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Short Form  
Return of Organization Exempt From Income Tax

2009

Open to Public  
Inspection

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

► Sponsoring 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

A For the 2009 calendar year, or tax year beginning , 2009, and ending

B Check if applicable	C Name of organization	D Employer identification number
Address change	ENID JOINT RECREATION TRIAD, INC.	73-1000111
Name change	Number and street (or P O box, if mail is not delivered to street address)	E Telephone number
Initial return	P. O. BOX 89	(580) 233-1000
Termination	City or town, state or country, and ZIP + 4	F Group Exemption Number . . . ►
Amended return	ENID, OK 73702	

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

G Accounting method  Cash  Accrual  
Other (specify) ►

I Website: ► WWW.EJRTSPORTS.COM

J Tax-exempt status (check only one)  501(c)(4) □ (insert no) 4947(a)(1) or 527

K Check ► if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ . . . ► \$ 204,802.

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

1 Contributions, gifts, grants, and similar amounts received . . . . .	1	35,000.
2 Program service revenue including government fees and contracts . . . . .	2	101,277.
3 Membership dues and assessments . . . . .	3	
4 Investment income . . . . .	4	630.
5 a Gross amount from sale of assets other than inventory . . . . .	5a	1,300.
b Less cost or other basis and sales expenses . . . . .	5b	1,028.
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	5c	272.
6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here . . . ►		
a Gross revenue (not including \$ _____ of contributions reported on line 1) . . . . .	6a	66,595.
b Less direct expenses other than fundraising expenses . . . . .	6b	58,153.
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . . .	6c	8,442.
7 a Gross sales of inventory, less returns and allowances . . . . .	7a	
b Less cost of goods sold . . . . .	7b	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	7c	
8 Other revenue (describe ► . . . . .)	8	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 . . . . .	9	145,621.
10 Grants and similar amounts paid (attach schedule) . . . . .	10	
11 Benefits paid to or for members . . . . .	11	
12 Salaries, other compensation, and employee benefits . . . . .	12	94,194.
13 Professional fees and other payments to independent contractors . . . . .	13	3,240.
14 Occupancy, rent, utilities, and maintenance . . . . .	14	13,690.
15 Printing, publications, postage, and shipping . . . . .	15	
16 Other expenses (describe ► . . . . .)	16	46,854.
17 Total expenses. Add lines 10 through 16 . . . . .	17	157,978.
18 Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	18	-12,357.
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .	19	148,162.
20 Other changes in net assets or fund balances (attach explanation) . . . . .	20	
21 Net assets or fund balances at end of year Combine lines 18 through 20 . . . . .	21	135,805.

## Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments . . . . .	76,206.	22 70,944.
23 Land and buildings . . . . .	71,956.	23 64,861.
24 Other assets (describe ► . . . . .)	24	
25 Total assets . . . . .	148,162.	25 135,805.
26 Total liabilities (describe ► . . . . .)	26	
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	148,162.	27 135,805.



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

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . . 33  X

34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of 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 not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T . . . . . 35a  X  
35b  X

a 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? . . . . . 36  X

b If "Yes," has it filed a tax return on Form 990-T for this year? . . . . . 37a  X

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . . 37b  X

37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a 38a  X

b Did the organization file Form 1120-POL for this year? . . . . . 38b  X

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? . . . . . 38a  X

b If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . . 39a  X  
39b  X

39 Section 501(c)(7) organizations. Enter . . . . . 40a  X

a Initiation fees and capital contributions included on line 9 . . . . . 40b  X

b Gross receipts, included on line 9, for public use of club facilities . . . . . 40c  X

40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► \_\_\_\_\_ ; section 4912 ► \_\_\_\_\_ , section 4955 ► \_\_\_\_\_ 40d  X

b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit 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 . . . . . 40e  X

c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . 40f  X

d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization . . . . . 40g  X

e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T . . . . . 40h  X

41 List the states with which a copy of this return is filed ► OK, 40i  X

42a The organization's books are in care of ► ENID JOINT RECREATION TRIAD Telephone no ► (580) 233-1000 Located at ► P.O. BOX 89 ENID, OK ZIP + 4 ► 73701 42b  X

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . . 42c  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 Bank and Financial Accounts. 42d  X

c At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . . 42e  X

If "Yes," enter the name of the foreign country ► \_\_\_\_\_ 42f  X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here. . . . . ► 43 42g  X

44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . . 44  X

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . . 45  X

**Part VI**

**Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

46	Yes	No
47		
48		
49a		
49b		

46 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 . . . . .

