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Form 990

## Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2010

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service

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

A For the 2010 calendar year, or tax year period beginning , 2010, and ending , 20

B Check if applicable  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input checked="" type="checkbox"/> Termination <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NEW BRITAIN HUNTING & FISHING CLUB		D Employer identification number 06-6081776
	Doing Business As		E Telephone number 860-581-3083
	Number and street (or P O box if mail is not delivered to street address) Room/suite PO BOX 1613		
	City or town, state or country, and ZIP + 4 NEW BRITAIN, CT 06050-0000		G Gross receipts \$ 61026
F Name and address of principal officer JOHN STEINER 28 GEER STREET CROMWELL, CT 06416		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number	
I Tax-exempt status <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) ( 7 ) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.NBFHC.ORG			
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation 1948 M State of legal domicile CT	

Part I Summary				
Activities & Governance	1	Briefly describe the organization's mission or most significant activities THE ORGANIZATION PROMOTES HUNTING AND FISHING AND RECREATIONAL ACTIVITIES AND ENVIRONMENTAL CONSERVATION.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	12
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	79
	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	
	6	Total number of volunteers (estimate if necessary)	6	12
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	488
Revenue	b	Net unrelated business taxable income from Form 990-T, line 34	7b	
	8	Contributions and grants (Part VIII line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	22240	24182
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	857	393
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8394	8719
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	31491	33294
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	
14		Benefits paid to or for members (Part IX, column (A), line 4)		
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		
16a		Professional fundraising fees (Part IX, column (A), line 11e)		
b		Total fundraising expenses (Part IX, column (D), line 25)		
17		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	32253	34487
18		Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	32253	34487
Net Assets or Fund Balances	19	Revenue less expenses Subtract line 18 from line 12	-762	-1193
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	236984	233591
	22	Net assets or fund balances Subtract line 21 from line 20	10435	8235

## Part II Signature Block

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

Sign Here	Signature of officer	Date	4/16/11
	JOHN STEINER, PRESIDENT		
Paid Preparer's Use Only	Print/Type preparer's name	Preparer's signature	Date
	EDWARD COHEN	Edward Cohen	03/23/11
	Firm's name	Firm's EIN	Check <input checked="" type="checkbox"/> if self-employed
	EDWARD COHEN TAX PREPARATION		
	Firm's address	Phone No	
	580 BROAD STREET 06010-0000	860-523-5521	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

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

Form 990 (2010)

QNA

Part III Statement of Program Service Accomplishments  
Check if Schedule O contains a response to any question in this Part III. ☐

1 Briefly describe the organization's mission  
THE ORGANIZATION PROMOTES HUNTING AND FISHING AND  
RECREATION ACTIVITIES AND ENVIRONMENTAL  
CONSERVATION

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 ☒ 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 ☒ 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 \$ including grants of \$ ) (Revenue \$ )  
THE ORGANIZATION PROMOTES HUNTING AND FISHING AND RECREATION  
ACTIVITIES AND ENVIRONMENTAL CONSERVATION.  
WE HAVE STOCKED FISH AND WILDLIFE ON PRESERVED AND OWNED  
PROPERTY FOR ENJOYMENT AND FUTURE GENERATIONS

4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O )  
(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses ▶

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .	<b>1</b>	X
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) . . . . .	<b>2</b>	X
<b>3</b> 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 . . . . .	<b>3</b>	X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . .	<b>4</b>	
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III . . . . .	<b>5</b>	
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or 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 . . . . .	<b>6</b>	X
<b>7</b> 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 . . . . .	<b>7</b>	X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .	<b>8</b>	X
<b>9</b> 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 . . . . .	<b>9</b>	X
<b>10</b> Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . . .	<b>10</b>	X
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI . . . . .	<b>11a</b>	X
<b>b</b> Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . . . . .	<b>11b</b>	X
<b>c</b> Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII . . . . .	<b>11c</b>	X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX . . . . .	<b>11d</b>	X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . .	<b>11e</b>	X
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48(ASC 740)? If "Yes," complete Schedule D, Part X . . . . .	<b>11f</b>	X
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII . . . . .	<b>12a</b>	X
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional . . . . .	<b>12b</b>	X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	<b>14a</b>	X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV . . . . .	<b>14b</b>	X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II and IV . . . . .	<b>15</b>	X
<b>16</b> 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 and IV . . . . .	<b>16</b>	X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .	<b>17</b>	X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .	<b>18</b>	X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . .	<b>19</b>	X
<b>20a</b> Did the organization operate one or more hospitals? If "Yes," complete Schedule H . . . . .	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) . . . . .	<b>20b</b>	X

