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# ANIRPC . .

Department of the Treasury Internal Revenue Service

# **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 2008 Open to Public

					I maperation
<u>A</u>	For the 2008 ca	llendar year, or tax year beginning $9/01/08$ , and ending $8/31/09$			· -
В	heck if applicable	Please C Name of organization ASSOCIATION OF NJ RIFLE & PIS	TOL	) Empl	oyer identification number
$\mathbf{X}$	Address change	use IRS CLUBS, INC.	i	-	•
ॅ.	Name change	label or print or Doing Business As		22-	-1911024
$\vdash$	· ·		Room/suite E		none number
_ ∐ '	nitial return	See 203 MAIN STREET	397		
_ [] 1	Termination	Specific City or town, state or country, and ZIP + 4		Gross reco	eipts \$ 697,873
	Amended return	tions. FLEMINGTON NJ 08822	F	o Gloss leve	<u> </u>
$\equiv$		F Name and address of principal officer		i(a) le thie	a group return for
□ ′	Application pending	Traine and address of principal efficient	1.		
			[ F	affiliat I <b>(b)</b> Are al	affiliates
				ınclud	
_		us X 501(c) ( 7 ) ◀ (insert no ) 4947(a)(1) or 527		Iĭ ⁻No,	* attach a list (see instructions)
	Tax-exempt statu	us  X  501(c) ( / ) ◀ (insert no )   4947(a)(1) or   527 WWW . ANJRPC . ORG			
					exemption number
	Type of organization		ar of formation 19	30	M State of legal domicile NJ
		ummary			
	_	escribe the organization's mission or most significant activities			
9		ASSOCIATION IS THE OFFICIAL NRA STATE ASSOCIATION IN			SE IS
au		SUPPORT & DEFEND THE CONSTITUTIONAL RIGTHS OF PEOPLE T	ro keep &	BEAR	
er.	ARMS	s			
Activities & Governance	<ol><li>Check th</li></ol>	his box 🕨 🔲 if the organization discontinued its operations or disposed of more than 25%	of its assets		
85	3 Number	of voting members of the governing body (Part VI, line 1a)		3	39
es	4 Number	of independent voting members of the governing body (Part VI, line 1b)		4	39
viti	5 Total nu	mber of employees (Part V, line 2a)		5	1
cti	6 Total nu	mber of volunteers (estimate if necessary)		6	
•		oss unrelated business revenue from Part VIII, line 12, column (C)		7a	40,633
	_	elated business taxable income from Form 990-T, line 34		7b	19,655
			Prior Year	1.2	Current Year
	8 Contribu	itions and grants (Part VIII, line 1h)	32	,500	43,454
Revenue	9 Program	n service revenue (Part VIII, line 2g)		083	644,855
ě.	_	ent income (Part VIII, column (A), lines 3, 4, and 7d)		405	7,031
æ		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		536	2,533
		venue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		, 524	697,873
		and similar amounts paid (Earl X) comm. (A), lines 1-3)		050	9,550
	14 Renefits	paid to or for members (Part IX, column (A)) line (1)		, 000	<u> </u>
		, other compensation, employee benefits (PartOX, column (A), lines 5–10)	86	009	120,788
Expenses	15 Calaries	onal fundraising fees (Bartix, Column (A), line 11a)	00,	, 002	120,700
ğ	h Total fun	ndraising expenses (Part IX, column (D) line 25x			***************************************
, ii			F 1 0		476 056
		openses (Part IX, colump (A) Fires 11a 11d, 11f-24f)	518		476,956
<u>-</u> _		penses Add lines 13 17 (must equal Part IX, column (A), line 25)	606,		607,294
7.U II.	19 Revenue	e less expenses Subtract line 18 from line 12		243	90,579
_ 5 5 5	20 Tak-1	note (Part V. line 16)	Beginning of Yo		End of Year
Asse Bala		sets (Part X, line 16)	824,		912,458
2 e		bilities (Part X, line 26)		635	1,049
두드립		ets or fund balances Subtract line 21 from line 20	820,	830	911,409
√ Pi		ignature Block			
$\odot$	Un	nder penalties of perjury, I declare that I have examined this return frictioning accompanying schedules and s d belief flys true, correct, and form sets Declaration of preparer former man officer) is based on all informati	statements, and to	the best of	f my knowledge
<u> I</u>	an	d belief for struct, correct, and compete bedaration of preparer correct, and onlicer) is based on all informati	ion of which prepar	er nas any	Knowredge
Sig	n   📐	WILLEAN IN WATURED AD			2/20/4910
₹Her	e 🖊	Stonature of officer		Date	/ /
ري ر		PROSSELLO IBEA	SUZER	· 	
$\mathcal{L}$		Type or print name and title			
		Date Date	Check if		Preparer's identifying number
Pai	a 1	eparer's CHARLES DE MEOLA, CPA 01/26/	self_		(see instructions)
Pre	parer's				P00002622
	Only Fir	ms name (or yours	LLC	EIN	<b>▶</b> 20-3164128
	ı fs	self-employed),  33 SICOMAC RD STE 301		Phone	072 004 000
		dress, and ZIP+4 NORTH HALEDON, NJ 07508-2954		no 🕨	973-221-9990
Mari	the IDC discuss	se this return with the preparer shown above? (see instructions)			1 1 1 1

