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Form **990-EZ** (2010)

Part II

Balance Sheets

Check if the organization used Schedule O to respond to any question in this Part II

☒

(See the instructions for Part II)		(A) Beginning of year	(B) End of year	
22	Cash, savings, and investments	12,598	22	15,032
23	Land and buildings		23	
24	Other assets (describe in Schedule O)	15,673	24	59,332
25	Total assets	28,271	25	74,364
26	Total liabilities (describe in Schedule O)		26	2,297
27	Net assets or fund balances (line 27 of column (B) must agree with line 21) .	28,271	27	72,067

Part III

Statement of Program Service Accomplishments

Check if the organization used Schedule O to respond to any question in this Part III

☐

What is the organization's primary exempt purpose?

1 PROMOTE THE AMATEUR SPORT OF CLAY TARGET SHOOTING AND ALL SHOOTING SPORTS IN GENERAL AS FAMILY SPORTS WITH EMPHASIS ON GUN SAFETY,2 PROMOTE AND SPONSOR AMERICAN TRAP ASSOCIATION (ATA) SHOOTING EVENTS AND COMPETITIONS,3 PROMOTE AND SPONSOR NATIONAL SKEET & SPORTING CLAYS ASSOCIATION (NSSCA) SHOOTING EVENTS AND COMPETITIONS,4 PROVIDE GUN SAFETY EDUCATION AND SHOOTING EXPERIENCE OPPORTUNITIES FOR YOUTH AND SCOUT ORGANIZATIONS AND FOR INDIVIDUAL YOUNG SHOOTERS,5 ESTABLISH, MAINTAIN, CONDUCT AND SUPPORT RECREATIONAL AND SOCIAL ENDEAVORS AND EVENTS FOR THE BENEFIT OF THE MEMBERSHIP AND THE GENERAL SHOOTING PUBLIC,6 SPONSOR AND OPERATE THE SHOTGUN SHOOTING EVENT PORTIONS FOR THE HUNTSMAN WORLD SENIOR GAMES HELD EACH OCTOBER IN ST GEORGE, UTAH,7 PURCHASE, LEASE, HOLD, ACQUIRE, OWN, USE AND OPERATE REAL AND PERSONAL PROPERTY EXCLUSIVELY FOR THE PURPOSES SET FORTH ABOVE

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

Expenses

(Required for section 501 (c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

28	OPERATED THE SOUTHERN UTAH SHOOTING SPORTS PARK FOR WASHINGTON COUNTY AND PROVIDED THE VENUE AND OPPORTUNITIES FOR TRAP SHOOTING, SKEET SHOOTING AND SPORTING CLAYS SHOOTING EVENTS (Grants \$ 131,925)	If this amount includes foreign grants, check here	28a	
29				
	(Grants \$)	If this amount includes foreign grants, check here	29a	
30				
	(Grants \$)	If this amount includes foreign grants, check here	30a	
31	Other program services (describe in Schedule O)			
	(Grants \$)	If this amount includes foreign grants, check here	31a	
32	Total program service expenses (add lines 28a through 31a)		32	131,925

Part IV

List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

☐

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
See Additional Data Table				

Part V

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

Check if the organization used Schedule O to respond to any question in this Part V ☐

			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		No
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 (see instructions)	34		No
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			
a	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		No
b	If "Yes," has it filed a tax return on Form 990-T for this year? (see instructions)	35b		
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		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions 	37a		
b	Did the organization file Form 1120-POL for this year?	37b		No
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 tax year covered by this return?	38a		No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b		
39	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on line 9	39a		0
b	Gross receipts, included on line 9, for public use of club facilities	39b		0
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911  , section 4912  , section 4955 			
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 did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		No
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 . . . 			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization 			
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	40e		No
41	List the states with which a copy of this return is filed 			
42a	The organization's books are in care of  STEVE BRADBURY Telephone no  (435) 229-2112 2309 OAKMONT LN Located at  ST GEORGE, UT ZIP + 4  84790			
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)? 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 .	42b	Yes	No
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country 	42c		No
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ☐  and enter the amount of tax-exempt interest received or accrued during the tax year . . . 	43		
44a	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of Form 990-EZ.	44a	Yes	No
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		No
c	Did the organization receive any payments for indoor tanning services during the year?	44c		No
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		No