47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .

49a Did the organization make any transfers to an exempt non-charitable related organization? . . . . .

b If "Yes," was the related organization a section 527 organization? . . . . .

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

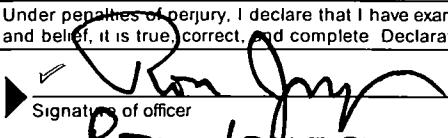
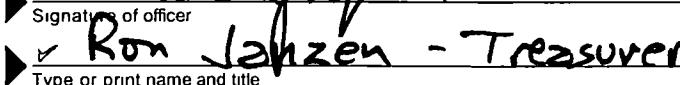
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

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

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

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

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

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
	Signature of officer	Date	
►  ►  ► 4/29/10			
Type or print name and title			
Paid Preparer's Use Only	Preparer's signature ► 	Date 4-28-10	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 ► BKD, LLP 205 W. MAPLE, STE 200 ENID, OK 73701-4026	Preparer's identifying number (See instructions) 900365539	
	EIN ► 44-0160260	Phone no ► 580-237-3300	

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

Form 990-EZ (2009)

## **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete If the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ      ► See separate instructions.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name of the organization

ENID JOINT RECREATION TRIAD, INC.

Employer identification number

**Part I** **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1 CONCESSIONS (event type)	(b) Event #2	(c) Other Events 0 (total number)	(d) Total events (add col (a) through col (c))
		(event type)	(total number)		
Revenue	1 Gross receipts . . . . .	64,045.			64,045.
	2 Less Charitable contributions . . . . .				
	3 Gross income (line 1 minus line 2) . . . . .	64,045.			64,045.
Direct Expenses	4 Cash prizes . . . . .				
	5 Noncash prizes . . . . .				
	6 Rent/facility costs . . . . .				
	7 Food and beverages . . . . .	28,602.			28,602.
	8 Entertainment . . . . .				
	9 Other direct expenses . . . . .	29,551.			29,551.
	10 Direct expense summary Add lines 4 through 9 in column (d) . . . . .				► ( 58,153.)
	11 Net income summary. Combine line 3, column (d), and line 10 . . . . .				► 5,892.

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue . . . . .				
Direct Expenses	2 Cash prizes . . . . .				
	3 Noncash prizes . . . . .				
	4 Rent/facility costs . . . . .				
	5 Other direct expenses . . . . .				
	6 Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d) . . . . .				► ( )
	8 Net gaming income summary Combine line 1, column d, and line 7 . . . . .				►

9 Enter the state(s) in which the organization operates gaming activities

a Is the organization licensed to operate gaming activities in each of these states? . . . . .

b If "No," explain

-----

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," explain

-----

11 Does the organization operate gaming activities with nonmembers? . . . . .

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . .

	Yes	No
9a		X
10a		X
11		X
12		X

13 Indicate the percentage of gaming activity operated in

a The organization's facility . . . . . 13a %  
 b An outside facility . . . . . 13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . .

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_

c If "Yes," enter name and address of the third party

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

16 Gaming manager information.

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided ► \_\_\_\_\_

Director/officer       Employee       Independent contractor

17 Mandatory distributions.

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . .

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$

	Yes	No
13a		
13b		
15a		X
17a		X

ATTACHMENT 1FORM 990EZ, PART I - INVESTMENT INCOME

<u>DESCRIPTION</u>	<u>AMOUNT</u>
INTEREST INCOME	630.
TOTAL	<u>630.</u>

ATTACHMENT 2FORM 990EZ, PART I - SPECIAL EVENTS AND ACTIVITIES

<u>DESCRIPTION</u>	<u>GROSS REVENUE</u>	<u>DIRECT EXPENSES</u>	<u>NET INCOME</u>
CONCESSIONS FUND RAISERS	64,045. 2,550.	58,153. 0.	5,892. 2,550.
TOTALS	<u><u>66,595.</u></u>	<u><u>58,153.</u></u>	<u><u>8,442.</u></u>

ATTACHMENT 3FORM 990EZ, PART I - OTHER EXPENSES

SUPPLIES	5,622.
ADVERTISING	1,682.
BANK FEES	84.
DEPRECIATION	15,358.
FEES & LICENSES	15.
INSURANCE	10,911.
TELEPHONE	1,143.
TROPHIES & AWARDS	7,279.
REGISTRATION FEES	4,760.
TOTAL	<u>46,854.</u>

ATTACHMENT 4FORM 990EZ, PART II - CASH, SAVINGS AND INVESTMENTS

<u>DESCRIPTION</u>	<u>BEGINNING OF YEAR</u>	<u>END OF YEAR</u>
CASH	4,317.	7,131.
SAVINGS	71,889.	63,813.
TOTALS	<u>76,206.</u>	<u>70,944.</u>

## FORM 990EZ, PART IV - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES

## ATTACHMENT 5

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION		CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT. AND OTHER ALLOWANCES
		0.	0.		
TROY ENMEIER 410 S. JACKSON ENID, OK 73701	PRESIDENT	0.	0.	0.	0.
RON JANZEN 2426 ROBIN RIDGE ENID, OK 73703	TREASURER	0.	0.	0.	0.
RAY FEIGHTNER 402 RIDGEWAY DRIVE ENID, OK 73703	DIRECTOR	0.	0.	0.	0.
MIKE DOTSON 218 N. TAFT ENID, OK 73703	DIRECTOR	0.	0.	0.	0.
BILL PETERS 1920 HURON STREET ENID, OK 73703	DIRECTOR	0.	0.	0.	0.
L.D. RAPP 3007 BARN SWALLOW RD ENID, OK 73703	SECRETARY	0.	0.	0.	0.
KIM BAUGH 1814 BUCKBOARD LN.	DIRECTOR	0.	0.	0.	0.

## FORM 990EZ, PART IV - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES

## ATTACHMENT 5 (CONT'D)

NAME AND ADDRESS  
SANDY MCCLAIN  
2059 LANTERN LANE  
ENID, OK 73701

TITLE AND AVERAGE  
HOURS PER WEEK  
DEVOTED TO POSITION  
DIRECTOR

ENID, OK 73703

SANDY MCCLAIN  
2059 LANTERN LANE  
ENID, OK 73701

COMPENSATION  
CONTRIBUTIONS  
TO EMPLOYEE  
BENEFIT PLANS  
EXPENSE ACCT.  
AND OTHER  
ALLOWANCES

RANDY MCCLENDON  
4609 SUNSHINE CIRCLE  
ENID, OK 73703

COMPENSATION  
DIRECTOR  
3,200.

BRIAN SKAGGS  
3833 ROCKWOOD  
ENID, OK 73703

COMPENSATION  
DIRECTOR  
0.

SCOTT CLEMENS  
4013 SHILOH AVE  
ENID, OK 73703

COMPENSATION  
DIRECTOR  
0.

ROBERT FAULK  
1118 E RANDOLPH  
ENID, OK 73701

COMPENSATION  
DIRECTOR  
0.

GRAND TOTALS

COMPENSATION  
3,200.

EXPENSE ACCT.  
0.

**Sales of Business Property**  
**(Also Involuntary Conversions and Recapture Amounts**  
**Under Sections 179 and 280F(b)(2))**

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

Name(s) shown on return

Identifying number

ENID JOINT RECREATION TRIAD, INC.

