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Form 990-EZ

Department of the Treasury
Internal Revenue Service

Short Form Return of Organization Exempt From Income Tax

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

- ▶ 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.

OMB No 1545-1150

2012

Open to Public
Inspection

A For the 2012 calendar year, or tax year beginning MAY 01, 2012, and ending APRIL 30, 2012

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

C Name of organization
Prescott Trap & Skeet Club Inc
 Number & street (or P.O. box, if mail is not delivered to street addr.) PO Box 25706
 City or town, state or country, and ZIP + 4 Prescott Valley AZ 86312-5706

D Employer identification number
86-6053839

E Telephone number
(928) 772-5939

F Group Exemption Number ▶

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. ▶ \$ 154,155

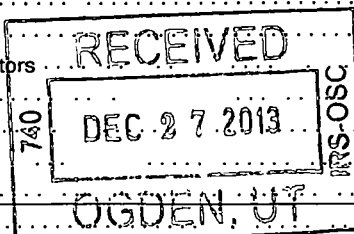
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I. ☐

REVENUE	1	Contributions, gifts, grants, and similar amounts received	1	23,708
	2	Program service revenue including government fees and contracts	2	95,285
	3	Membership dues and assessments	3	16,884
	4	Investment income	4	26
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less. cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	6a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	18,252
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)	6b	13,962	
6c	Less. direct expenses from gaming and fundraising events	6c		
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	4,290	
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less. cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	140,193	
EXPENSES	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	16,548
	13	Professional fees and other payments to independent contractors	13	670
	14	Occupancy, rent, utilities, and maintenance	14	10,368
	15	Printing, publications, postage, and shipping	15	123
	16	Other expenses (describe in Schedule O)	16	98,780
17	Total expenses. Add lines 10 through 16	17	126,489	
ASSETS	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	13,704
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	145,310
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	159,014

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2012)

SCANNED JAN 14 2013



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

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

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

[illegible]

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
35a 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
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?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the 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		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 40a ; section 4912 40a ; section 4955 40a		
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 40c		
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization 40d		
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		X
41 List the states with which a copy of this return is filed 41		
42a The organization's books are in care of 42a See attachment #3 Telephone no. 42a Located at 42a ZIP + 4 42a		
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)?		X
If "Yes," enter the name of the foreign country: 42b See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c At any time during the calendar year, did the organization maintain an office outside the U.S.?		X
If "Yes," enter the name of the foreign country: 42c		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 -- Check here 43 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 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. N/A		
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
45b 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

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

	Yes	No
46		X

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations 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

	Yes	No
47		

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

48		
----	--	--

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

49a		
-----	--	--

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

49b		
-----	--	--

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 title of each employee paid more than \$100,000	(b) 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

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
See attachment #5		

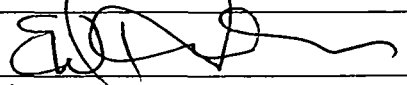
d Total number of other independent contractors each receiving over \$100,000 ▶

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 12-11-13
Ed Tomasino Treasurer
Type or print name and title

Paid Preparer Use Only

Pnt/Type preparer's name Cynthia Wallace EA Preparer's signature  Date 12/10/13 Check ☐ if self-employed PTIN P00288445
Firm's name ▶ Wallace & Assoc Inc Tax & Acct Srv LLC Firm's EIN ▶ 32-0057452
Firm's address ▶ 302 W Willis St Ste 105 Phone no 928-445-6581

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

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

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

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization

Prescott Trap & Skeet Club Inc

Employer identification number

86-6053839

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

Form 990-EZ filers are not required to complete this part.

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

a ☐ Mail solicitations

e ☐ Solicitation of non-government grants

b ☐ Internet and email solicitations

f ☐ Solicitation of government grants

c ☐ Phone solicitations

g ☒ Special fundraising events

d ☐ In-person solicitations

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

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fund- raiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total. ▶						

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

- 11** Does the organization operate gaming activities with nonmembers? ☐ Yes ☒ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☒ No
- 13** Indicate the percentage of gaming activity operated in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☒ No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c** If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information.

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions.

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☒ No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)

Depreciation and Amortization

(Including Information on Listed Property)

▶ See separate instructions.

▶ Attach to your tax return.

2012

Attachment
Sequence No 179

Name(s) shown on return

Business or activity to which this form relates

Identifying number

Prescott Trap & Skeet Club Inc DO NOT CARRY

86-6053839

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	500,000
6	(a) Description of property	(b) Cost (busn 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 2011 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	500,000
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 2013. 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	

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 2012	17	1,759
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 2012 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr. (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	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C -- Assets Placed in Service During 2012 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	1,759
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.

Form 4562 (2012)

990 PRIMARY EXEMPT PURPOSE

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

Open to Public Inspection	For calendar year 2012 or tax period beginning 05-01, and ending 04-30-2012.
Name of Organization Prescott Trap & Skeet Club Inc	Employer Identification Number 86-6053839
Primary Purpose	
Membership trap skeet club. Conducted Scholastic Clay Target Program. Conducted shooting events for members.	