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II . . . . .</i>		X
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III . . . . .</i>		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J . . . . .</i>		X
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25 . . . . .</i>		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		X
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		X
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		X
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I . . . . .</i>		X
<b>b</b> Is the organization 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? <i>If "Yes," complete Schedule L, Part I . . . . .</i>		X
<b>26</b> 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? <i>If "Yes," complete Schedule L, Part II . . . . .</i>		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III . . . . .</i>		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . . . .</i>		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M . . . . .</i>		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I . . . . .</i>		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II . . . . .</i>		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I . . . . .</i>		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 . . . . .</i>		X
<b>35a</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? . . . . .		X
<b>b</b> Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>		X
<b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI . . . . .</i>		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .		X

**Part V****Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response to any question in this Part V. ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Enter -0- if not applicable . . . . .	1a	0
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . . . . .	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	X
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	
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? . . . . . <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	3b	
4a	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)? . . . . .	4a	X
b	If "Yes," enter the name of the foreign country ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
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
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T? . . . . .	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? . . . . .	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	6b	
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	7b	
c	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 . . . . .	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	7f	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	7g	X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	7h	X
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	8	X
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
a	Did the organization make any taxable distributions under section 4966? . . . . .	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	9b	
10	<b>Section 501(c)(7) organizations. Enter</b>		
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	10b	
11	<b>Section 501(c)(12) organizations. Enter</b>		
a	Gross income from members or shareholders . . . . .	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .	11b	
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	12a	X
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	12b	
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
a	Is the organization licensed to issue qualified health plans in more than one state? . . . . . <b>Note.</b> See the instructions for additional information the organization must report on Schedule O . . . . .	13a	X
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .	13b	
c	Enter the amount of reserves on hand . . . . .	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year? . . . . .	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .	14b	

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response to any question in this Part VI. ☒**Section A. Governing Body and Management**

	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year . . . . .	<b>1a</b>	12
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent . . . . .	<b>1b</b>	79
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .	<b>2</b>	X
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . . . .	<b>3</b>	X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .	<b>4</b>	X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .	<b>5</b>	X
<b>6</b> Does the organization have members or stockholders? . . . . .	<b>6</b>	X
<b>7a</b> Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .	<b>7a</b>	X
<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .	<b>7b</b>	X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body? . . . . .	<b>8a</b>	X
<b>b</b> Each committee with authority to act on behalf of the governing body? . . . . .	<b>8b</b>	X
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .	<b>9a</b>	X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
<b>10a</b> Does the organization have local chapters, branches, or affiliates? . . . . .	<b>10a</b>	X
<b>b</b> If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? . . . . .	<b>10b</b>	
<b>11a</b> Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? . . . . .	<b>11a</b>	X
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . . . .	<b>12a</b>	X
<b>12a</b> Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	<b>12a</b>	X
<b>b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<b>12b</b>	
<b>c</b> Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	<b>12c</b>	
<b>13</b> Does the organization have a written whistleblower policy? . . . . .	<b>13</b>	X
<b>14</b> Does the organization have a written document retention and destruction policy? . . . . .	<b>14</b>	X
<b>15</b> 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 decision?		
<b>a</b> The organization's CEO, Executive Director, or top management official . . . . .	<b>15a</b>	X
<b>b</b> Other officers or key employees of the organization . . . . .	<b>15b</b>	X
If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) . . . . .		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	<b>16a</b>	X
<b>b</b> If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .	<b>16b</b>	

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed ►

**18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
☐ Own website ☐ Another's website ☐ Upon request

**19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 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 records of the organization ► **MARK FERRANTE** 8607672711  
 39 WEST HILLS ROAD IVORYTON, CT 06442



**Part VII****Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
  - 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, or 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.

