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#### Form 990-EZ

Short Form Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

2010

Department of the Treasury Internal Revenue Service

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the pear may use this form.

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

Open to Public

Inspection

OMB No 1545-1150

A For the 2010 calendar year, or tax year beginning , 2010, and ending B Check if C Name of organization D Employer Identification number VINDHAM-GORHAM ROD & GUN CLUB 01-6019724 Address change Room Name change Number & street (or P.O. box, if mail is not delivered to street addr.) E Telephone number Initial return 76 BURNHAM RD (207) 839-2586 Terminated City or town, state or country, and ZIP + 4 F Group Exemption Amended return Application GORHAM ME 04038 Number. . . ▶ Check X if organization is not required G Accounting Method X Cash Accrual Other (specify) ▶ to attach Schedule B (Form 990, 990-EZ, Website: ▶ N/A Tax-exempt status (check only one) -- | 501(c)(3) | X| 501(c)(7) | ◀ (insert no.) | 4947(a)(1) or | 527 or 990-PF). K Check ▶ If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return. Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts, if gross receipts are \$200,000 or more, or rf total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. . . . 28,366 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.) 282 Contributions, gifts, grants, and similar amounts received ..... 1 22,000 2 2 3 Membership dues and assessments ..... 3 2,917 4 138 Investment income . . . . . . . . . . . . . . . . . 5a Gross amount from sale of assets other than inventory Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c REVENUE Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than \$15,000) ....... of contributions **b** Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceed \$15,000)..... 3,029 Less: direct expenses from gaming and fundraising events . . . . . . 1.943 Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d 1,086 7a Gross sales of inventory, less returns and allowances ..... Less: cost of goods sold ..... SCANNED MAY Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)...... 7с Other revenue (describe in Schedule 0) ... RECEIVED ... 8 Total revenue. Add lines 1, 2, 3, 4, 5¢, 6d, 7c, and 8 9 26,423 27,513 10 10 ·O 11 11 EXPENSES Salaries, other compensation, and employee benefits . . . . 12 12 Professional fees and other payments to independent contractors .... 120 13 13 14 5,001 14 Occupancy, rent, utilities, and maintenance 15 60 15 Printing, publications, postage, and shipping..... 5,000 16 16 17 17 37,694 -11,271 18 Excess or (deficit) for the year (Subtract line 17 from line 9)..... 18 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with SSETS 19 69,531 end-of-year figure reported on prior year's return) Other changes in net assets or fund balances (explain in Schedule O)..... 20 20 Net assets or fund balances at end of year Combine lines 18 through 20..... 21 58,260