73-1000111

1 Enter the gross proceeds from sales or exchanges reported to you for 2009 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions) . . . . . 1

**Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year (see instructions)**

2	(a) Description of property	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
3	Gain, if any, from Form 4684, line 43 . . . . .						3
4	Section 1231 gain from installment sales from Form 6252, line 26 or 37 . . . . .						4
5	Section 1231 gain or (loss) from like-kind exchanges from Form 8824 . . . . .						5
6	Gain, if any, from line 32, from other than casualty or theft . . . . .						6
7	Combine lines 2 through 6 Enter the gain or (loss) here and on the appropriate line as follows . . . . .						7
8	Nonrecaptured net section 1231 losses from prior years (see instructions) . . . . .						8
9	Subtract line 8 from line 7 If zero or less, enter -0- If line 9 is zero, enter the gain from line 7 on line 12 below If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below						9

**Partnerships (except electing large partnerships) and S corporations.** Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9 Skip lines 8, 9, 11, and 12 below

**Individuals, partners, S corporation shareholders, and all others.** If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9 If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below

8	Nonrecaptured net section 1231 losses from prior years (see instructions) . . . . .	8
9	Subtract line 8 from line 7 If zero or less, enter -0- If line 9 is zero, enter the gain from line 7 on line 12 below If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions) . . . . .	9

**Part II Ordinary Gains and Losses (see instructions)**

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less)

11	Loss, if any, from line 7 . . . . .	11	( )
12	Gain, if any, from line 7 or amount from line 8, if applicable . . . . .	12	
13	Gain, if any, from line 31 . . . . .	13	272.
14	Net gain or (loss) from Form 4684, lines 35 and 42a . . . . .	14	
15	Ordinary gain from installment sales from Form 6252, line 25 or 36 . . . . .	15	
16	Ordinary gain or (loss) from like-kind exchanges from Form 8824 . . . . .	16	
17	Combine lines 10 through 16 . . . . .	17	272.
18	For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below For individual returns, complete lines a and b below		
a	If the loss on line 11 includes a loss from Form 4684, line 39, column (b)(ii), enter that part of the loss here Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23 Identify as from "Form 4797, line 18a" See instructions . . . . .	18a	
b	Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a Enter here and on Form 1040, line 14 . . . . .	18b	

For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2009)

**Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255**  
 (see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property			(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)
A TRAVELING SPRINKLERS			03/01/2006	11/02/2009
B				
C				
D				
These columns relate to the properties on lines 19A through 19D. ►			Property A	Property B
20 Gross sales price (Note: See line 1 before completing.)			20 1,300.	
21 Cost or other basis plus expense of sale . . . . .			21 2,158.	
22 Depreciation (or depletion) allowed or allowable . . . . .			22 1,130.	
23 Adjusted basis Subtract line 22 from line 21 . . . . .			23 1,028.	
24 Total gain Subtract line 23 from line 20 . . . . .			24 272.	
25 If section 1245 property:				
a Depreciation allowed or allowable from line 22 . . . . .			25a 1,130.	
b Enter the smaller of line 24 or 25a . . . . .			25b 272.	
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291				
a Additional depreciation after 1975 (see instructions)			26a	
b Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)			26b	
c Subtract line 26a from line 24 If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e			26c	
d Additional depreciation after 1969 and before 1976			26d	
e Enter the smaller of line 26c or 26d . . . . .			26e	
f Section 291 amount (corporations only) . . . . .			26f	
g Add lines 26b, 26e, and 26f . . . . .			26g	
27 If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership)				
a Soil, water, and land clearing expenses . . . . .			27a	
b Line 27a multiplied by applicable percentage (see instructions)			27b	
c Enter the smaller of line 24 or 27b . . . . .			27c	
28 If section 1254 property:				
a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion (see instructions) . . . . .			28a	
b Enter the smaller of line 24 or 28a . . . . .			28b	
29 If section 1255 property:				
a Applicable percentage of payments excluded from income under section 126 (see instructions) . . . . .			29a	
b Enter the smaller of line 24 or 29a (see instructions) . . . . .			29b	