☐ Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JOHN STEINER PRESIDENT				X				0	0	0
(2) ROBERT CZERWINSKI VICE PRESIDENT				X				0	0	0
(3) HAROLD GANNON TREASURER	1			X				0	0	0
(4) MARK FERRANTE BOOKKEEPER				X				0	0	0
(5) ROBERT GAGLIARDI FINANCIAL SECRETARY				X				0	0	0
(6) _____										
(7) _____										
(8) _____										
(9) _____										
(10) _____										
(11) _____										
(12) _____										
(13) _____										
(14) _____										
(15) _____										
(16) _____										

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(17) .....										
(18) .....										
(19) .....										
(20) .....										
(21) .....										
(22) .....										
(23) .....										
(24) .....										
(25) .....										
(26) .....										
(27) .....										
(28) .....										
<b>1b Sub Total</b> .....										
<b>c Total from continuation sheets to Part VII, Section A</b> .....										
<b>d Total (add lines 1b and 1c)</b> .....										

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual .....		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual .....		
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person .....		X

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►

Part VIII Statement of Revenue				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . . . .	1a	24182			
	b	Membership dues . . . . .	1b				
	c	Fundraising events . . . . .	1c				
	d	Related organizations . . . . .	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above . . . . .	1f				
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total Add lines 1a-1f . . . . .		24182			
Program Service Revenue	2a	Business Code					
	b						
	c						
	d						
	e						
	f	All other program service revenue . . . . .					
	g	Total Add lines 2a-2f . . . . .					
	3	Investment income (including dividends, interest, and other similar amounts) . . . . .		393			
4	Income from investment of tax-exempt bond proceeds						
5	Royalties . . . . .						
Other Revenue	6a	Gross Rents . . . . .	(i) Real	15988			
	b	Less rental expenses . . . . .	(ii) Personal	15500			
	c	Rental income or (loss) . . . . .		488			
	d	Net rental income or (loss) . . . . .		488		488	
	7a	Gross amount from sales of assets other than inventory . . . . .	(i) Securities				
	b	Less cost or other basis and sales expenses . . . . .	(ii) Other				
	c	Gain or (loss) . . . . .					
	d	Net gain or (loss) . . . . .					
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 . . . . .	a	20463			
	b	Less direct expenses . . . . .	b	12232			
	c	Net income or (loss) from fundraising events . . . . .		8231			
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .	a				
	b	Less direct expenses . . . . .	b				
	c	Net income or (loss) from gaming activities . . . . .					
	10a	Gross sales of inventory, less returns and allowances . . . . .	a				
	b	Less cost of goods sold . . . . .	b				
	c	Net income or (loss) from sales of inventory . . . . .					
	Miscellaneous Revenue		Business Code				
11a							
b							
c							
d	All other revenue . . . . .						
e	Total Add lines 11a-11d . . . . .						
12	Total Revenue. See instructions		33294		488		