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

om 990 (2008) ASSOCIATION OF NJ RIFLE & PISTOL 22-1911024		Page 2
Part III Statement of Program Service Accomplishments (see instructions)		
1 Briefly describe the organization's mission THE ASSOCIATION IS THE OFFICIAL NRA STATE ASSOCIATION IN NJ. THE TO SUPPORT & DEFEND THE CONSTITUTIONAL RIGTHS OF PEOPLE TO KEEP ARMS. SEE SCHEDULE O FOR ADDITIONAL INFORMATION		IS
2 Did the organization undertake any significant program services during the year which were not listed on		
the prior Form 990 or 990-EZ?	Yes	X No
If "Yes," describe these new services on Schedule O		_
3 Did the organization cease conducting, or make significant changes in how it conducts, any program		
services?	Yes	X No
If "Yes," describe these changes on Schedule O.		
4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses		
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and		
allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a (Code ) (Expenses \$ 94,096 including grants of \$ ) (Revenue \$ DISSEMINATE NEWSLTTER TO MEMBERS TO PROMOTE MEMBERSHIP ACTIVITES AND EDUCATE THE PUBLIC		)
Ab (Code ) (Expenses \$ 53,235 including grants of \$ ) (Revenue \$ ADVISE MEMBERS ON LEGISLATIVE ACTIONS THROUGH PRINT MEDIA, NEWSLETTES AND WEB SITE		)
4c (Code ) (Expenses \$ 14,415 including grants of \$ ) (Revenue \$ PROVIDE FIREARMS TRAINING TO MEMBERS AND OTHER GUESTS		
4d Other program services (Describe in Schedule O )		
(Expenses \$ 365,659 including grants of \$ 9,550 ) (Revenue \$		
4e Total program service expenses ► \$ 527, 405 (Must equal Part IX, Line 25, column (B))		
	Form <b>99</b>	<b>0</b> (2008)

Part IV	Checklist of Required Schedules
Faitle	Oncornist of Regulied Ochedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	<del></del> _	X
2	is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			.,
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
_	Schedule C, Part II	4		_
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	5		
_	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III			
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
•	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		Χ
0	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Χ
1	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VIII, IX, or X as applicable	11	Χ	
2	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		Χ
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			.,
_	business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		X
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4.		Х
_	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Λ.
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
7	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
8	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
9	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
0	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
:1	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
2	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
3	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J .	23	Χ	
4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		ŀ	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b-24d and complete Schedule K If "No," go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		1	
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	∤	·
5a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	25a		
<b>.</b>	with a disqualified person during the year? If "Yes," complete Schedule L, Part I  Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified	23a		
b	person from a prior year? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	]	Χ
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or		i	
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
			000	

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		X
þ	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			1
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	·		
	III, IV, and V, line 1	34		_ X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		X

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable			İ
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			ĺ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		Х
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a	Χ	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Χ	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			l
	account)?	4a		X
b	If "Yes," enter the name of the foreign country			ĺ
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			į
	and Financial Accounts			İ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			
	Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or			ļ
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than			
	\$75?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
_	benefit contract?	7e		<u>X</u>
Ť	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	<u></u>		37
	required?  Section 504(a)(2) and other appropriate argumentations maintaining denote adviced funds and section.	7h		<u>X</u>
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?		- 1	
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	8		
	Did the organization make any taxable distributions under section 4966?	9a	ŀ	
a h	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	-+	—
ь 10	Section 501(c)(7) organizations. Enter	30		
	Initiation fees and capital contributions included on Part VIII, line 12	1		
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  18, 425		l	
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	- 1		
a h	Gross income from other sources (Do not net amounts due or paid to other sources against			
b	amounts due or received from them)			
I2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	İ	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	·±a		
	1 14M	1	<u></u> Ł	*********

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			 		
					Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the	е				
	circumstances, processes, or changes in Schedule O. See instructions	i				
1a	Enter the number of voting members of the governing body	1a	39			
ь	Enter the number of voting members that are independent	1b	39	 1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship will	h	•••	 1		
-	any other officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direction	ect				
•	supervision of officers, directors or trustees, or key employees to a management company or other perso			3		х
4	Did the organization make any significant changes to its organizational documents since the prior Form 9		s filed?	4		X X X
5	Did the organization become aware during the year of a material diversion of the organization's assets?			5		X
6	Does the organization have members or stockholders?			6	X	<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	ere		۲		
, a	of the governing body?	.10		7a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons	?		7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			, <u>, , , , , , , , , , , , , , , , , , </u>		
Ū	the year by the following	9				
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	X	_
9a	Does the organization have local chapters, branches, or affiliates?			9a	- 23	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters.	ore		Ja.		
D	affiliates, and branches to ensure their operations are consistent with those of the organization?	ers,		9b		
10	· · · · · · · · · · · · · · · · · · ·	ations		90		_
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organize must describe in Schedule O the process, if any, the organization uses to review the Form 990	auurs		10		Х
11	· · · · · · · · · · · · · · · · · · ·	ad at		10		
''	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reach the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	eu ai		11		Х
500	tion B. Policies					
<u> </u>	tion B. Foncies			 	Yes	NI-
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	res	No X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	10		120		
	rise to conflicts?	•6		12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	,		120		
·	describe in Schedule O how this is done			12c		
13	Does the organization have a written whistleblower policy?			13		Y
14	Does the organization have a written document retention and destruction policy?			14		X
15	Did the process for determining compensation of the following persons include a review and approval by			"		···
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and de	cicion.				
а	The organization's CEO, Executive Director, or top management official?	Cision		450	Х	
b	Other officers or key employees of the organization?			15a	X	
D	Describe the process in Schedule O (see instructions)			15b		
46-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
16a	with a taxable entity during the year?			40-		v
	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			16a		<u>X</u>
b		ard.				
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safegua	iiu			Ī	
<u></u>	the organization's exempt status with respect to such arrangements?			 16b		
	tion C. Disclosure			 		
17 10	List the states with which a copy of this Form 990 is required to be filed NONE  Section 6104 requires on graphization to make its Form 1023 (or 1024 if applicable), 990, and 990 T (601	(0)/2)-	onke			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501	( <i>U)</i> (3)S	only)			
	available for public inspection. Indicate how you make these available. Check all that apply					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	ct of inf	terest			
	policy, and financial statements available to the public					
20	State the name, physical address, and telephone number of the person who possesses the books and rec		of the			
	organization ▶ JUDITH IORIO 203 MAIN STR		2022			
F	LEMINGTON N	J 08	8822	 		

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees; and former such persons

