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Short Form Return of Organization Exempt From Income Tax

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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, 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 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 2011 calendar year, or tax year beginning _____, and ending _____

B Check if applicable: Address change, Name change, Initial return, Terminated, Amended return, Application pending

C Name of organization: **U P THUNDER RIDERS INC**

D Employer identification number: **38-3128357**

E Telephone number: **906 358-4821**

F Group Exemption Number: **0000**

G Accounting Method: Cash, Accrual, Other (specify) _____

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: **N/A**

J Tax-exempt status (check only one) — 501(c)(3), 501(c) (4) ◀ (insert no) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization or a section 527 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.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ **72,871**

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

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

SCANNED MAR 28 2011

	Description		Amount
Revenue	1	Contributions, gifts, grants, and similar amounts received	62,304
	2	Program service revenue including government fees and contracts	1,945
	3	Membership dues and assessments	8,504
	4	Investment income	118
	5a	Gross amount from sale of assets other than inventory	
	5b	Less: cost or other basis and sales expenses	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	0
	6	Gaming and fundraising events	
	6a	Gross income from gaming (attach Schedule G if greater than \$15,000)	
	6b	Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	
6c	Less direct expenses from gaming and fundraising events		
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	0	
7a	Gross sales of inventory, less returns and allowances		
7b	Less: cost of goods sold		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	0	
8	Other revenue (describe in Schedule O)		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8. ▶	72,871	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	
	11	Benefits paid to or for members	
	12	Salaries, other compensation, and employee benefits	10,793
	13	Professional fees and other payments to independent contractors	
	14	Occupancy, rent, utilities, and maintenance	2,489
	15	Printing, publications, postage, and shipping	588
	16	Other expenses (describe in Schedule O)	66,334
17	Total expenses. Add lines 10 through 16. ▶	80,204	
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	-7,333
	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)	115,627
	20	Other changes in net assets or fund balances (explain in Schedule O)	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20. ▶	108,294

16 GS

Part II Balance Sheets. (see the instructions for Part II.)

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

	(A) Beginning of year	(B) End of year	
22 Cash, savings, and investments	26,063	22	28,172
23 Land and buildings	90,472	23	80,846
24 Other assets (describe in Schedule O)		24	
25 Total assets	116,535	25	109,018
26 Total liabilities (describe in Schedule O)	908	26	724
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	115,627	27	108,294

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

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

What is the organization's primary exempt purpose? Develop & Maintain Area Snowmobile Trails

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. 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 THE CLUB DEVELOPS, MAINTAINS AND GROOMS SNOWMOBILE TRAILS. TOURISM			
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a		
29			
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a		
30			
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a		
31 Other program services (describe in Schedule O)			
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a		
32 Total program service expenses. (add lines 28a through 31a)	32		0

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) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Wayne Schemmer North 3422 White Birch Road Watersmeet MI 49969	Title VP Hr/WK 00	0		
Rick Henriksen N4295 Cloverleaf Lake Court Watersmeet MI 49969	Title PRES Hr/WK 00	0		
Stephanie Potter N4757 Crozer Road Watersmeet MI 49969	Title SEC Hr/WK .00	0		
Ruth Chenoweth E23945 Beaver Station Road Watersmeet MI 49969	Title TREAS Hr/WK 00	0		
Kelly Mott N4941 Nrth Hwy 45 Watersmeet MI 49969	Title DIRECTOR Hr/WK 00	0		
Craig Hesse East 19636 Hebert Road Watersmeet MI 49969	Title DIRECTOR Hr/WK .00	0		
	Title Hr/WK .00	0		
	Title Hr/WK .00	0		
	Title Hr/WK .00	0		
	Title Hr/WK .00	0		
	Title Hr/WK .00	0		
	Title Hr/WK .00	0		