**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).

Do not include amounts reported on lines 6b, 7b, 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 . . . . .				
2 Grants and other assistance to individuals in the U S See Part IV, line 22 . . . . .				
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16 . . . . .				
4 Benefits paid to or for members . . . . .				
5 Compensation of current officers, directors, trustees, and key employees . . . . .				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
7 Other salaries and wages . . . . .				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .				
9 Other employee benefits . . . . .				
10 Payroll taxes . . . . .				
11 Fees for services (non-employees)				
a Management . . . . .				
b Legal . . . . .				
c Accounting . . . . .				
d Lobbying . . . . .				
e Professional fundraising services See Part IV, line 17				
f Investment management fees . . . . .				
g Other . . . . .				
12 Advertising and promotion . . . . .				
13 Office expenses . . . . .	1495		1495	
14 Information technology . . . . .				
15 Royalties . . . . .				
16 Occupancy . . . . .	2083	2083		
17 Travel . . . . .				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19 Conferences, conventions, and meetings . . . . .				
20 Interest . . . . .	608	608		
21 Payments to affiliates . . . . .				
22 Depreciation, depletion, and amortization . . . . .	5031		5031	
23 Insurance . . . . .	2583		2583	
24 Other expenses Itemize expenses not covered above (List misc expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O )				
a LEGAL AND ACCOUNTING	300		300	
b MAINTENANCE FEES	6332		6332	
c TAXES	5183		5183	
d FISH AND GAME STOCKING	8472	8472		
e CHARITABLE CONTRIBUTIONS	2400	2400		
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	34487	13563	20924	
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash—non-interest-bearing . . . . .		1	
	2 Savings and temporary cash investments . . . . .	78124	2	63461
	3 Pledges and grants receivable, net . . . . .		3	
	4 Accounts receivable, net . . . . .		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) . . . . .		6	
	7 Notes and loans receivable, net . . . . .		7	
	8 Inventories for sale or use . . . . .		8	
	9 Prepaid expenses and deferred charges . . . . .		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	10a 169130		
	b Less: accumulated depreciation . . . . .	10b	10c	169130
	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 . . . . .	1000	15	1000
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	236984	16	233591	
<b>Liabilities</b>	17 Accounts payable and accrued expenses . . . . .		17	
	18 Grants payable . . . . .		18	
	19 Deferred revenue . . . . .		19	
	20 Tax-exempt bond liabilities . . . . .		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		22	
	23 Secured mortgages and notes payable to unrelated third parties . . . . .	10435	23	8235
	24 Unsecured notes and loans payable to unrelated third parties . . . . .		24	
	25 Other liabilities. Complete Part X of Schedule D . . . . .		25	
	26 <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	10435	26	8235
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets . . . . .		27	
	28 Temporarily restricted net assets . . . . .		28	
	29 Permanently restricted net assets . . . . .		29	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds . . . . .		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund . . . . .		31	
	32 Retained earnings, endowment, accumulated income, or other funds . . . . .	226549	32	225356
33 Total net assets or fund balances . . . . .	226549	33	225356	
34 <b>Total liabilities and net assets/fund balances.</b> . . . . .	236984	34	233591	

**Part XI****Reconciliation of Net Assts**Check if Schedule O contains a response to any question in this Part XI. ☐

1	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	1	33294
2	Total expenses (must equal Part IX, column (A), line 25) . . . . .	2	34487
3	Revenue less expenses Subtract line 2 from line 1 . . . . .	3	-1193
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	4	226549
5	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	5	
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) . . . . .	6	225356

**Part XII****Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII. ☐

	Yes	No
1 Accounting method used to prepare the Form 990 <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .	X	
b Were the organization's financial statements audited by an independent accountant? . . . . .		
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	X	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . . . .		

QNA

Form 990 (2010)

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service  
Name of the organization

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

**2010**

**Open to Public  
Inspection**

NEW BRITAIN HUNTING & FISHING CLUB

Employer identification number

06-6081776

PART VI, SECTION A

WE ELECT OFFICERS WHO MAKE DECISIONS BUT IT IS SUBJECT TO THE APPROVAL

OF THE GENERAL MEMBERSHIP WE HAVE 12 OFFICERS AND 79 NON OFFICERS

MAKING THE MEMBERSHIP TOTAL 91

PART VI, SECTION B, LINE 11

ALL RECORDS ARE AVAILABLE UPON REQUEST OR MINUTES ARE AVAILABLE AT OUR

MEMBERSHIP MEETINGS

PART VI, SECTION B, LINE 15

OUR OFFICERS DO NOT GET PAID NOR DO WE HAVE PAID EMPLOYEES

PART VI, SECTION C, LINE 19

ALL RECORDS ARE AVAILABLE UPON REQUEST AND AVAILABLE AT OUR MEMBERSHIP

MEETINGS

## Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

2010

Department of the Treasury  
Internal Revenue Service (99)

▶ See separate instructions.