**Summary of Part III Gains.** Complete property columns A through D through line 29b before going to line 30.

30 Total gains for all properties Add property columns A through D, line 24 . . . . .	30	272.
31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b Enter here and on line 13 . . . . .	31	272.
32 Subtract line 31 from line 30 Enter the portion from casualty or theft on Form 4684, line 37 Enter the portion from other than casualty or theft on Form 4797, line 6 . . . . .	32	

**Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less**  
 (see instructions)

	(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years . . . . .	33	
34 Recomputed depreciation (see instructions) . . . . .	34	
35 Recapture amount Subtract line 34 from line 33 See the instructions for where to report . . . . .	35	

## FYE: 12/31/2009

## Tax Comprehensive Depreciation

Asset	Property Description	Date In Service	Tax Cost	d	Tax-Meth Conv	Tax Period	Tax Credit Amount	Tax Bonus Amt	Tax Prior Depreciation	Tax Sec 179 Exp	Tax Current Depreciation	Tax End Depr	Tax Net Book Value		
<u>Location:</u>															
Group: 1823															
40	CROSSLIN STORAGE BUILDING	4/05/05	2,105	S/L-MM	390	0	0	200	0	54	254	1,851			
60	RELOCATING BUILDING FROM EHS TO	6/12/07	4,500	S/L-MO	150	0	0	475	0	300	775	3,725			
1823			<u>6,605</u>					<u>675</u>		<u>354</u>		<u>1,039</u>	<u>5,576</u>		
Group: 2823															
1	MISC FIELD EQUIPMENT	1/01/85	2,755	PRE-HY	50	0	0	2,755	0	0	0	2,755	0		
3	SCOREBOARD CABLE	3/31/86	432	PRE-HY	50	0	0	432	0	0	0	432	0		
8	LAWN MOWER	9/21/87	135	200DBHY	70	0	0	135	0	0	0	135	0		
9	TILLER	10/06/87	325	d	200DBHY	70	0	0	325	0	0	0	325	0	
10	POWER VAC/JACK	1/08/88	130	200DBHY	70	0	0	130	0	0	0	130	0		
11	PITCHING MACHINE	4/10/88	400	200DBHY	70	0	0	400	0	0	0	400	0		
12	11HP RIDING MOWER	4/13/88	350	200DBHY	70	0	0	350	0	0	0	350	0		
18	JOHN DEERE TRACTOR	1/13/95	13,649	150DBHY	70	0	0	13,649	0	0	0	13,649	0		
23	FIELD EQUIPMENT	9/20/01	1,156	200DBHY	70	0	0	1,156	0	0	0	1,156	0		
28	PITCHING MACHINE	6/17/02	1,325	200DBHY	70	0	0	1,266	0	59	1,225	0			
37	FENCE SAFETY TOPPER	4/21/05	1,838	S/L-MO	70	0	0	963	0	262	1,225	613			
38	PITCHING MACHINE	6/23/05	750	S/L-MO	70	0	0	375	0	107	482	268			