X Check this box if the or	ganization did not compe	ensate	any d	office	er, dı	recto	r, tru	stee, or key employee		······································
(A)	(B) Average	Posi	tion (d	(C		nat ap	nlv)	(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per week	or director		Officer				compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
		ļ						0	0	0
DOCED DILLIAN	СШОМ	_						0	0	0
ROGER BILLIN TRUSTEE	1 1	X						o	0	0
JOHN HEALEY	-	1,,								
TRUSTEE	11	X						0	O <sub>:</sub>	0
		_			<u></u> ,			0	0	0
					ļ	_		0	0	. 0
								0	0	0
								0	0	0
								0	0	0
								0	0	0
ANTHONY ALAM REGIONAL VP	PI 1			Х				0	0	0
DAVID BOLAND REGIONAL VP	1			Х				0	0	0
LAWRENCE BRA	ICO 1			Х				0	0	0
MATT CARMEL REGIONAL VP	1			Х				0	0	0
LISA MARIE C REGIONAL VP	ASO 1			Х				0	0	0
KATHY CHATTE REGIONAL VP				Х				0	0	0
MICHAEL CUTE REGIONAL VP				X				0	0	0

Part VII , Section A	A. Officers, Directors, Trus	tees	, Ke	y En	plo	yees	, an	d Highest Compensated E	mployees (continued)						
, (A)	(B)	D	4.a.m /		C)	nat ap		(D) (E)				( <b>F</b> )			
Name and title	Average hours per week	or director	<del>,                                    </del>	Officer	Key employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	i	Estima amour othe compens from from organiza and rel organiza	nt of er sation the ation lated			
ROBERT ESCH															
REGIONAL VP	1	<u> </u>	<u> </u>	X	-		_	0	0	ļ			0		
EUGENE FUSCO REGIONAL VP	1			X				0	0				0		
JOHN GEMMILI	±	<del> </del>		1											
REGIONAL VP	1		L	Х				. 0	0				0		
TED GUIS	1														
REGIONAL VP JOHN HEALEY	<u> </u>	-	<del> </del>	Х				0	0	ļ			0		
REGIONAL VP	1			X				0	o				0		
ALLAN JOHNSC	N			1											
REGIONAL VP	11		<u> </u>	X				0	0				0		
CAROL KATONA REGIONAL VP	1			\ \ \ '									0		
DAVE LANGE	<u> </u>			Х				0	0				0		
REGIONAL VP	1			Х				0	0				0		
FRANK SEVEAN															
CUST OFFICER	5			Х		<u> </u>		0	0	<u> </u>			0		
ROBERT MADDO REGIONAL VP	X 1			Х				0	0				0		
TAMMIE MADDO	X			^					0						
REGIONAL VP	1			Х				0	0				0		
JERRY MARTIN															
REGIONAL VP EVAN NAPPEN	1			Χ				0	0			·	0		
REGIONAL VP	1			х				0	0	ı			0		
1b Total							<b></b>								
	viduals (including those in 1	a) wł	no re	ceive	ed m	ore t	han	\$100,000 in reportable com	pensation from the						
organization ▶ 0								<del></del>	·····						
employee on line 1a <sup>2</sup> 4 For any individual list the organization and individual 5 Did any person listed		le J i repo er th	for su ortab an \$1 mpe	uch ii le co 150,0 nsati	ndıvı mpe 100? on fr	dual nsati If "Y	on a es,"	and other compensation fron complete Schedule J for su unrelated organization for			3 4 5	Yes	X		
Section B. Independent												1			
Complete this table for compensation from the compensation from the compensation from the compensation from the compensation from the compensation from the complete this table for complete this table for complete this table for compensation from the complete this table for compensation from the compens	he organization	sate	d ind	leper	nden	t con	trac	tors that received more than	· · ·						
	(A) Name and business address							Descript	(B) on of services		Соп	(C) npensat	00n		
								<del>-</del> 1							
							-	<del>-</del>		$\neg +$					
		<u> </u>							<u>.</u>						
									<del></del>				<b></b> ,		
	pendent contractors (include	ng th	nose	ın 1)	who	rec	eive	d more than \$100,000 in	· · · · · · · · · · · · · · · · · · ·		<del></del>		.,		
compensation from the	he organization										0	990	(2008)		

_	rt V		WITTHE &	110101	_22 1311024		Page 9
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1a	Federated campaigns 1a					072,070,01014
Contributions, gifts, grants and other similar amounts	ь	Membership dues 1b				1	
g,	С	Fundraising events 1c					
ar a	d	Related organizations 1d				1	
s, c	e	Government grants (contributions) 1e					
roi	f	All other contributions, gifts, grants,					
the the		and similar amounts not included above	43,454		1		
d tri	a	Noncash contributions included in lines 1a-1f \$					
ဝမ	h	Total. Add lines 1a–1f	▶	43,454			
ē			Busn. Code				
en	2a	ANNUAL & LIFE MEMBERSHIP		391,013	391,013		
Rev	ь	ANNUAL & LIFE MEMBERSHIP		205,568	205,568		
ce	c	GUEST FEES	713990	18,425	200,000	18,425	<u> </u>
erv	ď	NEWSLETTER ADVERTISING	511110	15,177		15,177	
E S	e	TRAINING	011111	14,672			14,672
Program Service Revenue	_	All other program service revenue	<del> </del>	21,0,2			11,012
Pro		Total. Add lines 2a–2f	<b>•</b>	644,855			
	3	Investment income (including dividends, interes		0.17,000			
		other similar amounts)	<b>•</b>	7,031	ļ	7,031	
	4	Income from investment of tax-exempt bond pr	·			, , , , , , , ,	
	5	Royalties	•				<del></del>
	ľ	·	Personal				
	6a	Gross Rents			1		
	ь	Less rental exps			1	j	
	C	Rental inc or (loss)				į	
	d	Net rental income or (loss)	<b>•</b>		ĺ		
	7a	Gross amount from (i) Securities (ii	) Other				······································
		sales of assets other than inventory					
	b	Less cost or other				1	
		basis & sales exps				l	
	С	Gain or (loss)					
	d	Net gain or (loss)	<b>•</b>				
	8a	Gross income from fundraising events					
9		(not including \$					
len.		of contributions reported on line 1c)					
Rev		See Part IV, line 18					
Other Revenue	b	Less direct expenses b			ŀ		
₹	С	Net income or (loss) from fundraising events	•				
	9a	Gross income from gaming activities.	"				
		See Part IV, line 19 a					
	b	Less direct expenses b					
	С	Net income or (loss) from gaming activities	<b>&gt;</b>				
	10a	Gross sales of inventory, less					
		returns and allowances a					
	ь	Less cost of goods sold b					
	С	Net income or (loss) from sales of inventory	<b>&gt;</b>				
		Miscellaneous Revenue	Busn. Code				
	11a	OTHER INCOME		1,639	1,639		
	b	COMPETITIONS		794			794
	С	NRA MISCELLANEOUS INCOME		100	100		
	d	All other revenue					
	е	Total. Add lines 11a-11d	<b>•</b>	2,533			
	12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d	d, 8c,				_ <del>_</del>
		9c, 10c, and 11e	<u> </u>	697,873	598,320	40,633	15,466
							Form 990 (2008)