▶ Attach to your tax return.

Attachment  
Sequence No 67

Name(s) shown on return

Business or activity to which this form relates

Identifying number

NEW BRITAIN HUNTING &amp; FISHING CLUB

FORM 4562

01 06-6081776

**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

1	Maximum amount (see instructions) . . . . .	1
2	Total cost of section 179 property placed in service (see instructions) . . . . .	2
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
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions . . . . .	5
6	(a) Description of property	(b) Cost (business use only)
		(c) Elected cost
7	Listed property Enter the amount from line 29 . . . . .	7
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 . . . . .	8
9	Tentative deduction Enter the smaller of line 5 or line 8 . . . . .	9
10	Carryover of disallowed deduction from line 13 of your 2009 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
13	Carryover of disallowed deduction to 2011 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 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
16	Other depreciation (including ACRS) . . . . .	16 979

**Part III MACRS Depreciation (Do not include listed property) (See instructions)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2010 . . . . .	17 3993
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 . . . . . ▶ <input type="checkbox"/>	

**Section B - Assets Placed in Service During 2010 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	
	11/10	14792	**	MM	S/L	59

**Section C - Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System**

20a Class life				S/L	
b 12-year			12 yrs	S/L	
c 40-year			40 yrs	MM	S/L

**Part IV Summary (See instructions)**

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 Enter here and on the appropriate lines of your return Partnerships and S corporations - see instructions . . . . .	22 5031
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . . .	23