39	POWER WASHER	7/09/05	243	S/L-MO	70	0	0	121	0	35	156	87			
41	PA SYSTEM	6/29/05	774	S/L-MO	70	0	0	387	0	111	498	276			
42	BAGGER FOR GRASSHOPPER	8/29/05	1,879	S/L-MO	70	0	0	895	0	268	1,163	716			
43	FENCE TOPPER FOR SOUTH COMP	11/15/05	1,152	S/L-MO	70	0	0	521	0	165	686	466			
45	T-BALL FIELD CONCRETE	3/15/06	920	S/L-MO	150	0	0	174	0	61	235	685			
46	T-BALL DUGOUT	4/27/06	800	S/L-MO	150	0	0	142	0	54	196	604			
47	FENCE AT T-BALL FIELD	4/15/06	2,410	S/L-MO	150	0	0	442	0	160	602	1,808			
50	EZ UP TENTS	1/09/06	637	S/L-MO	70	0	0	273	0	91	364	273			
51	SCOREBOARDS	2/15/06	18,573	S/L-MO	70	0	0	7,739	0	2,653	10,392	8,181			
52	GATOR	5/22/06	5,195	S/L-MO	70	0	0	1,917	0	742	2,659	2,536			
53	WEED EATER	6/10/06	268	S/L-MO	70	0	0	99	0	38	137	131			
54	BB WATER REEL TRAVELING SPRINKL	3/01/06	6,473	S/L-MO	70	0	0	2,620	0	924	3,544	2,929			
55	PORTABLE PITCHER'S MOUND	2/23/06	1,631	S/L-MO	70	0	0	660	0	233	893	738			
56	DELL COMPUTER	2/23/06	451	S/L-MO	70	0	0	182	0	65	247	204			
57	PRINTER	2/23/06	200	S/L-MO	70	0	0	81	0	28	109	91			
59	LIGHTS- SOUTH FIELD	8/10/06	17,275	S/L-MO	150	0	0	2,783	0	1,152	3,935	13,340			
61	PITCHING MACHINES	4/20/07	2,320	S/L-MO	150	0	0	773	0	464	1,237	1,083			
64	TRACTOR TILLER	5/14/09	1,800	S/L-MO	50	0	0	0	0	240	240	1,560			
65	CHALKER	7/22/09	313	S/L-MO	50	0	0	0	0	26	26	287			
67	FB WATER REEL TRAVELING SPRINKL	3/01/06	2,158	d	S/L-MO	70	0	0	873	0	257	1,130	1,028		
2823	* Less: Dispositions and Transfers		88,717			0	0	0	42,618	0	8,195	50,813	37,904		
	Net 2823		2,483			0	0	0	1,198	0	0	1,455	1,028		
			86,234			0	0	0	41,420	0	8,195	49,358	36,876		
Group: 3823															
2	CONCESSION EQUIPMENT	1/01/85	1,680	PRE-HY	50	0	0	1,680	0	0	0	1,680	0		
4	MICROWAVE	5/04/86	99	PRE-HY	50	0	0	99	0	0	0	99	0		
5	BUILDING IMPROVEMENT	6/30/86	535	PRE-HY	50	0	0	535	0	0	0	535	0		
6	REFRIGERATOR	5/01/87	450	200DBHY	70	0	0	450	0	0	0	450	0		
7	SKEL ICE BIN	9/10/87	125	200DBHY	70	0	0	125	0	0	0	125	0		
13	POPCORN MACHINE	5/09/88	750	d	200DBHY	70	0	0	750	0	0	0	750	0	
14	AIR COND FOR CONCESS	7/14/88	527	200DBHY	70	0	0	527	0	0	0	527	0		
15	NACHO CHEESE MACHINE	5/02/90	174	200DBHY	50	0	0	174	0	0	0	174	0		
16	CART'S WROLLERS	2/08/91	135	200DBHY	50	0	0	135	0	0	0	135	0		
17	MICROWAVE	5/03/91	150	200DBHY	50	0	0	150	0	0	0	150	0		