Form 990 (2008)

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).											
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses							
1	Grants and other assistance to governments and			-								
•	organizations in the U.S. See Part IV, line 21	6,550	6,550									
2	Grants and other assistance to individuals in											
_	the U.S. See Part IV, line 22	3,000	3,000									
3	Grants and other assistance to governments,											
·	organizations, and individuals outside the											
	U.S. See Part IV, lines 15 and 16											
А	Benefits paid to or for members											
5	Compensation of current officers, directors,											
•	trustees, and key employees											
6	Compensation not included above, to disqualified				<del></del>							
0	•											
	persons (as defined under section 4958(f)(1)) and											
	persons described in section 4958(c)(3)(B)	78,695	70 605									
7	Other salaries and wages	/0,033	78,695									
8	Pension plan contributions (include section 401(k)											
_	and section 403(b) employer contributions)	0 575	0 - 7 -									
9	Other employee benefits	9,575 32,518	9,575									
10	Payroll taxes	32,518	32,518	+								
11	Fees for services (non-employees)											
a	Management	10 100	12.050	4 0 4 0								
b	Legal	18,195	13,252	4,943								
С	Accounting	5,600	2,600	3,000								
ď	Lobbying	42,153	42,153									
е	Professional fundraising services. See Part IV, line 17			<del></del>	<del></del>							
f	Investment management fees	10 015	4000		<del></del>							
g	Other	18,947	18,947		<del></del>							
12	Advertising and promotion	67,285	67 <b>,</b> 285		<u></u>							
13	Office expenses	14,389		14,389								
14	Information technology											
15	Royalties											
16	Occupancy	47,322	47,322		<u> </u>							
17	Travel .	3,777	1,627	2,150								
18	Payments of travel or entertainment expenses											
	for any federal, state, or local public officials											
19	Conferences, conventions, and meetings	14,722	14,722									
20	Interest											
21	Payments to affiliates											
22	Depreciation, depletion, and amortization	24,761	24,761									
23	Insurance	25,733	20,973	4,760								
	İ											
24	Other expenses Itemize expenses not		1									
	covered above (Expenses grouped together											
	and labeled miscellaneous may not exceed											
	5% of total expenses shown on line 25 below)				···							
а	EUIP RENTAL & MAINTENANCE	31,261	11,146	20,115								
b	RANGE EXPENSE	22,011	22,011									
С	CAMP PERRY	15,528	15,528									
d	NEWSLETTER EDITING	15,018	15,018		<del></del>							
е	AMMO, TARGETS, CLAYS	14,498	14,498									
f	All other expenses	95,756	65,224	30,532	<del></del>							
25	Total functional expenses. Add lines 1 through 24f	607,294	527,405	79,889								
26	Joint Costs. Check here			, , , , , ,								
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and											
	fundraising solicitation	L	<u> </u>		5 900 (*****							
DAA					222							

P;	art X	Balance Sheet		·		<del></del>						
	•				(A) Beginning of year			(B End of				
	1	Cash—non-interest bearing			58,494	1			49,	096		
	2	Savings and temporary cash investments			364,468	2			46,			
	3	Pledges and grants receivable, net			3							
	4	Accounts receivable, net				4						
	5	Receivables from current and former officers, directors, tru	ustees.	kev								
		employees, or other related parties. Complete Part II of Sc		5								
	6	Receivables from other disqualified persons (as defined up						************	***********			
		4958(f)(1)) and persons described in section 4958(c)(3)(B										
		Part II of Schedule L			6							
S	7	Notes and loans receivable, net		_		7						
Assets	8	Inventories for sale or use			8							
188	9	Prepaid expenses and deferred charges			1,400	9			1.	730		
٩		Land, buildings, and equipment cost basis	10a	1,268,180	1,400	<u> </u>						
			IVa	1,200,100								
	D	Less accumulated depreciation Complete	10b	853,354	400,103	10c		Λ	14,	826		
	44	Part VI of Schedule D	100	033,334	400,103				14,	020		
	11	Investments—publicly traded securities	-		11							
	12	Investments—other securities See Part IV, line 11	-		12							
	13	Investments—program-related. See Part IV line 11	-		13							
	14	Intangible assets	-		14							
	15	Other assets. See Part IV, line 11	<u> </u> -	024 465	15			1 2	4 E O			
_	16	Total assets. Add lines 1 through 15 (must equal line 34)			824,465 3,635	16		9	<u>12,</u>			
	17	Accounts payable and accrued expenses	3,033	17			_⊥,	049				
	18	Grants payable	-		18							
	19	Deferred revenue	-		19							
S	20	Tax-exempt bond liabilities		_		20						
tie	21	Escrow account liability Complete Part IV of Schedule D		ļ	·····	21						
Liabilities	22	Payables to current and former officers, directors, trustees	-									
iat		employees, highest compensated employees, and disqual										
_		persons Complete Part II of Schedule L.	<u> </u>		22							
	23	Secured mortgages and notes payable to unrelated third p	-		23							
	24	Unsecured notes and loans payable	-	-	24							
	25	Other liabilities Complete Part X of Schedule D		-	0.605	25						
	26	Total liabilities. Add lines 17 through 25	<del></del>		3,635	26			1,	<u>049</u>		
nces		Organizations that follow SFAS 117, check here ▶	and									
ınc		complete lines 27 through 29, and lines 33 and 34.		•								
Balar	27	Unrestricted net assets		ļ		27						
В	28	Temporarily restricted net assets		-		28						
or Fund	29	Permanently restricted net assets		<del>.</del>		29						
Fu		Organizations that do not follow SFAS 117, check here	e ▶ ∑									
or		and complete lines 30 through 34.										
ţ	30	Capital stock or trust principal, or current funds		<u>į                                    </u>		30						
Se	31	Paid-in or capital surplus, or land, building, or equipment for	und	<u> </u>		31						
Net Assets	32	Retained earnings, endowment, accumulated income, or o	other fu	nds	820,830	32			11,			
et	33	Total net assets or fund balances		<u> </u> _	<u>820,830</u>				11,			
_	34	Total liabilities and net assets/fund balances			824,465	34		<u>9</u> :	12,	<u>458</u>		
P:	art )	Financial Statements and Reporting								-		
									Yes	No		
1		• • • • • • • • • • • • • • • • • • • •	ash	Accrual Oth						;		
<b>2</b> a		ere the organization's financial statements compiled or revie	?		ļ	2a		X				
b	We	ere the organization's financial statements audited by an ind	epende	nt accountant?				2b		X		
c	: If "	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of										
	the	e audit, review, or compilation of its financial statements and	d select	ion of an independent accou	ntant?		ļ	2c				
3a	As	a result of a federal award, was the organization required to	under	go an audit or audits as set f	orth in			ĺ	Ţ			
	the	Single Audit Act and OMB Circular A-133?						3a		<u>X</u>		
b	f "	Yes," did the organization undergo the required audit or aud	lits?					3b				