		Yes	No
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 and Schedule R must be completed instead of Form990-EZ		No
45a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' Form 990 and Schedule R must be completed instead of Form990-EZ		No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No

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 47-49b and 52.
Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	
48	Is the organization a school 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?	
49b	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
NONE				

50(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
NONE		

51(d) Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? NOTE: All Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Yes No

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		
	STEVE BRADBURY President				
Paid Preparer's Use Only	Preparer's signature	BRUCE S HUGHES CPA	Date	Check if self-employed	Preparer's taxpayer identification number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4				EIN
	HUGHES AND ASSOCIATES INC 2069 N MAIN ST SUITE 200 CEDAR CITY, UT 84721				Phone no (435) 867-1111

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

Additional Data

Software ID: 10000105

Software Version: 2010v3.2

EIN: 26-0692953

Name: PURGATORY CLAY SPORTS

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
HAROLD CURRY 1524 LONE COYOTE DRIVE DIAMOND VALLEY, UT 84770	Director 5 00	0		
RON SATKOWIAK 526 TORTUGA WAY MESQUITE, NV 89027	Director 5 00	0		
MICHAEL MORGAN PO BOX 424 MESQUITE, NV 89024	Director 5 00	0		
ROGER BLESSING 2037 S PALOMINO WASHINGTON, UT 84780	Director 5 00	0		
BRENT JENSEN 2142 CAMERON PLACE ST GEORGE, UT 84790	Director 5 00	0		
KENNY CANFIELD 1323 N 1175 WEST ST GEORGE, UT 84770	Director 5 00	0		
STEVE BRADBURY 2309 OAKMONT LN ST GEORGE, UT 84790	President 5 00	0		

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization PURGATORY CLAY SPORTS	Employer identification number 26-0692953
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Identifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 26 1	Total Liabilities 1	SALES TAX PAYABLE - Beginning \$0 SALES TAX PAYABLE - Ending \$2297

Identifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 24 2	Other Assets 2	SHOOTING INVENTORY - Beginning \$0 SHOOTING INVENTORY - Ending \$31802

Identifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 24 1	Other Assets 1	UNDEPOSITED FUNDS - Beginning \$0 UNDEPOSITED FUNDS - Ending \$166

Identifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 24 1011	Other Assets 1011	Prepaid Expenses and Deferred Charges - Beginning \$0 Prepaid Expenses and Deferred Charges - Ending \$1188

Identifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 24 1005	Other Assets 1005	Accounts Receivable - Beginning \$121 Accounts Receivable - Ending \$9895

Identifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 24 1003	Other Assets 1003	Machinery and Equipment - Beginning \$15552 Machinery and Equipment - Ending \$16281

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 22	Other Expenses 22	CASH SHORT \$8

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 21	Other Expenses 21	LICENSES \$15

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 20	Other Expenses 20	CLEANING \$121

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 19	Other Expenses 19	DUES & SUBSCRIPTIONS \$150

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 18	Other Expenses 18	PA SYSTEM \$202

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 17	Other Expenses 17	REPAIRS \$404

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 16	Other Expenses 16	AUTO EXPENSES \$542

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 14	Other Expenses 14	PRIZES \$589

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 12	Other Expenses 12	CREDIT CARD EXPENSE \$848

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 11	Other Expenses 11	CART EXPENSE \$925

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 10	Other Expenses 10	HAT & SAFETY EQUIP \$1088

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 9	Other Expenses 9	CLUBHOUSE EXPENSE \$2085

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 8	Other Expenses 8	BANK CHARGES \$2096

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 7	Other Expenses 7	EQUIPMENT \$2363

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 6	Other Expenses 6	MAINTENANCE \$3659

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 5	Other Expenses 5	TRAP RENTAL \$4800

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 4	Other Expenses 4	UTILITIES \$7597

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 3	Other Expenses 3	LANDSCAPING \$16342

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 2	Other Expenses 2	COST OF SHOOTS \$27605

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 1	Other Expenses 1	SHOOTING \$45168

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 1012	Other Expenses 1012	Insurance \$1187

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 1009	Other Expenses 1009	Depreciation \$5638

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 1005	Other Expenses 1005	Travel \$734

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 1002	Other Expenses 1002	Office Expenses \$1677

Identifier	Return Reference	Explanation
Form 990-EZ, Part I, Line 16 1001	Other Expenses 1001	Advertising and Promotion \$536