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## Tax Comprehensive Depreciation

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Asset	Property Description	Date In Service	Tax Cost	tax d Conv	Tax Period	Tax Credit Amount	Tax Bonus Amt	Tax Prior Depreciation	Tax Sec 179 Exp	Tax Current Depreciation	Tax End Depr	Tax Net Book Value
Location:   Group: 3823 (continued)												
20	USED SLUSH MACHINE	3/24/98	1,500	200DBHY	70	0	0	1,500	0	0	1,500	0
22	CONCESSION EQUIPMENT	12/29/00	2,080	200DBHY	50	0	0	2,080	0	0	2,080	0
24	AIR CONDITIONER	4/30/02	566	200DBHY	50	0	0	566	0	0	566	0
25	MICROWAVE OVEN	4/30/02	160	200DBHY	50	0	0	160	0	0	160	0
27	HOT DOG MACHINE	5/07/02	287	200DBHY	50	0	0	287	0	0	287	0
32	TABLES	2/26/03	390	SL-HY	50	0	0	390	0	0	390	0
33	SNOW CONE MACHINE	4/28/03	945	SL-HY	50	0	0	945	0	0	945	0
35	5 CONCESSION TABLES	6/14/05	255	SL-MO	70	0	0	0	36	167	88	232
36	FREDRICH HEATING/COOLING UNIT	6/30/05	650	SL-MO	70	0	0	93	418	2,077	1,889	0
48	ICE MACHINE	4/20/06	3,966	SL-MO	70	0	0	566	2,077	0	1,060	0
63	POCORN MACHINE	6/28/09	1,178	SL-MO	50	0	0	0	118	118	118	1,060
<b>3823</b>	<b>*Less: Dispositions and Transfers</b>		<b>16,602</b>		<b>0</b>		<b>0</b>	<b>12,520</b>	<b>0</b>	<b>0</b>	<b>813</b>	<b>13,333</b>
	<b>Net 3823</b>		<b>15,852</b>		<b>0</b>		<b>0</b>	<b>750</b>	<b>0</b>	<b>0</b>	<b>750</b>	<b>0</b>
Group: 4823												
34	FOOTBALL EQUIPMENT	11/08/04	10,188	SL-MO	70	0	0	6,064	0	1,456	7,520	2,668
44	FOOTBALL UNIFORM PADS	12/15/05	3,013	SL-MO	70	0	0	1,327	0	431	1,758	1,255
49	FOOTBALL FIELD MOWER	5/24/06	4,299	SL-MO	70	0	0	1,587	0	614	2,201	2,098
58	AIR CONDITIONER -FB PROG	11/08/06	595	SL-MO	50	0	0	258	0	119	377	218
62	FOOTBALL SCOREBOARDS	9/24/08	8,600	SL-MO	50	0	0	430	0	1,720	2,150	6,450
66	FB FIELD SPRINKLER SYSTEM	5/22/09	6,000	SL-MO	150	0	0	0	0	233	233	5,767
<b>4823</b>			<b>32,695</b>		<b>0</b>		<b>0</b>	<b>9,666</b>	<b>0</b>	<b>4,573</b>	<b>14,239</b>	<b>18,456</b>
Group: 6823												
19	FRONT END LOADER	4/09/96	2,743	SL-HY	50	0	0	2,743	0	0	2,743	0
21	BUNKER RAKE	4/21/00	5,100	200DBHY	50	0	0	5,100	0	0	5,100	0
26	TILLER	4/29/02	812	200DBHY	70	0	0	775	0	37	812	0
29	MISC EQUIPMENT	6/25/02	399	200DBHY	70	0	0	381	0	18	399	0
30	GRASSHOPPER MOWER	6/25/03	9,367	SL-HY	70	0	0	7,360	0	1,338	8,698	669
31	PROTECTIVE EQUIPMENT	5/14/03	211	SL-HY	70	0	0	166	0	30	196	15
<b>6823</b>	<b>*Less: Dispositions and Transfers</b>		<b>18,632</b>		<b>0</b>		<b>0</b>	<b>16,525</b>	<b>0</b>	<b>0</b>	<b>1,423</b>	<b>17,948</b>
	<b>No Location</b>		<b>163,251</b>		<b>0</b>		<b>0</b>	<b>82,004</b>	<b>0</b>	<b>0</b>	<b>15,358</b>	<b>97,362</b>
	<b>Net No Location</b>		<b>3,233</b>		<b>0</b>		<b>0</b>	<b>1,948</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	<b>Grand Total</b>		<b>163,251</b>		<b>0</b>		<b>0</b>	<b>82,004</b>	<b>0</b>	<b>0</b>	<b>15,358</b>	<b>97,362</b>
	<b>Less: Dispositions and Transfers</b>		<b>3,233</b>		<b>0</b>		<b>0</b>	<b>1,948</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	<b>Net Grand Total</b>		<b>160,018</b>		<b>0</b>		<b>0</b>	<b>80,056</b>	<b>0</b>	<b>0</b>	<b>15,358</b>	<b>95,157</b>
	<b>Grand Total</b>		<b>160,018</b>		<b>0</b>		<b>0</b>	<b>80,056</b>	<b>0</b>	<b>0</b>	<b>15,358</b>	<b>64,861</b>