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047
2008
Open to Public Inspection

Name of the organization

Employer identification number

	SSOCIATION OF NJ RIFLE & PISTOL			. identification has	iibei
	LUBS, INC.		22-1	911024	
	rt I Organizations Maintaining Donor Advised Fund				<del></del>
ГФ	the organization answered "Yes" to Form 990, P		ounts.	Complete ii	
	and digamization anomated 100 to 10111 coo, 1	(a) Donor advised funds	(b)	Funds and other ac	
_	Total aumhor at and of upon	(a) Donor advised failes	(5)	, t undo und Other ac	Counts
1	Total number at end of year			· · · · · · · · · · · · · · · · ·	
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in writing that the			П.,	Π
	funds are the organization's property, subject to the organization's exclus	_		∐ Yes	∐ No
6	Did the organization inform all grantees, donors, and donor advisors in wr	iting that grant funds may be			
	used only for charitable purposes and not for the benefit of the donor or d	onor advisor or other			
	impermissible private benefit?			Yes	No
Pa	rt II Conservation Easements. Complete if the orga		990, P	art IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check al	I that apply)			
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically impor	tant land	d area	
	Protection of natural habitat	Preservation of certified historic stru	cture		
	Preservation of open space				
2	Complete lines 2a-2d if the organization held a qualified conservation cor	tribution in the form of a conservation easer	nent		
	on the last day of the tax year				
				Held at the End	of the Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
С	Number of conservation easements on a certified historic structure include	ed ın (a)	2c		
d	Number of conservation easements included in (c) acquired after 8/17/06	. ,	2d		
3	Number of conservation easements modified, transferred, released, exting	guished, or terminated by the organization d	uring		
	the taxable year	, ,			
4	Number of states where property subject to conservation easement is loc	ated <b>&gt;</b>			
5	Does the organization have a written policy regarding the periodic monitor				
•	enforcement of the conservation easements it holds?	g,p		Yes	□ No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing	easements during the year			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing eas	· · · · · · · · · · · · · · · · · · ·		· <del></del>	
8	Does each conservation easement reported on line 2(d) above satisfy the			<del></del>	
٠	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	requirements of section		Yes	□ No
9	In Part XIV, describe how the organization reports conservation easemen	ts in its rayanila and expense statement, an	4		
9	balance sheet, and include, if applicable, the text of the footnote to the organization	·			
	the organization's accounting for conservation easements.	janization 3 intancial statements that describ			
Pa	rt III Organizations Maintaining Collections of Art, H	istorical Treasures or Other Sim	ilar As	esets	
	Complete if the organization answered "Yes" to		nai Ac	35013.	
				<del></del>	<del></del>
4	If the organization elected, as permitted under SFAS 116, not to report in	to revenue atatament and balance about we	de of		
ıa	art, historical treasures, or other similar assets held for public exhibition, e			_	
	provide, in Part XIV, the text of the footnote to its financial statements that	•	C SCI VICE	<b>z</b> ,	
	provide, in Part XIV, the text of the roothole to its infancial statements that	describes triese items			
_	If the assessment on closed an accompleted under SEAS 416 to report in its	overvie statement and belease about wedge	af at		
D	If the organization elected, as permitted under SFAS 116, to report in its re				
	historical treasures, or other similar assets held for public exhibition, educ	ation, or research in furtherance of public se	ivice,		
	provide the following amounts relating to these items:			•	
	(i) Revenues included in Form 990, Part VIII, line 1		•	*	
	(ii) Assets included in Form 990, Part X		. •	\$ <b></b>	
2	If the organization received or held works of art, historical treasures, or other		he		
	following amounts required to be reported under SFAS 116 relating to the	se items			
а	Revenues included in Form 990, Part VIII, line 1		•	<b>\$</b>	
þ	Assets included in Form 990, Part X		<b>&gt;</b>	\$	