990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 2: page 1 - 990-EZ Page 2, Part IV

Open to Public Inspection	For calendar year 2012 or tax period beginning 05-01-2012, and ending 04-30-2012.
Name of Organization Prescott Trap & Skeet Club Inc	Employer Identification Number 86-6053839

(A) Name and Title	(B) Average hours per week devoted to position	(C) Compensation (Form W-2/1099-MISC) (if not paid, enter -0-)	(D) Cont. to employee ben. plans & def comp.	(E) Expense account & other compensation
Ed Tomasino Treasurer	5.00	0	0	0
Bill Branson Vice President	3.00	0	0	0
Tim Nolan Director	2.00	0	0	0
John Hanna Secretary	3.00	0	0	0
Gene Nelson President	5.00	0	0	0
Larry Dubel Director	2.00	0	0	0
Sidney Swank Director	2.00	0	0	0
Robert Moses Director	2.00	0	0	0
Eugene Csicsak Director	2.00	0	0	0

990 BOOKS ARE IN CARE OF

Attachment 3 - 990-EZ Page 3, Part V, Line 42a

Open to Public Inspection	For calendar year 2012 or tax period beginning	05-01	, and ending	04-30-2012
Name of Organization				Employer Identification Number
Prescott Trap & Skeet Club Inc				86-6053839
Part V - Line 42a				

Individual Name
or
Business Name:
Wallace & Associates Income Tax & Acct Service LLC

Street Address 302 W. Willis St., #105

U S Address:
Zip code 86301 City Prescott State AZ

Foreign Address
City
Province or State
Country
Postal code
Phone Number (928) 445-6581
Fax Number (928) 445-1830

Attachment 4: Form 990-EZ, Page 4, Part VI, Line 50

Inspection

05-01-2012, and ending

04-30-2012.

Employer Identification Number

86-6053839

(a) Name and Title of Each Employee Paid More Than \$100,000

(c) Reportable Compensation Forms W-2/1099-MISC

(e) Estimated amt
of other
compensations

990 PART VII - FIVE HIGHEST COMPENSATED INDEPENDENT CONTRACTORS

Open to Public Inspection		For Calendar year 2012, or tax year period beginning 05-01-2012 and ending 04-30-2012	
Name of Organization Prescott Trap & Skeet Club Inc		Employer Identification Number 86-6053839	
(a) Name and address of each independent contractor paid more than \$100,000		(b) Type of service	(c) Compensation
None			

2012 DETAIL STATEMENTS

Prescott Trap & Skeet Club Inc
86-6053839

Page 1

STATEMENT #1 - Other expenses (EOEZ Pg 1 Line 16)

Insurance Expense.....	6,915
Membership Holiday Dinner.....	3,799
Merchant Credit Card Charges.....	9,681
Office Supplies	
P. O. Box Rental.....	58
Program Supplies Expenses.....	9,455
Repairs & Maintenance - Equipment.....	2,013
Scholastic Clay Target Program Expense.....	17,053
Small Tools.....	1,040
Supplies, other.....	297
Taxes - Payroll Tax Expense.....	1,027
Taxes - Property Taxes.....	998
Taxes - State Sales Tax.....	2,095
Workers Compensation.....	1,379
Program Expenses.....	41,211
Depreciation Expense.....	1,759

TOTAL CARRIED TO EOEZ Pg 1 Line 16..... 98,780

STATEMENT #2 - Other assets end yr (EOEZ PG 2 Line 24)

Credit card receipts pending.....	4,997
Inventory.....	16,588
Equipment net of depreciation.....	12,865

TOTAL CARRIED TO EOEZ PG 2 Line 24..... 34,450

STATEMENT #3 - Total liabilities end yr (EOEZ Pg 2 Line 26)

Payroll Liabilities.....	637
Perfect 50"s Fund.....	466
Insurance Reserve.....	10,101