Part V Other Information (Note the Schedule A and personal benefit contract 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 significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		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 (see instructions)		X
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		X
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		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		X
37 a	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?		X
38 a	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?		X
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		
b	Gross receipts, included on line 9, for public use of club facilities 39b		
40 a	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		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 ▶ _____		
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		X
41	List the states with which a copy of this return is filed. ▶ MI		
42 a	The organization's books are in care of ▶ Ruth Chenoweth Telephone no ▶ 906 358-4821 Located at ▶ E23945 Beaver Station Rd City Watersmeet ST MI ZIP + 4 ▶ 49969		
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.	Yes	No
42b			X
c	At any time during the calendar year, did the organization maintain an office outside the U S ? If "Yes," enter the name of the foreign country: ▶ _____		X
42c			X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here ▶ X and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
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		X
c	Did the organization receive any payments for indoor tanning services during the year?		X
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		X
44d			X
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
45 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)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		X
45b			X

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

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, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI

47 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

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

49 a 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."

Table with 5 columns: (a) Name and address of each employee paid more than \$100,000, (b) Title and average hours per week devoted to position, (c) Reportable compensation (Forms W-2/1099-MISC), (d) Health benefits, contributions to employee benefit plans, and deferred compensation, (e) Estimated amount of other compensation. All entries are 'None'.

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"

Table with 3 columns: (a) Name and address of each independent contractor paid more than \$100,000, (b) Type of service, (c) Compensation. All entries are 'None'.

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

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 Ruth A. Chenoweth Treasurer, Date 3-6-12, Type or print name and title Ruth Chenoweth, Treasurer TREASURER

Paid Preparer Use Only: Print/Type preparer's name LINDA L. REIMER, Preparer's signature Linda L. Reimer, Date 3/1/12, Check self-employed, PTIN 800801050, Firm's name SAVANNAH BUSINESS SOLUTIONS INC, Firm's EIN 59-3648625, Firm's address 12532 Shirebrook Ct. TAMPA FL 33626, Phone no 727 808-5719

May the IRS discuss this return with the preparer shown above? See instructions

Part I, Line 1 (990-EZ) - Contributions, Gifts, Grants and Similar Amounts Received

1	Contributions	1	_____
2	Noncash contributions	2	_____
3	Membership dues and assessments (contributions from the public)	3	_____
4	Government contributions (grants)	4	_____
5	Commercial co-venture	5	_____
6	Special events contributions (Line 6 - Special Events)	6	_____ 0
7	Associated organization contributions	7	_____
8	✓		
9	✓		
10		10	_____
11	Total	11	62,304

Part I, Line 4 (990-EZ) - Investment Income

1	Interest on savings and temporary cash investments	1	_____ 118
2	Dividends and interest from securities	2	_____
3	Gross rents	3	_____
4	Other investment income	4	_____
5	Total	5	_____ 118

Depreciation and Amortization

(Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions.

▶ Attach to your tax return.

Attachment
Sequence No **179**

Name(s) shown on return U P THUNDER RIDERS INC	Business or activity to which this form relates 990EZ	Identifying number 38-3128357
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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	500,000
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	2,000,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	0
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	500,000
6		
(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property Enter the amount from line 29		
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7		8 0
9 Tentative deduction Enter the smaller of line 5 or line 8		9 0
10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562.		10 810
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 0
13 Carryover of disallowed deduction to 2012. Add lines 9 and 10, less line 12		13 810

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	

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 2011	17	10,003
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 2011 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
19 a 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			39 yrs	MM	S/L	

Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

20 a Class life					
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	10,003
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	

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? [X] Yes [] No
24b If "Yes," is the evidence written? [X] Yes [] No
(a) Type of property (list vehicles first) (b) Date placed in service (c) Business/investment use percentage (d) Cost or other basis (e) Basis for depreciation (business/investment use only) (f) Recovery period (g) Method/Convention (h) Depreciation deduction (i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25
26 Property used more than 50% in a qualified business use: % % %
27 Property used 50% or less in a qualified business use % S/L - % S/L - % S/L -
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 0
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29 0