## STATEMENT OF DEPRECIATION FOR: 06-6081776 SCHEDULE: 01

Description of Property	Date Acquired	Cost or other Basis	Sec 179	Bonus Deprec	Basis	Accum Deprec	Method Used	Life or Rate	Deprec for 2010	ADS Deprec for 2010	Next Year's Deprec
BUILDING	01/01/80	32752			32752	32752	SL	39.0			
IMPROVEMENTS	07/01/95	1545			1545	491	SL	39.0	40	40	40
ROOF	07/01/97	14208			19208	6006	SL	39.0	493	493	493
KITCHEN RENOVATION	08/15/00	3851			3851	928	SL	39.0	99	99	99
SHED	04/03/02	2995			2995	593	SL	39.0	77	77	77
DUMPSTER ENCLOSURE	10/05/02	1125			1125	647	SL	10.0	113	113	113
CLAM BAR	09/14/03	1290			1290	208	SL	39.0	33	33	33
BLOCK HOUSE ROOF	05/02/05	784			784	93	SL	39.0	20	20	20
PAVING	06/13/05	2642			2642	312	SL	39.0	68	68	68
BOCCI COURT	11/02/05	1396			1396	150	SL	39.0	36	36	36
EQUIPMENT	07/01/93	7855			3855	3855	MACRS	7.0			
CLAY TRAPS	07/01/95	450			450	393	MACRS	7.0			
CLAY TRAPS	07/01/96	492			492	388	MACRS	7.0			
CLAY TRAPS	07/01/98	481			481	432	MACRS	7.0			
LAND TOOLS	07/01/99	317			317	317	MACRS	7.0			
COFFEE POT	05/11/99	111			111	111	MACRS	7.0			
18 INCH POULAN CHA	09/12/99	202			202	202	MACRS	7.0			
LAWN MOWER	06/26/00	600			600	600	MACRS	7.0			
KITCHEN EQUIPMENT	09/15/00	4201			4201	4101	MACRS	7.0			
TRAP MACHINE	12/22/00	1591			1591	1591	MACRS	7.0			
LAWN MOWER OVERHAU	04/03/01	358			358	358	MACRS	7.0			
WATER PUMP	09/14/01	1680			1600	1600	MACRS	7.0			
WELL	09/14/01	3500			3500	3500	MACRS	7.0			
OVEN AND WIRING	09/21/01	1356			1386	1286	MACRS	7.0			
4 PAN COVERS	07/01/02	427			427	427	MACRS	7.0			
AIZEL SYSTEM	07/16/02	1272			1272	1173	MACRS	7.0			
STAINLESS PANS	02/18/03	269			269	257	MACRS	7.0	12	12	
STAINLESS GRILL	04/02/03	1000			1000	855	MACRS	7.0	45	45	
LEAF BLOWER	04/08/04	245			245	245	MACRS	5.0			
2 CANOES	04/08/04	366			366	366	MACRS	5.0			
WEED WACKER	03/22/04	247			247	247	MACRS	5.0			
LAWN TRACTOR	11/16/04	2042			3042	2042	MACRS	5.0			
WIND TOWER AND WIN	04/26/05	2198			2198	1389	MACRS	10.0	162	162	144
EQUIPMENT	05/05/05	32			32	30	MACRS	5.0	2	2	
KITCHEN EQUIPMENT	06/01/05	273			273	256	MACRS	5.0	16	16	
POND AERATOR	06/15/05	289			289	271	MACRS	5.0	17	17	
LAND	12/31/67	37000			37000		LAND				
LAND DAVIDSON ROAD	06/05/02	85948			85948		LAND				
HOLDING POND LAND	12/31/70	18000			18000	18000	SL	10.0			
DRIVEWAY LAND IMPR	12/31/79	6184			6184	6184	SL	10.0			
HOLDING POND	07/19/98	6696			6696	6696	SL	10.0			
IMPROVEMENTS	07/01/99	200			200	200	SL	10.0			
6 PICNIC TABLES	06/01/06	1200			1220	838	MACRS	7.0	109	109	109
RAFT	07/01/06	1000			1100	755	MACRS	7.0	98	98	98
STAINLESS STEEL PA	05/01/06	2000			2000	1376	MACRS	7.0	179	179	178
3 LAWN MOWERS	08/06/07	416			416	296	MACRS	5.0	48	48	48
5 PROPANE HEATERS	08/15/07	400			400	233	MACRS	5.0	67	67	67
STOVE	05/09/08	2518		1259	1259	1612	MACRS	10.0	181	363	145
TRACTOR	03/11/09	15900		7950	7950	9086	MACRS	7.0	1947	3894	1390
BRUSH MOWER	02/05/09	3120		1560	1560	1872	MACRS	5.0	499	998	300
BACKHOE ATTACHMENT	02/21/09	3500		1750	1750	2000	MACRS	7.0	429	857	306
CLUB HOUSE FOUNDAT	09/28/09	5744			5744	53	MACRS	31.5	182	182	182
CLUB HOUSE	11/12/10	11792			14792		MACRS	31.5	59	59	470
TOTALS:		296060		12519	288611	117673			5031	8087	4416
LAND:		122948			122948						
TOTALS - LAND:		173112		12519	165663	117673			5031	8087	4416

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STATEMENT OF STATE DEPRECIATION FOR: 06-6081776 SCHEDULE: 01  
TO BE USED ONLY IF STATE DOES NOT ALLOW SPECIAL DEPRECIATION

