	5
	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		
c Less: direct expenses from gaming and fundraising events	6c		
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a Gross sales of inventory, less returns and allowances	7a		
b Less: cost of goods sold	7b		
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8 Other revenue (describe in Schedule O)	8		
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	100,033	
Expenses	10 Grants and similar amounts paid (list in Schedule O)	10	
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	8,380
	14 Occupancy, rent, utilities, and maintenance	14	13,020
	15 Printing, publications, postage, and shipping	15	4,565
	16 Other expenses (describe in Schedule O)	16	70,761
17 Total expenses. Add lines 10 through 16	17	96,726	
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	3,307
	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	856
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	4,163

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2010)

Part V Other Information (Note the statement requirements in the instructions for Part V.)

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

Input box for Schedule O

Main form body with questions 33-44d and Yes/No columns. Includes questions about IRS reporting, significant changes, business income, political expenditures, loans, and tax shelter transactions.

	Yes	No
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?		X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		X
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

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

	Yes	No
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		
49a Did the organization make any transfers to an exempt non-charitable related organization?		
b If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(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

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

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

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

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer TERI L STEINBACH	Date PRESIDENT
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name DAVID A GOESSL CPA	Preparer's signature DAVID A GOESSL CPA	Date 08/12/11	Check <input checked="" type="checkbox"/> if self-employed	PTIN P00055781
	Firm's name HANSEN AND GOESSL, LLP	Firm's EIN 27-3520691			
	Firm's address 605 E. BROADWAY MEDFORD, WI 54451	Phone no. 715-748-5544			

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

OMB No. 1545-0047

2010

Open to Public
Inspection

**PREMIER BIRD HUNTING TOURNAMENTS OF
WISCONSIN INC**

Employer identification number
26-1361395

FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES

DESCRIPTION

AMOUNT

EXPENSES

MEETING EXPENSE	\$	148
CREDIT CARD MERCHANT FEES	\$	639
SUPPLIES	\$	474
EVENT EXPENSES	\$	58,174
SANCTION FEES	\$	9,615
BANK CHARGES	\$	30
TRAVEL	\$	1,131
SCHOLARSHIPS	\$	550
TOTAL	\$	70,761

FORM 990-EZ, PART II, LINE 24 - OTHER ASSETS

DESCRIPTION

BEG. OF YEAR END OF YEAR

EQUIPMENT NOT COMPLETED	\$	390	\$	1,310
TOTAL	\$	390	\$	1,310

FORM 990-EZ, PART III - PRIMARY EXEMPT PURPOSE

**PROMOTION AND EDUCATION OF UPLAND BIRD HUNTING AND HUNTING SAFETY AS WELL
AS THE VALUE OF SUPPORTING THE PRESERVATION OF PRISITNE UPLAND GAME HABITAT
IN WISCONSIN THROUGH LEARNING OPPORTUNITIES TO THE GENERAL PUBLIC AND YOUTH
ACADEMIC PROGRAMS AND SCHOLARSHIPS.**

FORM 990-EZ, PART III, LINE 28 - FIRST ACHIEVEMENT

Name of the organization

PREMIER BIRD HUNTING TOURNAMENTS OF

Employer identification number

26-1361395

**CREATED A FAMILY AWARENESS TO PROMOTE AND EDUCATE THE
GENERAL PUBLIC ON UPLAND BIRD HUNTING AND SAFETY THROUGH
HUNTING EVENTS. PROVIDED YOUTH OUTDOOR ACTIVITIES AND
OPPORTUNITIES.**

FORM 990-EZ, PART III, LINE 31 - ALL OTHER ACHIEVEMENTS

**CREATED A FAMILY AWARENESS TO PROMOTE AND EDUCATE THE
GENERAL PUBLIC ON UPLAND BIRD HUNTING AND SAFETY THROUGH
HUNTING EVENTS. PROVIDED YOUTH OUTDOOR ACTIVITIES AND
OPPORTUNITIES.**