	rt II	Balance Sheets. (see th		•					
		Check if the organization use	d Schedu	ile O to respond to any c	question in th		nning of year	<del></del>	(B) End of year
22	Cash	n, savings, and investments					63,560	22	52,465
23		and buildings					5,971	23	5,795
24		er assets (describe in Schedule					3,75,2	24	
25						6	9,531	25	58,260
26	Tota	il Ilabilities (describe in Schedi					,	26	
27		assets or fund balances (line :				6	9,531	27	58,260
Pa	rt III	Statement of Progran	n Servi	ce Accomplishme	nts (see the	instructions	for Part III.)		Expenses
		Check if the organization use	ed Sched	ule O to respond to any	question in	this Part III .			uired for section 501(c)(3)
Wha	at is the	e organization's primary exempt	t purpose	7See attachm	ent #1				501(c)(4) organizations and ion 4947(a)(1) trusts, optional
Des	cribe w	vhat was achieved in carrying o	out the org	ganization's exempt purp	oses. In a cl	lear and con	cise manner,	for o	thers.)
	cribe th	ne services provided, the numb	er of pers	sons benefited, & other r	elevant infor	mation for e	ach program title.		
28									
		- A > 1	£ 41						
20	(Grants	S \$ ) II	this amo	ount includes foreign grain	nts, check no	ere	🕨 📗	28a	1
29				• • • • • • • • • • • • • • • • • • • •				1	
				<del></del>		·. ··. ·· · · · · · · · · · · · · · · ·			
	(Grants	e \$ \\	f this amo	ount includes foreign gra	nte check h			29a	
30	Caranic	, i	11113 60110	Tank molades foreign gra	ito, cricos in	ore		230	`
••						· <del></del>			
	(Grants	s\$ ) I	f this amo	ount includes foreign gra	nts, check he	ere		30a	1
31	Other	program services (describe in S							
	(Grants	s\$ )I	f this amo	ount includes foreign gra	nts, check h	ere	▶ 🗓	31a	1
		program service expenses (ad						32	
Pε	rt IV	•		<del>-</del>					
		Check if the organization us	ed Sched	F-1			T : :		(e) Expense
		(a) Name and address		<b>(b)</b> Title and average   hours per week		t pald,	(d) Contributions employee benefit p	lans &	account and
<u> </u>	A 21				i (If not	t pald, -0)		lans &	
Se	e at	(a) Name and address		` 'hours per week "	i (If not	t pald,	employee benefit p	lans &	account and
Se	e at			` 'hours per week "	i (If not	t pald,	employee benefit p	lans &	account and
Se	e at			` 'hours per week "	i (If not	t pald,	employee benefit p	lans &	account and
Se	e at			` 'hours per week "	i (If not	t pald,	employee benefit p	lans &	account and
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	e at			` 'hours per week "	i (If not	t pald,	employee benefit p	lans &	account and
	e at		-	` 'hours per week "	i (If not	t pald,	employee benefit p	lans &	account and
	e at			` 'hours per week "	i (If not	t pald,	employee benefit p	lans &	account and
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	Check if the organization used Schedule O to respond to any question in this Part V	<u></u>	1	]
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed			ا
	description of each activity in Schedule O	33	L	X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the			
	amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O			ا
	(see instructions)	34	<b> </b>	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, explain in Schedule O why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or			
	501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	$\square$	X
	If "Yes," has it filed a tax return on Form 990-T for this year (see instructions)?	35b		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	36		X
37a		_		l
b	Did the organization file Form 1120-POL for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			ĺ
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
Ь	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			ŧ
а	Initiation fees and capital contributions included on line 9	_	1	
b	Gross receipts, included on line 9, for public use of club facilities	_	1	l
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			ł
	section 4911 ▶; section 4912 ▶; section 4955 ▶		}	l
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction	1		•
	during the year, or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its			ļ
	prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		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			I
	4912, 4955, and 4958			Ī
đ	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c		1	1
	reimbursed by the organization			-
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter		1	1
	transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed. ▶ ME			
42a	The organization's books are in care of ▶ See attachment #3 Telephone no. ▶			
	Located at ► ZIP + 4 ►			
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		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 Bank			•
	and Financial Accounts.			1
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		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			_
	- · · · · · · · · · · · · · · · · · · ·		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of			<b></b>
	Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead			Ī
	of Form 990-EZ	44b	1 '	Īх
С	Did the organization receive any payments for indoor tanning services during the year?	44c		Х
d				
	Schedule O	44d	Ì '	X
			E7 //	

### 990 PRIMARY EXEMPT PURPOSE

Attachment 1: page 0 - 990-EZ Page 2, Part III

Open to Public Inspection For calendar year 2010 or tax period beginning , and ending

Name of Organization Employer Identification Number 01-6019724

#### Primary Purpose

ANNUALLY RAISES AND RELEASES APPROX 2,000 PHEASANTS IN CONJUNCTION WITH THE STATE OF MAINE PHEASANT PROGRAM. THIS PROGRAM ALLOWS PHEASANTS TO BE AVAILABLE IN THE WILD FOR HUNTERS, BIRDWATCHERS AND OTHERS WHO ENJOY THE OUTDOORS AND ALLOWS THE BIRDS TO CONTINUE TO MATURE AND MULTIPLY IN AREAS AROUND MAINE. ALSO WORKS ON EDUCATING YOUNGER HUNTERS AND PROMOTING GOOD HUNTING, FISHING & WILDLIFE PRACTICES FOR ALL AGES.

#### 990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 2: page 1 - 990-EZ Page 2, Part IV Open to Public Inspection For calendar year 2010 or tax period beginning and ending Name of Organization **Employer Identification Number** WINDHAM-GORHAM ROD & GUN CLUB 01-6019724 (E) Expense Account (B) Title and Average (A) Name and Address (C) Compensation (If (D) Cont. to Employee Hrs. per Week not pald, enter 0) Ben. Plans & Def. Comp. & Other Allowances ROBERT CHAPIN PRESIDENT 35 PULPIT ROCK RD Raymond, ME 04071 0 0 0 DALE SOUTHARD VICE PO BOX 775 PRESIDENT Raymond, ME 04071 0 0 0 RICHARD E SOUTHARD JR TREASURER 76 BURNHAM RD GORHAM, ME 04038 0 JERRY MURRAY SECRETARY PO BOX 278 SO FREEPORT, ME 04078