Description of Property	Date Acquired	Cost or other Basis	Sec 179	Bonus Deprec	Basis	Accum Deprec	Method Used	Life or Rate	Deprec for 2010	ADS Deprec for 2010	Next Year's Deprec
LAND	12/31/67	37000					LAND				
HOLDING POND LAND IM	12/31/70	18000				18000	SL	10.0			
DRIVEWAY LAND IMPROV	12/31/79	6184				6184	SL	10.0			
BUILDING	01/01/80	32752			32752	32752	SL	39.0			
EQUIPMENT	07/01/93	7855			7855	3855	MACRS	7.0			
IMPROVEMENTS	07/01/95	1545			1545	491	SL	39.0	40		40
CLAY TRAPS	07/01/95	450			450	393	MACRS	7.0			
CLAY TRAPS	07/01/96	492			492	388	MACRS	7.0			
ROOF	07/01/97	14208			14208	5490	SL	39.0	364		364
CLAY TRAPS	07/01/98	481			481	432	MACRS	7.0			
HOLDING POND	07/19/98	6696				6696	SL	10.0			
COFFEE POT	05/11/99	111			111	111	MACRS	7.0			
LAND TOOLS	07/01/99	317			317	317	MACRS	7.0			
IMPROVEMENTS	07/01/99	200				200	SL	10.0			
18 INCH POULAN CHAIN	09/12/99	202			202	202	MACRS	7.0			
LAWN MOWER	06/26/00	600			600	600	MACRS	7.0			
KITCHEN RENOVATIONS	08/15/00	3851			3851	928	SL	39.0	99		99
KITCHEN EQUIPMENT	09/15/00	4201			4201	4101	MACRS	7.0			
TRAP MACHINE	12/22/00	1591			1591	1591	MACRS	7.0			
LAWN MOWER OVERHAUL	04/03/01	358			358	358	MACRS	7.0			
WATER PUMP	09/14/01	1680			1680	375	MACRS	7.0			
WELL	09/14/01	3500			3500	781	MACRS	7.0			
OVEN AND WIRING	09/21/01	1356			1356	302	MACRS	7.0			
SHED	04/03/02	2995			2995	308	SL	39.0	77		77
LAND DAVIDSON ROAD	06/05/02	85948					LAND				
4 PAN COVERS	07/01/02	427			427	133	MACRS	7.0			
AIZEL SYSTEM	07/16/02	1272			1272	398	MACRS	7.0			
DUMPSTER ENCLOSURE	10/05/02	1125			1125	452	SL	10.0	113		113
STAINLESS PANS	02/18/03	269			269	106	MACRS	7.0	12		
STAINLESS GRILL	04/02/03	1000			1000	392	MACRS	7.0	45		
CLAM BAR	09/14/03	1290			1290	132	SL	39.0	33		33
WEED WACKER	03/22/04	247			247	117	MACRS	5.0			
LEAF BLOWER	04/08/04	245			245	117	MACRS	5.0			
2 CANOES	04/08/04	366			366	175	MACRS	5.0			
LAWN TRACTOR	11/16/04	2042			2042	980	MACRS	5.0			
WIND TOWER AND WIND	04/26/05	2198			2198	1169	MACRS	10.0	162		144
BLOCK HOUSE ROOF	05/02/05	784			784	80	SL	39.0	20		20
EQUIPMENT	05/05/05	32			32	24	MACRS	5.0	2		
KITCHEN EQUIPMENT	06/01/05	273			273	201	MACRS	5.0	16		
PAVING	06/13/05	2642			2642	272	SL	39.0	68		68
POND AERATOR	06/15/05	289			289	213	MACRS	5.0	17		
BOCCI COURT	11/02/05	1396			1396	144	SL	39.0	36		36
STAINLESS STEEL PANS	05/01/06	2000			2000	1376	MACRS	7.0	179		178
6 PICNIC TABLES	06/01/06	1200			1200	825	MACRS	7.0	107		107
RAFT	07/01/06	1000			1000	688	MACRS	7.0	89		89
3 LAWN MOWERS	08/06/07	416			416	296	MACRS	5.0	48		48
5 PROPANE HEATERS	08/15/07	400			400	233	MACRS	5.0	67		67
STOVE	05/09/08	2518			2518	705	MACRS	10.0	363		290
BRUSH MOWER	02/05/09	3120			3120	624	MACRS	5.0	998		599
BACKHOE ATTACHMENT	02/21/09	3500			3500	500	MACRS	7.0	857		612
TRACTOR	03/11/09	15900			15900	2272	MACRS	7.0	3894		2781
CLUB HOUSE FOUNDATIO	09/28/09	5744			5744	53	MACRS	31.5	182		182
CLUB HOUSE	11/12/10	11792			11792		MACRS	31.5	47		374
TOTALS:		296060			142032	97532			7935		6321
LAND:		122948									
TOTALS - LAND:		173112			142032	97532			7935		6321

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