<u>Sche</u>	dule D (Form 990) 2008 ASSOCIATI	ON OF NO KIET	E & PISTOI		011024	Page 2
Pá	rt III Organizations Maintaining	Collections of Art, H	<u>listorical Treasi</u>	ures, or Other S	imilar Assets	(continued)
3	Using the organization's accession and other items (check all that apply).	records, check any of the fo	ollowing that are a sig	gnificant use of its col	lection	-
а	Public exhibition	d Loan o	or exchange program	ns		
b	Scholarly research	e Other	• •			
С	Preservation for future generations					
4	Provide a description of the organization's coll Part XIV	ections and explain how the	ey further the organiz	ation's exempt purpo	ose in	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to				Г	Yes No
Pa	rt IV Trust, Escrow and Custodi				ed "Yes" to For	
	Part IV, line 9, or reported a					555,
1a	Is the organization an agent, trustee, custodial			<del></del>		
	included on Form 990, Part X?	Tor other intermediary for e	onanbations of outer	assets not	Г	Yes No
h	If "Yes," explain the arrangement in Part XIV a	nd complete the following to	ablo		L	_ 162
U	ii res, explain the arrangement in ratt XIV a	nd complete the following to	aule			Amount
_	Pograping halance				10	Amount
	Beginning balance				1c	
	Additions during the year				1d	<del> </del>
е	Distributions during the year				1e	
f	Ending balance				[ 1f ]	<del></del>
	Did the organization include an amount on For	m 990, Part X, line 21?			L	」Yes □ No
	If "Yes," explain the arrangement in Part XIV					
Pa	rt V Endowment Funds. Comp		swered "Yes" to	Form 990, Par	t IV, line 10.	
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance					
b	Contributions		***************************************			
С	Investment earnings or losses					
d	Grants or scholarships					,
е	Other expenditures for facilities					
	and programs					
f	Administrative expenses					
g	End of year balance					
2	Provide the estimated percentage of the year	end balance held as		-		<u> </u>
а	Board designated or quasi-endowment	%				
b	Permanent endowment ▶ %					
c	Term endowment ▶ %					
3a	Are there endowment funds not in the possess	ion of the organization that	are held and adminu	stered for the		
-	organization by	non or the organization that	are ricia and damini	stered for the		Yes No
	(i) unrelated organizations					3a(i)
	(ii) related organizations					
L	If "Yes" to 3a(ii), are the related organizations	ietad se raquirad an Sahadi	ulo P2			3a(ii)
						3b
4	Describe in Part XIV the intended uses of the cart VI Investments—Land, Building			Dort V line 10		
<u>ra</u>				·		
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or oth basis (other)	','	preciation	(d) Book value
		(wiscontieur)				10 10
	Land			,400	450 500	18,400
	Buildings		547	, 978	452,530	<u>95,448</u>
	Leasehold improvements		<del> </del>			
	Equipment				303,580	73 <b>,</b> 895
	Other	<u></u>	<del></del>	, 327	97,244	227,083
Total	. Add lines 1a-1e (Column (d) should equal Fo	rm 990, Part X, column (B),	, line 10(c) )		<b>D</b>	414,826

Part VII Investments—Other Securities. See Form 990		22-1911024	Page 3
(a) Description of security or category	(b) Book value	(c) Method o	f valuation
(including name of security)	(.,	Cost or end-of-year	
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
			<del></del>
		<u> </u>	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		<u>L</u>	
Part VIII Investments—Program Related. See Form 990			
(a) Description of investment type	(b) Book value	(c) Method of	
	<del> </del>	Cost or end-of-yea	ar market value
<del></del>	<del> </del>		
	ļ		<del></del>
		<del> </del>	<del></del>
<del></del>	ļ		
<del></del>	<del>                                     </del>		
<del></del>	<del> </del>	<u> </u>	
	<del> </del>	<del> </del>	<del></del>
<del></del>	<del></del>		<del></del>
	†		<del></del>
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13)	<del> </del>		
Part IX Other Assets. See Form 990, Part X, line 15.	<del></del>	<u> </u>	<u> </u>
(a) Description	<del></del>		(b) Book value
	·		
	<del></del>		
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<del></del>			
	<del></del>		
Total. (Column (b) should equal Form 990, Part X, col (B) line 15)	<del> </del>	<u></u>	
Part X Other Liabilities. See Form 990, Part X, line 25		[	· · · · · · · · · · · · · · · · · · ·
(a) Description of liability	(b) Amount	{	
Federal income taxes	<del></del>	`	
	<del> </del>		,
	<del> </del>		
	<del> </del>	· ·	
	<del> </del>		
		ţ	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25 )			
In Part XIV, provide the text of the footnote to the organization's financial staten	nents that reports the organ	ization's liability for	<u> </u>
uncertain tax positions under FIN 48		• • • •	

	dule D (Form 990) 2008 ASSOCIATION OF NJ RIFLE & PISTOL 22-19110?	24	Page 4
Pa	tt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	 <del> </del>
7	Pnor period adjustments .	7	
8	Other (Describe in Part XIV)	8_	
9	Total adjustments (net) Add lines 4-8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	<u></u>
Pa	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu	rn	
1	Total revenue, gains, and other support per audited financial statements	1_1_	' 
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	}	
а	Net unrealized gains on investments	_	
b	Donated services and use of facilities 2b		
С	Recoveries of prior year grants 2c	4	
đ	Other (Describe in Part XIV)	4	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	}	
а	Investment expenses not included on Form 990, Part VIII, line 7b	- 1	
b	Other (Describe in Part XIV)	-	
	Add lines 4a and 4b	4c 5	
<u>5</u>	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)  rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Re	للتلك	
1	<del>"""""""""""""""""""""""""""""""""""""</del>	1	<del></del>
2	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25	<del>                                     </del>	
a	Donated services and use of facilities 23	}	
	Prior year adjustments 2b	1 !	
	Losses reported on Form 990, Part IX, line 25	†	
	Other (Describe in Part XIV)	1 1	
	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		<del></del>
а	Investment expenses not included on Form 990, Part VIII, line 7b	1 1	
	Other (Describe in Part XIV)  4b	1 1	
	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	
	rt XIV Supplemental Information		
omp	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b		
nd 2	b, Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b		
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.ANJRPC Schedule D (F	opm 990) 2008 ASSOCIATION OF NJ RIFLE & PISTOL	22-1911024	Page <b>5</b>
Part XIV	Supplemental Information (continued)		
<b>-</b>			
<b>-</b>			
- <b></b>			
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Part I

#### SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ASSOCIATION OF NJ RIFLE & PISTOL CLUBS, INC.

**Questions Regarding Compensation** 

Employer identification number 22-1911024

Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e g, maid, chauffeur, chef) b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a a Receive a severance payment or change of control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5a b Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of. The organization? 6a Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III. 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2008

22-1911024

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed. Schedule J (Form 990) 2008 ASSOCIATION OF NJ RIFLE & PISTOL Part II Officers, Directors. Trustees. Key Fmnlovees and Higherton

Page 2.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

	(B) Breakdown		compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(ı)+(D)	reported in prior Form 990 or Form 990-EZ
MICHAEL CUTRERA (0)	0	0	0	0	0	0 0	
MARILYN LAPIDUS (0)			0		0 0	0 0	0 0
PETER HEFFERAN (0)	All the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of t		0		0	0 0	00
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Schedule J (Form 990) 2008

Schedule J (Form 990) 2008 ASSOCIATION OF NJ RIFLE & PISTOL 22–1911024

Part III Supplemental Information
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information.