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (do not include commuting miles) (a) Vehicle 1 11,870 (b) Vehicle 2 (c) Vehicle 3 (d) Vehicle 4 (e) Vehicle 5 (f) Vehicle 6
31 Total commuting miles driven during the year
32 Total other personal (noncommuting) miles driven
33 Total miles driven during the year Add lines 30 through 32 11,870
34 Was the vehicle available for personal use during off-duty hours? Yes No Yes No Yes No Yes No Yes No Yes No
35 Was the vehicle used primarily by a more than 5% owner or related person? X
36 Is another vehicle available for personal use? X

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? Yes No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners
39 Do you treat all use of vehicles by employees as personal use?
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles

Part VI Amortization

(a) Description of costs (b) Date amortization begins (c) Amortizable amount (d) Code section (e) Amortization period or percentage (f) Amortization for this year
42 Amortization of costs that begins during your 2011 tax year (see instructions)
43 Amortization of costs that began before your 2011 tax year 43
44 Total. Add amounts in column (f). See the instructions for where to report 44 0

Use of Vehicles (4562 Part V, Section B) - 990EZ

	Vehicle Description	Business Miles	Commuting Miles	Other Miles	Total Miles	Personal Use Off Duty?		More than 5% owner?		Another vehicle avail. for use?	
						Y	N	Y	N	Y	N
1	Isuzu Truck	11,870	0	0	11,870		X		X		X

Form 4562 Statement - 990EZ

12/31/2011

Item No	Description of Property	Date Placed In Service	Asset Code	Bus Use %	Cost or Other Basis	Sec 179 Deduction	Credit	Special Allowance	Salvage Value	Recovery Basis	Recovery Period	Method	Con-vention Code	Prior Accum Deprec, 179, Bonus	2011 Deprec	2011 Accum Deprec
Depreciation Detail																
MACRS deductions for prior years (Line 17)																
3	Building - Barn	9/13/1996	R-5	100 00%	20,006	0	0	0	0	20,006	39	SL/GDS	MM	7,332	513	7,845
4	Building Completion	2/4/1997	R-5	100 00%	1,848	0	0	0	0	1,848	39	SL/GDS	MM	655	47	702
6	Infrared Heater	2/2/2001	R-5	100 00%	2,797	0	0	0	0	2,797	39	SL/GDS	MM	708	72	780
2	Boiler	9/30/2001	R-5	100 00%	1,219	0	0	0	0	1,219	39	SL/GDS	MM	287	31	318
7	Building Completion	1/1/2002	R-5	100 00%	3,733	0	0	0	0	3,733	39	SL/GDS	MM	863	96	959
5	Building Improvements	6/15/2002	R-5	100 00%	13,602	0	0	0	0	13,602	39	SL/GDS	MM	3,126	349	3,475
8	Building Addition	1/1/2003	R-5	100 00%	46,119	0	0	0	0	46,119	39	SL/GDS	MM	9,460	1,182	10,642
19	8120 Tractor	11/30/2004	F-10	100 00%	166,463	0	0	0	0	166,463	7	200DB	HY	144,666	7,424	152,090
22	Power Washer	7/22/2010	F-10	100 00%	2,362	0	0	1,181	0	1,181	7	200DB	HY	1,350	289	1,639
					Total MACRS deductions for prior years (Line 17)	0	0	1,181	0	256,968				168,447	10,003	178,450
Subtotal Depreciation																
					258,149	0	0	1,181	0	256,968				168,447	10,003	178,450
3	Isuzu Truck	8/1/2001	V-6	100 00%	500	0	0	0	0	500	5	200DB	HY	500	0	500
20	Trailer	1/1/2008	F-15	100 00%	200	200	0	0	0	0	5	200DB	HY	200	0	200
					258,849	200	0	1,181	0	257,468				169,147	10,003	179,150
Total Depreciation and Amortization																

Part I Summary (4562)

