

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-EZ**

2009

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)

Sponsonng organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form
The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

Open to Public Inspection

Depa	artment o	f the Treasury nue Service	assets less than \$1,250,000 at the end of the year may use this form The organization may have to use a copy of this return to satisfy state reporting requirements.		Inspection
			ear, or tax year beginning , and ending		
_		applicable Plea		D Emp	loyer identification number
	Address	change use	1		,
	Name ch	labe prin	TI Canital Area Sportsmen League	38	-1618102
	Initial ret	urn type	. Number and street (or P O box, if mail is not delivered to street address) Room/suite		phone number
Ш	Termina	tion See	7534 Old River Trail		7-627-8645
Ц	Amende		uc- City or town, state or country, and ZIP + 4		up Exemption
		on pending tio n		Nun	
	• Sec		ganizations and 4947(a)(1) nonexempt charitable trusts must attach G Accounting		X Cash Accrual
_	Mahait	e: N/A	completed Schedule A (Form 990 or 990-EZ). Other (specify) H Check ▶		e organization is not
١.		empt status (check o	required to	attach Sch	edule B (Form 990,
<u>у</u> К	Check		e organization is not a section 509(a)(3) supporting organization and its gross receipts are norma		
			0 return is not required, but if the organization chooses to file a return, be sure to file a complete r		
L			ine 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ	▶ \$	99,000
	art I	Revenue	Expenses, and Changes in Net Assets or Fund Balances (See the instru	ıctions	for Part I.)
	1	Contributions, gifts	grants, and similar amounts received	1	
	2	Program service	revenue including government fees and contracts	2	68,572
	3	Membership du	s and assessments See Statement 1	3	28,720
	4	Investment inco	1 1	4	1,552
	5a		om sale of assets other than inventory		
	Ь		er basis and sales expenses	5c	
•	ي ا	· · ·	sale of assets other than inventory (Subtract line 5b from line 5a) activities (complete applicable parts of Schedule G). If any amount is from gaming, check here	30	
Revenue	6	•	not including \$ of contributions		
Š	a	reported on line			
Œ	ь	•	enses other than fundraising expenses 6b		
	C		pss) from special events and activities (Subtract line 6b from line 6a)	6c_	
D)	7a	•	eventory, less returns and allowances 7a		
20%	b	Less. cost of go	ods sold 7b		
	С		oss) from sales of inventory (Subtract line 7b from line 7a)	7c	
S	8		describe ▶ See Statement 2) 8	156
<u> </u>	9		Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	99,000
	10		ar amounts paid (attach schedule)	10	
=	11	Benefits paid to		11	1,556
Ş,Ç	12		ompensation, and employee benefits	12	2,565
∄통	13		s and other payments to independent contractors . S MAY & 3 2010	14	38,831
	14 15	• •	tions, postage, and shipping	15	164
€ _	16		(describe - See Statement 3 ORDEN UT) 16	58,046
	17		. Add lines 10 through 16	17	101,162
** <u>**</u>	18		it) for the year (Subtract line 17 from line 9)	18	-2,162
S)	19		nd balances at beginning of year (from line 27, column (A)) (must agree with		
Ass	i	end-of-year figu	re reported on prior year's return)	19	353,836
Net Assets	20	=	n net assets or fund balances (attach explanation)	20	251 674
	21		nd balances at end of year. Combine lines 18 through 20	21	351,674
<u>. F</u>	art II	<u>Balance</u>	Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of		
			(See the instructions for Part II.) (A) Beginning of year streets 92,83		(B) End of year 94,026
		savings, and inve	166,30		166,309
23		nd buildings	▶ See Statement 4) 104,30		114,161
24		assets (describe	363,44	_	374,496
25 26		issets iabilities (descrit		10 26	22,822
26			Inces (line 27 of column (B) must agree with line 21) 353, 83		351,674
			work Reduction Act Notice, see the separate instructions.		Form 990-EZ (2009)
DA		,	•		スな