### 990 BOOKS ARE IN CARE OF

Atta	chment 3 - 990-EZ Page 3, Part V, Line 42a	
Open to Inspect	Public	
	Organization IAM-GORHAM ROD & GUN CLUB	Employer Identification Number 01-6019724
Part V ~	Line 42a	
Individua or Business	Name	HARD JR
Street A	Idress	
U.S. Add	ress.	
	or	tate <u>ME</u>
	City	
	Province or State	
	Country	······ · · · · · · · · · · · · · · · ·
	Postal code	
	Phone Number	(207) 839-2586
	ax Number	

### **2010 DETAIL STATEMENTS**

WINDHAM-GORHAM	ROD	&	GUN	CLUB

-6019724	Page
TATEMENT #1 - Printing, publication, postage (990 EZ PG 1 Li	ine 15)
STAMPS NEWLETTER	60
OTAL CARRIED TO 990 EZ PG 1 Line 15	60
TATEMENT #2 - Contributions, gifts, grants (EZ1 PF1 Line 1)	·
DONATIONS	282
OTAL CARRIED TO EZ1 PF1 Line 1	282
TATEMENT #3 - Prog. Service Revenue (990-EZ PG 1 Line 2)	
MAINE GRANT 22,0	000
OTAL CARRIED TO 990-EZ PG 1 Line 2	22,000
TATEMENT #4 - Investment Income (990-EZ PG 1 Line 4)	
SACO BIDDEFORD CDBLUE SEALS FOOD	35
GORHAM SAVINGS BANK	9
GORHAM SAVINGS BANK	9 24
BLOCKROCK	61
OTAL CARRIED TO 990-EZ PG 1 Line 4	138
TATEMENT #5 - Gross income from fundraising (990-EZ PG 1 Lir	ne 6b)
LUCKY 7 TICKET	230
TURKEY SHOOT	
OTAL CARRIED TO 990-EZ PG 1 Line 6b	3,029
TATEMENT #6 - Direct expenses from gaming (990-EZ PG 1 Line	6c)
LUCKY 7 EXPENSES	330
LUCKY 7 TICKETS 3	380
	712
<del>-</del>	280 L05
	96
	40

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### **2010 DETAIL STATEMENTS**

WINDHAM-GORHAM ROD & GUN CLUB		
01-6019724		Page 2
STATEMENT #7 - Professional Fees (990-EZ PG 1 Line 13)	)	
TAX PREPARATION	120	
TOTAL CARRIED TO 990-EZ PG 1 Line 13	• • • • •	120
STATEMENT #8 - Occupancy, Rent, Utilities (990-EZ PG :	l Line 14)	
PARKING LOT LEASE JANITORAL SERVICE		
NAUTRAL GAS WATER SEWER	1,299	
SNOW REMOVAL	220	
WASTE REMOVAL	59	
OIL	592	
BUILDING MAINTENANCE	2,442	
UTILITIES UNASSIGNED	389	
SERVICE CONTRACT		
TOTAL CARRIED TO 990-EZ PG 1 Line 14	• • • • •	5,001
SCHOLARSHIP FUND. BUILDING IMPROVMENT FUND. BUILDING FUND SAVINGS. SACO BIDDEFORD CD 4. LUCKY 7 ACCT. FLEET CHECKING. CASH ON HAND. SSACO BIDDEFORD SAVING INC CASH.	1,177 3,667 4,049 14,636 1,968 1,153 529 13,000	
TOTAL CARRIED TO 990-EZ PG 1 Line 22	• • • • • •	63,560
STATEMENT #10 - End of Year - Cash (990-EZ PG 1 Line :	22)	
NORWAY SAVINGS	12,534	
SCHOLARSHIP FUND	9,005	
BUILDING IMPROVEMENT FUND	3,676	
BUILDING FUND SAVINGS	4,059	
LUCKY 7 ACCT	2,297	
FLEET CHECKING	300	
CASH ON HAND	498	
SACO BIDDEFORD SAVING INV CASH	<b>^-</b>	
SACO BIDDEFORD SAVIN INVESTMENT	35	
BLACKROCK MUTUAL FUND	20,061	
TOTAL CARRIED TO 990-EZ PG 1 Line 22	• • • • •	52,465

# **2010 DETAIL STATEMENTS**

1-6019724		Page
STATEMENT #11 - ( )		
ADVERTISING	41	
BANK CHARGES	64	
INSURANCE	4,895	
TOTAL CARRIED TO		5,000
STATEMENT #12 - ( )		
· · · · · · · · · · · · · · · · · · ·	22,001	
STATEMENT #12 - ( ) PHEASANT PROGRAMFEED REIMBURSEMENT	22,001 5,139	
PHEASANT PROGRAMFEED REIMBURSEMENT	5,139	
PHEASANT PROGRAM	5,139	
FEED REIMBURSEMENTPHEASANT PEN UTIL	5,139 60	