TOTAL CARRIED TO EOEZ Pg 2 Line 26..... 11,204

2012 Federal Depreciation Schedule

Prescott Trap & Skeet Club Inc
86-6053839

Description	Date	Method	Cost	Prior 179	Current 179	Pr Spec Allow	Curr Spec Allow	Basis	Prior Depr	Current Depr	Accum Depr	Adj Basis
General												
Stand Machines	04-30-04	200DBHY-7	34046	0	0	0	0	34046	34046	0	34046	0
Trap & Skeet Ma	04-30-04	200DBHY-7	61942	0	0	0	0	61942	61942	0	61942	0
Equipment	04-30-04	200DBHY-7	2051	0	0	0	0	2051	2051	0	2051	0
Stand Machines	04-30-04	200DBHY-7	5334	0	0	0	0	5334	5334	0	5334	0
Dell Cmptr & Ca	05-11-04	200DBHY-7	1252	0	0	0	0	1252	1252	0	1252	0
AZ Rnch Burd Ca	06-28-04	200DBHY-7	3350	0	0	0	0	3350	3350	0	3350	0
Firesafe Combo	08-21-04	200DBHY-7	108	0	0	0	0	108	108	0	108	0
Office Equipment	10-04-04	200DBHY-7	325	0	0	0	0	325	325	0	325	0
Leather Sofa	11-02-04	200DBHY-7	250	0	0	0	0	250	250	0	250	0
Color Printer	02-26-05	200DBHY-7	324	0	0	0	0	324	324	0	324	0
Custom Computer	03-14-05	200DBHY-7	754	0	0	0	0	754	754	0	754	0
Mower-Weed Cutt	03-15-05	200DBHY-7	338	0	0	0	0	338	338	0	338	0
Coin Opr TS Con	03-31-05	200DBHY-7	855	0	0	0	0	855	855	0	855	0
2 Gas Opr Weede	04-09-05	200DBHY-7	471	0	0	0	0	471	471	0	471	0
Battery Backup	04-12-05	200DBHY-7	281	0	0	0	0	281	281	0	281	0
Swivel Chair	05-11-05	200DBHY-7	25	0	0	0	0	25	25	0	25	0
Quad	10-04-05	200DBHY-7	1350	0	0	0	0	1350	1350	0	1350	0
Claymate Evolut	07-22-06	200DBHY-7	1540	0	0	0	0	1540	1540	0	1540	0
Laser Printer	12-06-06	200DBHY-7	280	0	0	0	0	280	280	0	280	0
5 Patomac Trap	11-10-09	200DBHY-7	12265	0	0	0	0	12265	6902	1532	8434	3831
Misc Equipment	11-28-09	200DBHY-7	1818	0	0	0	0	1818	1023	227	1250	568
21 Assets		Totals:	128959	0	0	0	0	128959	122801	1759	124560	4399

Equipment and Machinery

5 Stand Machine	08-26-12	200DBHY-7	4134	0	0	0	0	4134	0	0	0	4134
1 Assets		Totals:	4134	0	0	0	0	4134	0	0	0	4134
22 Assets		Grand Totals:	133093	0	0	0	0	133093	122801	1759	124560	8533

2012 Federal Depreciation Schedule

Prescott Trap & Skeet Club Inc

86-6053839

Description	Date	Method - Life	Cost	Prior 179	Current 179	Pr Spec Allow	Curr Spec Allow	Basis	Prior Depr	Current Depr	Accum Depr	Adj Basis
General												
Stand Machines	04-30-04	200DBHY-7	34046	0	0	0	0	34046	8345	0	8345	25701
Trap & Skeet Ma	04-30-04	200DBHY-7	61942	0	0	0	0	61942	15182	0	15182	46760
Equipment	04-30-04	200DBHY-7	2051	0	0	0	0	2051	503	0	503	1548
Stand Machines	04-30-04	200DBHY-7	5334	0	0	0	0	5334	1307	0	1307	4027
Dell Cmptr & Ca	05-11-04	200DBHY-7	1252	0	0	0	0	1252	383	77	460	792
A2 Rnch Burd Ca	06-28-04	200DBHY-7	3350	0	0	0	0	3350	1025	205	1230	2120
Firesafe Combo	08-21-04	200DBHY-7	108	0	0	0	0	108	33	7	40	68
Office Equipment	10-04-04	200DBHY-7	325	0	0	0	0	325	100	20	120	205
Leather Sofa	11-02-04	200DBHY-7	250	0	0	0	0	250	77	15	92	158
Color Printer	02-26-05	200DBHY-7	324	0	0	0	0	324	100	20	120	204
Custom Computer	03-14-05	200DBHY-7	754	0	0	0	0	754	230	46	276	478
Mower-Weed Cutt	03-15-05	200DBHY-7	338	0	0	0	0	338	337	1	338	0
Coin Opr TS Con	03-31-05	200DBHY-7	855	0	0	0	0	855	855	0	855	0
2 Gas Opr Weede	04-09-05	200DBHY-7	471	0	0	0	0	471	471	0	471	0
Battery Backup	04-12-05	200DBHY-7	281	0	0	0	0	281	85	17	102	179
Swivel Chair	05-11-05	200DBHY-7	25	0	0	0	0	25	9	3	12	13
Quad	10-04-05	200DBHY-7	1350	0	0	0	0	1350	1266	84	1350	0
Claymate Evolut	07-22-06	200DBHY-7	1540	0	0	0	0	1540	567	189	756	784
Laser Printer	12-06-06	200DBHY-7	280	0	0	0	0	280	228	34	262	18
5 Patomac Trap	11-10-09	200DBHY-7	12265	0	0	0	0	12265	5503	1843	7346	4919
Misc Equipment	11-28-09	200DBHY-7	1818	0	0	0	0	1818	816	273	1089	729
21 Assets	Totals:		128959	0	0	0	0	128959	37422	2834	40256	88703
Equipment and Machinery												
5 Stand Machine	08-26-12	200DBHY-10	4134	0	0	0	0	4134	0	0	0	4134
1 Assets	Totals:		4134	0	0	0	0	4134	0	0	0	4134
22 Assets	Grand Totals:		133093	0	0	0	0	133093	37422	2834	40256	92837

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