DAA

Form 990-EZ (2009) Capital Area Sportsmen League		-1618102			Page 2
Part III Statement of Program Service Accomplishments (S	ee the instructi	ons for Part III	l.)	•	penses
What is the organization's primary exempt purpose?			ı	(Required f	
Provide Sport Services					ind 501(c)(4)
Describe what was achieved in carrying out the organization's exempt purposes. In a cl		_		=	ns and section
manner, describe the services provided, the number of persons benefited, or other rele	vant information for				trusts; optional
each program title				for others)	<u> </u>
28 Trap and Skeet Club - Provides recreational target shooting facilities for club members and the public.	•	•	•		
smooting ratificies for time memorals and the public.					
(Grants \$) If this amount includes foreign grants, che	ck here	▶ .	\Box 2	8a	
29 Archery Club provides outdoor and indoor archery		· ·	' '		
facilities for members and public use.	• • •				
(Grants \$) If this amount includes foreign grants, chec	k here	<u> </u>	2	9a	
30 Sporting Clays Club provides target shooting for members					
and public					
			۔ ا ب		
(Grants \$) If this amount includes foreign grants, che	ck here		1 3	0a	<u> </u>
31 Other program services (attach schedule) See Statement 6 (Grants \$) If this amount includes foreign grants, checking the statement of the	 ok here		;, .	1a	
(Grants \$) If this amount includes foreign grants, ched 32 Total program service expenses (add lines 28a through 31a)	ak nere			12	
Part IV List of Officers, Directors, Trustees, and Key Employees. List each	one even if not co	mpensated. (See t			Part IV)
	(b) Title and average	(c) Compensation	(d) Co	ntributions to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0)		benefit plans & compensation	account and other allowances
George Allen DeWitt	President				
1224 Longspur MI 48820	1.00	0	<u> </u>	0	0
James Schoenherr Lansing	Vice Pres.				
2116 Barstow MI 48906	1.00	0	 	0	0
David Schroeder Grand Ledge	Secretary	_	,	_ \	_
14460 Bauer Rd MI 48837	1.00	0	<u> </u>	0	0
Donald Page Lansing	Treasurer 2.00				_
423 Roundtop MI 48917	2.00	<u>_</u>	<u> </u>		
•					
			T -		
			<u> </u>		
			1		
	· · · · · · · · · · · · · · · · · · ·		<u> </u>		
			 		
· · · · · · · · · · · · · · · · · · ·			1		
	<u> </u>		<u> </u>		
			ļ		
			 -		
			 		
•					
			<u> </u>		

Form 990-EZ (2009)

	1990-EZ (2009) Capital Area Sportsmen League 38-16				age 3
Pa	Other Information (Note the statement requirements in the instructions for	r Part V.)			
				Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed			i	
	description of each activity	• •	33	<u> </u>	X
34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of	of	1		
	the changes		34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but r	not reported			l
_	on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.	•	ŀ	Ì	Ť
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		250	x	
b	If "Yes," has it filed a tax return on Form 990-T for this year?		35a 35b	X	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets		330		
••	during the year? If "Yes," complete applicable parts of Schedule N		36		x
37a			100		<u> </u>
b	Did the organization file Form 1120-POL for this year?		37b	Ì	x
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or w	ere			
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?		38a	Ì	x
b		8b			
39	Section 501(c)(7) organizations. Enter:		7		Ī
а	Initiation fees and capital contributions included on line 9	9a	_]		Ī
b	Gross receipts, included on line 9, for public use of club facilities	9ь 75	<u>0</u>		I
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under.				
	section 4911 ▶				
ь	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess ber	nefit			ŧ
	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified				
	person in a prior year, and that the transaction has not been reported on any of the organization's prior				
	Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		40b	ļ	<u> </u>
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on				Ī
	organization managers or disqualified persons during the year under sections 4912,				Ī
	4955, and 4958				•
a	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c	_		ļ	Ī
•	reimbursed by the organization All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter				İ
е	transaction? If "Yes," complete Form 8886-T		40e		X
41	List the states with which a copy of this return is filed None	•	400	<u> </u>	1 41
42a	The organization's books are in care of Capital Area Sportsmen Le	Telephone no. ▶ 51	7-62	7 - 8	645
	7534 Old River Trail		•. • -	• • • •	
	Located at ▶ Lansing, MI	ZIP+4 ▶ 48	917		
b	At any time duning the calendar year, did the organization have an interest in or a signature or other authori	ty			
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	•		Yes	No
	account)?		42b		X
	If "Yes," enter the name of the foreign country:	·			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Ban	k			
	and Financial Accounts.				•
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?		42c	<u> </u>	X
	If "Yes," enter the name of the foreign country:				
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here				
	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 43			
			F	Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			l	
4-	Form 990-EZ		44	├─	X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?	Iī		l	v
	"Yes," Form 990 must be completed instead of Form 990-EZ		45 Form 99	<u> </u>	X