ANJRPC

#### SCHEDULE J-2 (Form 990)

#### **Continuation Sheet for Form 990**

OMB No 1545-0047

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Department of the Treasury Internal Revenue Service Name of the Organization

ASSOCIATION OF NJ RIFLE & PISTOL CLUBS, INC.

Employer Identification number 22-1911024

Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Part I

Employ	ees									
(A)	(B)			-	C)			(D)	(E)	(F)
Name and Title	Average hours per week				_	hat ap		Reportable compensation	Reportable compensation	Estimated amount of
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	me.	from the	from related organizations	other
	1	Stor to	lional	_	횽	yee st cor	Ξ,	organization	(W-2/1099-MISC)	compensation from the
		uster	trust		8	npen		(W-2/1099-MISC)		organization and related
		"	ee			sater				organizations
						_				
JOHN NICOLAI					<del></del>	ł				
REGIONAL VP	1			Х				0	0	0
WILLIAM O'NEI	L, JR			71		1				
REGIONAL VP	1			Х				o	0	0
MANDY OTERO						1 -	_			<u>~</u>
REGIONAL VP	1			Х		1 :		0	0	0
JOHN PATERSON										
REGIONAL VP	1			Χ				0	0	0
STEPHEN POTTS										
REGIONAL VP	11			X	<u> </u>			0	0	0
CHRIS QUINN					ĺ	j				
REGIONAL VP	1			X	<u> </u>			0	0	0
PAUL RAYNOLDS	I .				l					_
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GEORGE SHIVER				3.7						^
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ROBERT VIDEN REGIONAL VP	JR 1			Х				o	0	_
CHRIS WYMAN	<u> </u>				├	╁				0
REGIONAL VP	1			Х				o	0	0
CARL LEISINGE									0	0
REGIONAL VP	1			Х				ol	0	0
SCOTT L BACH										<u>_</u>
PRESIDENT	5			Х				l ol	0:	0
	SELLO									
EXECUTIVE VP	5			Χ				0	0	
JUDITH IORIO										· · · · · · · · · · · · · · · · · · ·
RECORD SEC	5			Χ				0	0	0
JEFFREY DOREM		]				1				
CORRESP SEC	5			X		L		0	0	0
PETER HEFFERA										
TREASURER	5	$\vdash$		Χ		$\vdash$		0	0	0
HENRY UIGA	1			v						
REGIONAL VP	<u>_</u>	┝╌╢		Χ		╁─┤		0	0	0
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TREASURER MARILYN LAPID	IIIS	$\vdash$				$\vdash$	Λ	<u> </u>	U	0
REGIONAL VP	103						Х	ol	0	^
PETER HEFFERA	N	$\vdash$					17			0
REGIONAL VP							Х	o	o	0
PAUL COSENZA		$\vdash$					41			
REGIONAL VP							Χ	ol	0	0
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For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2008

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ANJRPC	SCHE	(Form

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.

► Attach to Form 990.

OMB No 1545-0047

2008 Open to Public Inspection

Name of the	Name of the organization ASSOCIATION OF NJ RIFLE & PISTOL	RIFLE & PI	STOL			Employer	Employer identification number	ıer	
Parti		Assistance				77	1 70 1 1		
1 Does the s 2 Desc	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ne amount of the grantee?	rants or as	sistance, the grantees' in the United States	eligibility for the grant	s or assistance, an	0	X Yes	8
l ett	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	vernments an ecipient that residential () if additional (	d Organ eceived is space is	Organizations in the United States. Complete if the organization answered "Yes" on seived more than \$5,000. Check this box if no one recipient received more than \$5,00 oace is needed	ited States. Com Check this box	plete if the org if no one recip	ganization ansi ient received n	wered "Yes" on nore than \$5,000. Us	
-	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(d) Amount of cash grant (e) Amount of non-cash (f) Method of valuation (book, FMV, appraisal, assistance other)	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
2 Enter	Enter total number of section 501(c)(3) and government organizations	organizations						•	

3 Enter total number of other organizations
For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Schedule I (Form 990) 2008

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Page 2

Schedule I	Schedule I (Form 990) 2008 ASSOCIATION OF NJ RIFLE &	OF NJ RIFLE	PISTOL	22-1911024		Page 2
Part	Grants and Other Assistance to Individuals in the	to Individuals in the	e United States. Co	mplete if the organiza	United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.	orm 990, Part IV, line 22.
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	omplete this part to I	provide the informa	tion required in Part I,	line 2, and any other add	tional information.

DAA .

#### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

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#### Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

ASSOCIATION OF NJ RIFLE & PISTOL CLUBS, INC.

Employer identification number 22-1911024

FORM 990, PART III, LINE 4D - ALL OTHER ACHIEVEMENTS

PROVIDE A RANGE FOR MEMBERS TO USE THEIR FIREARMS, TO

RECEIVE TRAINING, PROVIDE A PLACE FOR COMPETITIONS AND

SPECIAL EVENTS FOR LOCAL ORGANIZATIONS

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS

THERE ARE TWO CLASSES OF GENERAL MEMBERSHIP. THOSE MEMBERS WITH RANGE

PRIVILEGES AND THOSES MEMBERS WITHOUT RANGE PRIVILEGES.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS

ALL MEMBERS RECEIVE A BALLOT AND HAVE THE RIGHT TO CAST A VOTE TO ELECT

OFFICERS

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS NO DECISIONS ARE SUBJECT TO THE APPROVAL OF THE MEMBERS

FORM 990, PART VI, LINE 10 - ORGANIZATION'S PROCESS USED TO REVIEW FORM 990 A COPY OF THE RETURN HAS NOT BEEN PROVIDED IN PRIOR YEARS TO THE GOVERNING BODY PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE. THE ANNUAL MEETING WAS HELD PRIOR TO THE COMPLETION OF THE FORM 990. THE OFFICERS WILL CONSIDER THIS PRIOR TO NEXT YEAR FILING REQUIREMENT.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE ORGANIZATION'S CEO, OR TOP MANAGEMENT OFFICIALS ARE NOT COMPENSATED