	Federal	Federal AMT	MI
1a Maximum amount. See instructions for a higher limit for certain businesses	1a 500,000	1a 500,000	1a 500,000
1b Additions or subtractions to line 1a	1b 0	1b 0	1b 0
1c Additional Qual Empowerment Zone amount (Max: \$35,000)	1c 0	1c 0	1c 0
1d Additional Qual Enterprise Zone amount (Max: \$35,000)	1d 0	1d 0	1d 0
1e Additional Qual GO Zone (Max: \$100,000)	1e 0	1e 0	1e 0
1f Additional Qual Disaster Assistance (Max: \$100,000)	1f 0	1f 0	1f 0
1g Adjusted maximum amount. Add lines 1a through 1f	1g 500,000	1g 500,000	1g 500,000
2a Total cost of section 179 property (Asset Entry & 4562)	2a 0	2a 0	2a 0
2b Additions or subtractions to line 2a	2b 0	2b 0	2b 0
2c Adjusted total cost of section 179 property placed in service	2c 0	2c 0	2c 0
3a Threshold cost of section 179 property before reduction in limitation	3a 2,000,000	3a 2,000,000	3a 2,000,000
3b Additional threshold amount for Qual Disaster Assistance or GO Zone assets (smaller of cost or \$600,000 per zone)	3b 0	3b 0	3b 0
3c Adjusted threshold cost of section 179 property	3c 2,000,000	3c 2,000,000	3c 2,000,000
4 Reduction in limitation Subtract line 3c from line 2c. If zero or less, enter -0-	4 0	4 0	4 0
5 Dollar limitation for tax year. Subtract line 4 from line 1g. If zero or less, enter -0-	5 500,000	5 500,000	5 500,000
6a Elected cost (Qual Real Prop)	6a 0	6a 0	6a 0
6b Elected cost (All Other Prop)	6b 0	6b 0	6b 0
6c Total section 179 property	6c 0	6c 0	6c 0
6d Sec 179 prop from Schedule K-1s (Qual Real Prop)	6d 0	6d 0	6d 0
6e Sec 179 prop from Schedule K-1s (All Other Prop)	6e 0	6e 0	6e 0
6f Total section 179 property from Schedule K-1s	6f 0	6f 0	6f 0
6g Total section 179 property that is non-listed property	6g 0	6g 0	6g 0
7 Section 179 property that is listed property	7 0	7 0	7 0
8 Total elected cost of section 179 property Add lines 6g and 7	8 0	8 0	8 0
9a Tentative deduction (Qual Real Prop)	9a 0	9a 0	9a 0
9b Tentative deduction (All Other Prop)	9b 0	9b 0	9b 0
9c Total tentative deduction	9c 0	9c 0	9c 0
10a CO disallowed from prior year (Qual Real Prop)	10a 0	10a 0	10a 0
10b CO disallowed from prior year (All Other Prop)	10b 810	10b 796	10b 810
10c Total carryover of disallowed section 179 deduction from 2010 Form 4562 (line 13)	10c 810	10c 796	10c 810
11 Business income limitation			
a Business taxable income calculated for Section 179 limitation	11a 0	11a -2,766	11a 0
b Form 4797 gain or loss	11b 0	11b 0	11b 0
c Schedule D Business gain or loss	11c 0	11c 0	11c 0
d Adjustments to business taxable income	11d 0	11d 0	11d 0
e Adjusted business taxable income. Combine lines 11a through 11d	11e 0	11e -2,766	11e 0
f Enter the smaller of business income (not less than zero) or line 5	11f 0	11f 0	11f 0
12a Allowable section 179 deduction (Qual Real Prop)	12a 0	12a 0	12a 0
12b Allowable section 179 deduction (All Other Prop)	12b 0	12b 0	12b 0
12c Total allowable section 179 expense deduction	12c 0	12c 0	12c 0
13a Qual Real Prop to be depreciated (does not carryover to 2012)	13a 0	13a 0	13a 0
13b Carryover of disallowed deduction to 2012 (All Other Prop)	13b 810	13b 796	13b 810
13c Total carryover of disallowed deduction to 2012 (from line 13b)	13c 810	13c 796	13c 810
14 Difference in regular Section 179 deduction and AMT Section 179 deduction	14	14 0	