Form	990-EZ (2009) Capital Area Sportsmen League	38	3-1618102			_Page 4
Par	t VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt				
	501(c)(3) organizations and section 4947(a)(1) none	xempt charitable	e trusts must a	ınswer questior	ıs 46-49	9b
	and complete the tables for lines 50 and 51.					
	Did the organization engage in direct or indirect political campaign activities on	behalf of or in oppos	ition to		\Y	es No
	candidates for public office? If "Yes," complete Schedule C, Part I	•			46	
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule				47	
48	Is the organization operating a school as described in section $170(b)(1)(A)(ii)$?		hedule E	•	48	-
49a	Did the organization make any transfers to an exempt non-charitable related or	ganization?			49a	
b					49b	Ш
50	Complete this table for the organization's five highest compensated employees					
	employees) who each received more than \$100,000 of compensation from the			ne." (d) Contributions to	(a) E	
	(a) Name and address of each employee paid more than \$100,000	hours per week devoted to position	(c) Compensation	employee benefit plans & deferred compensation		
		derouse to pessesti		delation components	00.07 0	
						<u>.</u>
	Total number of other employees paid over \$100,000		l			
	\$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		Type of service	(c) (Compensati	00
	(a) Name and address of each independent contractor paid more than \$100,000	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	, Type or sorvice	(0)	- Politoca	
-	· · · · · · · · · · · · · · · · · · ·					<u>_</u>
d	Total number of other independent contractors each receiving over \$100,000	. •				
Sigr	Under penalties of penury, I declare that have examined this return, including and belief, it is true, correct and complete. Declaration of preparer (other than	accompanying schedule officer) is based on all ii	nformation of which pr	d to the best of my knowle	owledge dge	
Here		N.	Date	•		
	Preparer's	Date	Check if self-	Preparer's Ider	ntifying Numb	er (See instr)
Paid	· · · · · · · · · · · · · · · · · · ·	05/0	6/10 serr- employed I	▶□ P0035	2426	
Pre	parer's Firm's name (or yours Hantz, McGarry & Asso					84760
	Only f self-employed), 516 S Creyts Rd Ste I			Phone		
	address, and ZIP+4 Lansing, MI 48917-82			-	7-321	-4333
May	the IRS discuss this return with the preparer shown above? See instructions .			>	Yes	No
				F	orm 990 -	EZ (2009)

Name(s) shown on return

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

► See separate instructions.

► Attach to your tax return

Identifying number Capital Area Sportsmen League 38-1618102 Business or activity to which this form relates Indirect Depreciation **Election To Expense Certain Property Under Section 179** Part I 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 Total cost of section 179 property placed in service (see instructions) 2 2 800,000 3 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 (a) Description of property (b) Cost (business use only) (c) Elected cost Listed property Enter the amount from line 29 7 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 9 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.) 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 Other depreciation (including ACRS) 16 143 MACRS Depreciation (Do not include listed property.) (See instructions.) Part III MACRS deductions for assets placed in service in tax years beginning before 2009 0 17 17 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 2009 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction penod service only-see instructions) 19a 3-year property 5-year property 7-year property 10-year property 15-year property 20-year property 25 yrs 25-year property Residential rental S/L 27.5 yrs. MM property 27.5 yrs MM S/L MM Nonresidential real S/L 39 yrs. property ММ S/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System Class life 20a 12 yrs. S/L b 12-year S/L 40-year 40 yrs. MM Part IV Summary (See instructions.) 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. Enter here 143 and on the appropriate lines of your return. Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

CAPARE Capital Area Sportsmen League 38-1618102 Federal Statements

38-1618102

FYE: 12/31/2009

Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

Description		Amount
Membership Dues	\$	28,720
Total	\$_	28,720

Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description	Aı	mount
Pop Machine Revenue	\$	156
Total	\$	156

Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Expenses	\$
Advertising	1,633
Telephone	1,269
Interest Expense - Shotgun Sp	1,527
Insurance - Professional Liab	6,161
Less Amount Allocated to Rent	-68
Archery Paper Targets	2,329
Rifle Range Key Expense	504
Archery Shooting Expense	4,866
MYHEC & 4 H Shoot Expense	410
Shotgun Expense - Miscell	1,325
Shotgun Shells	972
Shotgun Clay Targets	17,825
Awards	341
Contributions	500
MI & National Sporting Cl	250
Maint. SG & RH	301
Maintenance - Archery Out	1,930
Maintenance - Equipment	896
Maintenance - Rifle Range	149
Membership Expense	653
Taxes - Property	11,341
Less Amount Alloc to Rent	-231
Utilities - Trash Removal	2,315
Website Expense	120
Bank Charges	56
Supplies - Office	435
NFAA Dues Archery	45
SVAA Archery Dues	20
Meals & Entertainment Exp	97
Miscellaneous Expense	75
Total	\$ 58,046

CAPARE Capital Area Sportsmen League
38-1618102 Federal Statements

FYE: 12/31/2009

5/6/2010 12:43 PM

Statement 4 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beginning of Year	 End of Year
Grants Receivable	\$	\$ 350
Inventories for Sale or Use		1,055
Machinery and Equipment	104,301	112,899
Less Accumulated Depreciation		 143
	104,301	 114,161

Statement 5 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	ginning Year	 End of Year
Unsecured Notes and Loans Payable Federal W/H Payable State W/H Payable	\$ 9,082 217 311	\$ 22,817
	 9,610	22,822

CAPARE Capital Area Sportsmen League
38-1618102 Federal Statements

FYE: 12/31/2009

38-1618102

5/6/2010 12:43 PM

Statement 6 - Form 990-EZ, Part III, Line 31 - Statement of Program Service Accomplishments

Description

Rifle and Pistol Club provides an outdoor range for membership use and conducts hunter safety and personal protection classes for the public.

CAPARE Capital Area Sportsmen League
38-1618102 Federal Asset Report Form 990, Page 1

05/06/2010 12:43 PM

FYĘ: 12/31/2009

<u>Asset</u>	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
1	<u>Depreciation:</u> Zero Turn Mower Machinery and Equipment Total Other Depreciation	11/05/09 1/01/09 -	8,598 104,301 112,899		-	8,598 104,301 112,899	10 MO S/L 0 Memo	0000	143 0 143
	Total ACRS and Other Depre	ciation =	112,899		=	112,899		0	143
	Grand Totals Less: Dispositions and Transf Less: Start-up/Org Expense Net Grand Totals	ers - =	112,899 0 0 112,899		-	112,899 0 0 112,899		0 0 0 0	143 0 0 143

CAPARE Capital Area Sportsmen League
38-1618102 Federal Asset Report

05/06/2010 12:43 PM

FYE: 12/31/2009

Rental - Facility

Asset	Description	Date I <u>n Service</u>	Cost	Bus 9	Sec 179Bonus	Basis for Depr	<u>PerCoi</u>	nv <u>Meth</u>	Prior	Current
Other Depreci 4 Land 5 Building		1/01/96 6/01/96 	37,810 128,499 166,309		- -	37,810 128,499 166,309	0 0	Land Memo	00000	0 0
	Total ACRS and Other Depre	ciation =	166,309		=	166,309			0	0
	Grand Totals Less: Dispositions and Transfi Less: Start-up/Org Expense Net Grand Totals	ers —	166,309 0 0 166,309		-	166,309 0 0 166,309			0 0 0	0 0 0 0

CAPARE Capital Area Sportsmen League 38-1618102 FYE: 12/31/2009	Federal Statements	tements		5/6/2010 12:43 PM
	Form 990-EZ, Part II, Line 23 - Land and Buildings	3 - Land and Buildings		
Description	Beginning of Year	Accumulated Depreciation	End of Year	Accumulated Depreciation
Buildings Land	\$ 128,499	₩.	\$ 37,810	\$
Total	\$ 166,309	\$	\$ 37,810	\$