Name of the organization

ASSOCIATION OF NJ RIFLE & PISTOL

Employer identification number 22-1911024

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
NO OFFICERS OR KEY EMPLOYEES ARE COMPENSATED

SCHEDULE O - ADDITIONAL INFORMATION
FORM 990, PART III THE ORGANIZTION'S MISSION:

THE MISSION OF THE ASSOCIATION IS TO COORDINATE THE INTERESTS OF ALL RIFLE, PISTOL AND SHOOTING CLUBS IN NEW JERSEY, TO PROMOTE AND SPONSOR CHAMPIONSHIP COMPETITIONS, TO SUPPORT AND PROMOTE ALL OTHER FIREARM ACTIVITIES, TO PROMOTE, ORGANIZE AND CONDUCT FIREARM ACTIVITIES, TO PROMOTE, ORGANIZE AND CONDUCT FIREARM TRAINING AND ENCOURAGE INTEREST IN PARTICIPATION IN FIREARM ACTIVITIES.

FORM 990, PART VI, SECTION B POLICIES

WRITTEN CONFLICT OF INTEREST POLICY

THE ASSOCIATION DOES NOT CURRENTLY HAVE A WRITTEN CONFLICT OF INTEREST POLICY BUT WILL CONSIDER ADOPTING A POLICY NEXT YEAR. HOWEVER, THE OFFICERS OF THE ORGANIZATION ARE CLOSELY INVOLVED IN DAY TO DAY MANAGEMENT, AND WOULD BE AWARE OF CONFLICT OF INTEREST AND WOULD ADDRESS THEM IF THEY EXISTED. TO DATE, NONE EXIST.

WRITTEN WHISTLEBLOWER POLICY

THE ASSOCIATION DOES NOT CURRENTLY HAVE A WRITTEN WHISTLEBLOWER POLICY BUT WILL CONSIDER ADOPTING A POLICY NEXT YEAR.

ASSOCIATION OF NJ RIFLE & PISTOL

Employer identification number 22-1911024

WRITTEN DOCUMENT RETENTION AND DESTRUCTION POLICY

THE ASSOCIATION DOES NOT CURRENTLY HAVE A WRITTEN RETENTION AND DESTRUCTION POLICY BUT GENERALLY FOLLOWS IRS AND STATE OF NJ GUIDELINES REGARDING RETAINING ACCOUNTING, TAX AND PAYROLL RECORDS. THE ORGANIZATION WILL CONSIDER ADOPTING A POLICY NEXT YEAR.

ANJREC						
Form 990		Special Ever	nts Schedule			2008
	For calendar year 2008, or tax	year beginning	9/01/08 , and e	ending 8/3	31/09	
Name ASSOCIATION CLUBS, INC.	N OF NJ RIFLE & P	STOL			Employer ide	ntification Number
Gross receipts Less contributions Gross revenue Less direct expenses Net income (loss)	(A) 4,381 0 4,381	(B) 0 0 0 0 0	(c) 0 0 0 0	Others	0 0 0 0 0	Total 4,381 0 4,381 3,587 794
Description (A) (B) (C) Other	s					

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4562 om

Department of the Treasury Internal Revenue Service

#### **Depreciation and Amortization**

(Including Information on Listed Property)

See separate instructions. Attach to your tax return.

2008

Attachment Sequence No. 67

OMB No 1545-0172

Name(s) shown on return

ASSOCIATION OF NJ RIFLE & PISTOL

Identifying number 22-1911024

CLUBS, INC. Business or activity to which this form relates INDIRECT DEPRECIATION 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. 250,000 1 Maximum amount. See the instructions for a higher limit for certain businesses. 2 2 Total cost of section 179 property placed in service (see instructions) 800,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 5 5 (b) Cost (business use only) (c) Elected cost (a) Description of property 6 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 R 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 13 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions. Part II 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 24.761 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Part III Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2008 17 0 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 2008 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (business/investment use (a) Classification of property year placed in (e) Convention (f) Method (g) Depreciation deduction penod service only-see instructions) 19a 3-year property h 5-year property 7-year property d 10-year property 15-year property 20-year property g 25-year property 25 yrs S/I h Residential rental 27 5 yrs. S/L мм property 27 5 yrs ММ S/L MM Nonresidential real 39 yrs S/L property MM S/L Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs S/L 40-year ММ S/L 40 yrs C Part IV Summary (See instructions.) 21 Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 24,761 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instr 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

Form **4562** 

Department of the Treasury Internal Revenue Service

Name(s) shown on return

#### **Depreciation and Amortization**

(including information on Listed Property)

See separate instructions.

ASSOCIATION OF NJ RIFLE & PISTOL

Attach to your tax return.

OMB No 1545-0172 2008

Identifying number

achment 67

22-1911024 CLUBS, INC. Business or activity to which this form relates INDIRECT DEPRECIATION 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. 250,000 Maximum amount. See the instructions for a higher limit for certain businesses. 2 2 Total cost of section 179 property placed in service (see instructions) 800,000 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions 5 (c) Elected cost (a) Description of property (b) Cost (business use only) 6 7 Listed property Enter the amount from line 29 7 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 10 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 13 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election 15 24,761 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions.) 17 17 MACRS deductions for assets placed in service in tax years beginning before 2008 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 2008 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (f) Method (e) Convention (g) Depreciation deduction (a) Classification of property year placed in (business/investment use period only-see instructions) service 19a 3-year property 5-year property 7-year property 10-year property e 15-year property 20-year property S/L 25-year property 25 yrs. S/L Residential rental 27 5 vrs. MM property 27 5 yrs. MM S/L Nonresidential real MM S/L 39 yrs. property S/L MM Section C-Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life 12-year 12 yrs S/L b S/L MM 40-year 40 yrs Summary (See instructions.) Part IV 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. 22 24,761 Enter here and on the appropriate lines of your return Partnerships and S corporations-see instr. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs