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Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

Open to Public

Department of the Treasury

	nal Revenu		The organization may have to use a copy of this return to satisfy state				inspection	/11	
				l end	ing 9/30 D Employer	0/2012	n number		
_		applicable	C Name of organization Military Service Club, Inc				on number		
∺	Address		Doing Business As		45-0394142				
Ľ	Name ch	ange	Number and street (or P O box if mail is not delivered to street address) Room/suite	•	E Telephone	enumber			
י⊒	nitial retu	ım	4417 Highway 20		(701) 662-0	221			
\square	Terminate	ed	City or town, state or country, and ZIP + 4						
	Amended	d return	Devils Lake ND 58301	1	G Gross reco	eipts \$		<u>89,513</u>	
	Application	on pending	F Name and address of principal officer	H	(a) Is this a group retu	ım for affiliat	es?Yes	X No	
			Jamess Benningtom 4417 Highway 20, Devils Lake, ND 58301	н	(b) Are all affiliates in	cluded?	Yes	No No	
	ax-exem	pt status	501(c)(3) X 501(c) (19) ◀ (insert no) 4947(a)(1) or 521	7	If "No," attach a lis	st (see instri	ictions)		
		: ► N/A		_	(c) Group exemption	number D			
							of land dament		
		rganization		rear o	f formation 1996	M State	of legal domicile	e ND	
	art I		nmary						
2013	1		•	sup	port the moral ar	nd espirit	de		
2		corps of	the ND Army National Guard						
≔ဋ									
₽Ë						• • • • • • • • • • • • • • • • • • • •			
₹	2		his box ▶ I If the organization discontinued its operations or disposed of more						
ζĕ	3		of voting members of the governing body (Part VI, line 1a)			3		7	
es	4		of independent voting members of the governing body (Part VI, line 1			4		6	
ĮΞ,	5		mber of individuals employed in calendar year 2011 (Part V, line 2a)			5		10	
ું્કું:	6		mber of volunteers (estimate if necessary)			6		5	
Z	7a		related business revenue from Part VIII, column (C), line 12	7a		2,956			
SCHOOL WANGER SCOVERANCE	b	Net unre	elated business taxable income from Form 990-T, line 34		7b		-274		
				_	Prior Year		Current Yea		
20	8		utions and grants (Part VIII, line 1h)	-		0		0	
	9		service revenue (Part VIII, line 2g)	•		0	78		
1 25	10		ent income (Part VIII, column (A), lines-3, 4, and (d)	-		97		66	
	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9a, 10cl and 11e)	\vdash		5,886		98,541	
	12	l otal rev	enue—add lines 8 through 11 (must equal Part-VIII, column (A), line 12)	+	9:	5,983		98,607	
	13		and similar amounts paid (Part IX, column (A), lines 15-32013	⊢		0		0	
	14	Benefits	a paid to or for members (Part IX, column (A), fine 4) إنتها .	\vdash		0	(E6.300		
ŝ	15		other compensation, employee benefits (Part IX, column (A), lines 5=10)	·		0,712		56,300	
Expenses	16a		ional fundraising fees (Part IX, column (A) (ine De)	\downarrow		- 4 -			
Ä	b		ndraising expenses (Part IX, columni(D), line 25)		20	3,439		25,615	
	17		penses (Part IX, column (A), lines 11a–11d, 11f–24e) penses. Add lines 13–17 (must equal Part IX, column (A), line 25)	\vdash		9,151		81,915	
	18 19		e less expenses. Subtract line 18 from line 12.	. ⊢		3,832		16,692	
- º		Revenu	e less expenses. Subtract line to from fille 12	· -	Beginning of Current		End of Yea		
Net Assets or	20	Total as	sets (Part X, line 16)	-		9,869		139,349	
Ass	21		bilities (Part X, line 26)	`		1,616		4,404	
ž Š	22		ets or fund balances. Subtract line 21 from line 20	·	-	3,253		134,945	
	art II		nature Block	·		-11			
			y, I declare that I have examined this return, including accompanying schedules and staten	nents.	and to the best of my	/ knowledge			
and	belief, it	is true, com	ect, and complete Declaration of preparer (other than officer) is based on all information of	which	preparer has any kn	owledge			
0:4			to And W						
Siç	_	_ / /	Signature of officer		∦ ^{Date}	17 1	1		
He	re	N .	Rose A Schwind			15/tu	<u>a13</u>		
			Type or print name and title				<u> </u>		
_		Prin	t/Type preparer's name Preparer's signature		Date		PTIN		
Pa	id		omas A Culmor		<i>*</i>	theck X	ıf P004937	Ω1	
Pre	eparei	' -	omas A Culmer				1. 00 .00.	<u> </u>	
Us	e Only	Y -	o's name ► Thomas A Culmer, CPA		Firm's EIN				
		Firm	n's address ► 312 Smith Dr, Devils Lake, ND 58301	_	Phone no	(701) 662			
Ма	v the II	RS discu	ss this return with the preparer shown above? (see instructions)				X Yes	No	

Form 990 (2011)

	90 (2011)		45-0394142	Page Z
Pa	rt III	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III	<u></u>	. 🗆
1	Briefly d	escribe the organization's mission:		
		ort the moral and espirit de corps of the ND Army National Guard		
		•••••••••••••••••••••••••••••••••••••••		
2	Did the	organization undertake any significant program services during the year which were not listed on		
	the prior	Form 990 or 990-EZ?		X No
3		organization cease conducting, or make significant changes in how it conducts, any program		
	services	?	· · Yes	X No
4	•	describe these changes on Schedule O.		l h
•	expense	the organization's program service accomplishments for each of its three largest program service. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to rend allocations to others, the total expenses, and revenue, if any, for each program service report	port the amount o	
4a	(Codo:) (Expenses \$ 0 including grants of \$ 0) (Revenu		0)
40	Soldier of that sele	of the year - funds were used to underwrite part of the costs of operating the competition cts the outstanding members of the North Dakota Army National Guard	••••	••••••••••••••••••••••••••••••••••••••
4b	(Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue	 ie \$	0)
	Intermur	al tournaments such as darts, pool pinnochle as well as a christmas party were held for	`	/
	the adva	ncement of the moral of the members of the North Dakota National Guard		
4c	(Code: .) (Expenses \$ 0 including grants of \$ 0) (Revenue	ie \$	0_)
		•		
		••••••		
		••••••		
		•••••		
		•		
				· · · · · · · ·
4 -1	045	arram continue (Describe in Schodule O.)		
40	•	ogram services. (Describe in Schedule O.) es \$ 0 including grants of \$ 0 (Revenue \$	0)	
4-	(Expens	es \$ 0 including grants of \$ 0) (Revenue \$		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. 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	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,		1	
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	5		
	·	3		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	6		х
	"Yes," complete Schedule D, Part I	•		_^_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		ŀ	
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part		l	
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete		1	
		11a	_X	
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? <i>If "Yes," complete Schedule D, Part VII </i>	11b		х
С	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.	11c		X
a	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	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445		v
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-		v
_	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	40.		v
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	ا د د ا		v
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	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, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance		1	
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	ا ا		V
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	18		Х
4.0	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10	\vdash	 ^
19	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	19		Х
202	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV **Checklist of Required Schedules** (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization 21 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the Х United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII. Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated 23 Х 24a 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? If "Yes," answer lines 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year Χ d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction Х 25a 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 25b Х Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or Х disgualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II. Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 Х 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): Χ a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV **b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Х c 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? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Χ 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? Х 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Χ 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, Х Χ **b** Did the organization receive any payment from or engage in any transaction with a controlled entity within Х 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 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? If "Yes," complete Schedule R, Part Х Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and Х

Military Service Club, Inc
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	经 统	5. J.	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b		變	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	7.74		***
	gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1	63,	X 3.
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 10		12.00	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	23	1	,
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Χ	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Χ	
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		<u>X</u>
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		Χ_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 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		<u>X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	20 000	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	330	***	3
	and services provided to the payor?	7a		<u>X</u>
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	3 (X
d	If "Yes," indicate the number of Forms 8282 filed during the year	N.	12	
е	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 7g		 ^-
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>9</u> 7h		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?. Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	AND THE	\ a "微"	^4L ² ,
8	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	A SEE	3853	التشتا
•	Sponsoring organizations maintaining donor advised funds.	1956	Maria.	34 2
9	Did the organization make any taxable distributions under section 4966?	9a	- X-23-E	
a	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		\vdash
ь 10	Section 501(c)(7) organizations. Enter:	1186		A
	Initiation fees and capital contributions included on Part VIII, line 12			
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		靈	
11	Section 501(c)(12) organizations. Enter:		征	
' a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			35.3
-	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		سندسممر
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	¥ 1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
•	Note. See the instructions for additional information the organization must report on Schedule O.		和	
b	Enter the amount of reserves the organization is required to maintain by the states in which		ASS	1000
-	the organization is licensed to issue qualified health plans		W.	
С	Enter the amount of reserves on hand	東京	1	
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	L	<u> </u>

Secti	ion A. Governing Body and Management							
]	Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a 7</u>						
	If there are material differences in voting rights among members of the governing body, or			j				
	if the governing body delegated broad authority to an executive committee or similar							
	committee, explain in Schedule O.							
b	Enter the number of voting members included in line 1a, above, who are independent	1b 6						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relati	onship with		-				
	any other officer, director, trustee, or key employee?		2		_X_			
3	Did the organization delegate control over management duties customarily performed by or und				V			
	supervision of officers, directors, or trustees, or key employees to a management company or o		3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 w		4					
5	Did the organization become aware during the year of a significant diversion of the organization		5 6		X			
6								
7a	Did the organization have members, stockholders, or other persons who had the power to elect		7-		Х			
	one or more members of the governing body?		7a					
b	Are any governance decisions of the organization reserved to (or subject to approval by) memb		7b		Х			
	stockholders, or persons other than the governing body?		7.0		 ^ -			
8	the year by the following:	inell dulling						
•	The governing body?		8a	X				
a b	Each committee with authority to act on behalf of the governing body?		8b	X				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be							
•	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule (9		х			
Secti	ion B. Policies (This Section B requests information about policies not required by the I	nternal Revenue Co	de.)					
		-		Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	<i></i>	10a		X			
b	If "Yes," did the organization have written policies and procedures governing the activities of such		10b					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	ore filing the form?.	11a		X			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
12a			12a		X			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could	give rise to conflicts?	12b					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy?		40-					
	describe in Schedule O how this was done		12c		X			
13	Did the organization have a written whistleblower policy?		14		x			
14	Did the organization have a written document retention and destruction policy?				 ^			
15	Did the process for determining compensation of the following persons include a review and ap independent persons, comparability data, and contemporaneous substantiation of the deliberation							
_	The organization's CEO, Executive Director, or top management official		15a		┌			
a b	Other officers or key employees of the organization		15b					
J	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).							
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arra	angement						
	with a taxable entity during the year?		16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to ev							
_	participation in joint venture arrangements under applicable federal tax law, and take steps to s							
	the organization's exempt status with respect to such arrangements?		16b		<u> </u>			
Sect	ion 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 Forms 1023 (or 1024 if applicable), 990, and	990-T (Section 501(c)(3)s	only))			
	available for public inspection. Indicate how you made these available. Check all that apply.							
	Own website Another's website X Upon request	to conflict of interest						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documer	its, conflict of interest						
00	policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the boo	nke and records of the	٠					
20								
	organization: Rose Schwind 4417 Highway 20 Devils Lake ND 58301							

-											
Form 990 (2011)			_							45-03941	42 Page 7
Part VII	Compensation of Officers, Dire	•	es, K	Сеу	Em	plo	yees	s, H	lighest Comp	ensated	
•	Employees, and Independent C										
	Check if Schedule O contains a re		<u> </u>							· · · · · ·	<u> L</u>
Section A.	Officers, Directors, Trustees, Key I	Employees, and	d Hig	hes	t C	om	pens	ate	d Employees		
1a Complete torganization's	his table for all persons required to be tax year.	e listed. Report	comp	ens	atio	n fo	r the	cal	endar year endi	ng with or within	the
_	of the organization's current officers, o	directors, truste	es (w	hetl	her i	indi	vidua	ls o	r organizations)	, regardless of a	mount
•	on. Enter -0- in columns (D), (E), and					-					
	of the organization's current key empl										
who received	organization's five current highest co reportable compensation (Box 5 of Fo and any related organizations.										
-	of the organization's former officers, k	ev emniovees	and h	niah	est i	com	nens	ate	d employees wh	no received more	e than
	eportable compensation from the orga								a ciripioyees iii		o triari
 List all c 	of the organization's former directors	or trustees tha	at rec	eive	ed, i	n th	e cap	aci	ty as a former d	irector or trustee	e of the
organization, ı	more than \$10,000 of reportable comp	ensation from t	he or	rgan	izat	ion	and a	any	related organiza	ations.	
	n the following order: individual trustee		nstitu	ıtion	al tı	rust	ees;	offic	ers; key employ	ees; highest	
·	employees; and former such persons										
Check thi	s box if neither the organization nor ar	ny related organ	izatio	on c	omp	ens	sated	an	y current officer,	director, or trus	tee.
					(0	C)					
	(A)	(B)	(do r	not ch		ition more	e than o	one	(D)	(E)	(F)
	Name and Title	Average	box, unless person is both a officer and a director/truster					an	Reportable	Reportable	Estimated
		hours per week	0 5	er an		_			compensation from	compensation from related	amount of other
		(describe hours for	Individual trustee or director	Institutional	Officer	Key e	ghe	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
		related		Ē		employee	st ox	"	(W-2/1099-MISC)	(10 2 1000 111100)	organization
		organizations in Schedule) trust	할		уее	mpe				and related organizations
		O)	8	trustee			Highest compensated employee				
				Ľ			8				
(1) Ed John	nson			l							
Member		1.00	Х	_		$oxed{oxed}$			0	0	0
(2) Jim Ber	nington	4.00									
Member	· · · · · · · · · · · · · · · · · · ·	1.00	X	├		⊢			0	0	0
(3) Rainy P Member	lerce	30.00	x			$ _{x} $			38,022	0	0
(4) Mike Ab	nerie	30.00	 ^	\vdash		┢		-	30,022	0	
President	erie	3.00	ļ		х				o	0	0
(5) Dave R	ickford										
Vice Presiden		3.00			Х				.0	0	0
(6) Orville \	Vang										
Secretary		3.00		<u> </u>	Х			_	0	0	0
	chwind		[_		_
Treasurer		3.00		-	Х			-	0	0	0
_(8)											
(9)			 			\vdash					
.67	· · · · · · · · · · · · · · · · ·							ŀ			
(10)											
(11)											
(12)											
(13)											
			1	1	1	. 7	I -	1	1		I

P	art VII Section A. Officers, Directors, Ti	rustees, Key Er	mplo	yee	s, a	nd	High	<u>est</u>	Compensated	Employe	es (coi	<u>ntinue</u>	ed)	
	(A) Name and title	(B) Average hours per week (describe	rage box, unless p				is both	n an tee)	compensation	(E) Reporta compensa from rela organizat	ation ated	an	(F) stimated nount o other pensati	f
		hours for related organizations in Schedule O)	Individual trustee or director	tututonal trustee	icer	y employee	Highest compensated employee	mer	organization (W-2/1099-MISC)	(W-2/1099-		frorga orga and	om the anization d relate anization	on d
(15)							-	-		-				
<u>(16)</u>														
(17)														
<u>(18)</u>														
(19)														
(20)														
<u>(21)</u>														
(22)														
(23)						-								
(24)									-					
(25)														
1b c	Sub-total	Section A						. ▶	38,022 0 38,022		0 0 0			0
2	Total number of individuals (including but not reportable compensation from the organizatio	limited to those	listed	da t	ove	e) wi	ho re	ceiv		• • • • • • • • • • • • • • • • • • • •	f			
3	Did the organization list any former officer, di employee on line 1a? If "Yes," complete Sche	rector, or truste	e, ke	, en	nplo	yee	, or h					3	Yes	No X
4	For any individual listed on line 1a, is the sum the organization and related organizations greindividual	eater than \$150,	,000?	If "	Yes	s, " c						4		X
5	Did any person listed on line 1a receive or act for services rendered to the organization? If "	crue compensa	tion fi	om	any	/ un	relate	ed o	organization or i	ndividual		5		X
Sec	tion B. Independent Contractors	rea, complete	Oone	aun	, , ,	0, 0	1011	5011		<u></u>	·			
1	Complete this table for your five highest comp compensation from the organization. Report of year.											n's ta:	×	
	(A) Name and business add	Iress							(B) Description of ser	vices	С	(C) Compen		_
														0
							_	\vdash						<u>0</u> 0
								\vdash						<u>0</u>
								Ļ						0
2	Total number of independent contractors (include more than \$100,000 of compensation from the	uding but not lir e organization	mited ►	to t	hos	e lis	sted a 0		ve) who receive	đ				

Part	t 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
र्घ र	1a	Federated campaigns 1a	0				
ran	b	Membership dues 1b	o				
ع ق		Fundraising events	0				
Contributions, Giffs, Grants and Other Similar Amounts	_						
ig ig	d		0	:			
S E	е	Government grants (contributions) <u>1e</u>	0				
흥합	f	All other contributions, gifts, grants, and					<u> </u>
ᅙ		similar amounts not included above 1f	0				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f: \$	0				
ပြုံ	h	Total. Add lines 1a-1f		0			
			Business Code				
eun	2a			0			
Šev	ь			0			
9	_			0			
Ž	4			0			
Š	u			0	<u> </u>		
Lau	e	All other programme and the programme		0			
Program Service Revenue	T	All other program service revenue	L				
	g	Total. Add lines 2a–2f		0			
	3	Investment income (including dividends, interes		ı			
		other similar amounts)		66	66		
	4	Income from investment of tax-exempt bond pro	ceeds▶	0			
	5	Royalties	🕨	0			
		(ı) Real	(II) Personal				
	6a	Gross rents					
	ь	Less: rental expenses					
	c	Rental income or (loss) 0	0				
	d	Net rental income or (loss)		0			
	7a	(A) Securities	(II) Other				
	/ a	assets other than inventory . 0	0				
		· -					
	D	Less: cost or other basis	ا				
		and sales expenses 0					1
	C	Cam 5. (1999)	· · · · · · · · · · · · · · · · · · ·			i	
	ď	Net gain or (loss)	<u> </u>	0			
Other Revenue	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18	0				
돌	b	Less: direct expenses b	0				
9		Net income or (loss) from fundraising events .	<u></u> . ▶	0			
		Gross income from gaming activities.					
		See Part IV, line 19	0				
	b	Less: direct expenses b	0				
		Net income or (loss) from gaming activities	•	0			
		Gross sales of inventory, less					
	Iva		190 447				
	١.		189,447				
		Less: cost of goods sold b	90,906	00.544	05.505		
	<u> </u>	Net income or (loss) from sales of inventory		98,541	95,585	2,956	
		Miscellaneous Revenue	Business Code				ļ
	11a			0			
	b			0			
	С			0			
	d	All other revenue		0			
	e	Total. Add lines 11a-11d		0			
	آ مه ا	Total revenue Con instructions	_	98 607	95 651	2 956	

Form 990 (2011) Military Service Club, Inc 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).	

	Check if Schedule O contains a response to any	question in this Par	rt IX		
	not include amounts reported on lines 6b, 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 United States. See Part IV, line 21	0	 		
2	Grants and other assistance to individuals in the	_			
_	United States. See Part IV, line 22	0			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
4	United States. See Part IV, lines 15 and 16	0			
4 5	Benefits paid to or for members			<u>-</u>	
3	trustees, and key employees	38,022			
6	Compensation not included above, to disqualified	30,022			
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	٥			
7	Other salaries and wages	9,356			_
8	Pension plan accruals and contributions (include	0,000			
_	section 401(k) and 403(b) employer contributions)	o			
9	Other employee benefits	0			
10	Payroll taxes	8,922			
11	Fees for services (non-employees):				
а	Management				
b	Legal	0			
С	Accounting	2,300			
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0	<u>.</u>		
f	Investment management fees	0			
g	Other	0			
12	Advertising and promotion	1,763			
13	Office expenses	500			
14 15	Information technology	0			
16	Occupancy	1,913			
17	Travel	0			
18	Payments of travel or entertainment expenses	<u>_</u>	···		
	for any federal, state, or local public officials	o			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates [0			
22	Depreciation, depletion, and amortization	13,222	0	0	0
23	Insurance	1,767			
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
_	(A) amount, list line 24e expenses on Schedule O.)	524			
a	Repairs Supplies	838			
D	Lisans dues and subscriptions	234			
d	Callagian aynana	2,554			
	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	81,915	0	0	0
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here ▶ ☐ if				
	following SOP 98-2 (ASC 958-720)				

Balance Sheet Part X (B) (A) Beginning of year End of year 1 47,276 1 44,595 5,880 2 2 5,960 3 0 3 0 O 4 0 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 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 0 7 20.057 8 21,306 8 9 9 Prepaid expenses and deferred charges . . . 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 216,788 Less: accumulated depreciation 10c 10b 149,300 56,656 67,488 b 11 ol 11 0 12 Ol 12 0 Investments—other securities. See Part IV, line 11 ol 13 Investments—program-related. See Part IV, line 11 13 0 14 0 14 0 15 ol 15 0 129,869 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 139,349 17 17 18 18 19 19 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D. . . Pavables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified 22 23 0 23 0 Secured mortgages and notes payable to unrelated third parties 0 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete 11,616 25 4,404 26 11.616 26 4.404 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ and Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 or Fund 29 29 Organizations that do not follow SFAS 117, check here ► X and complete lines 30 through 34. Net Assets 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 118,253 32 134,945 Retained earnings, endowment, accumulated income, or other funds. . . 32 118,253 33 134,945 33 129,869 34 139,349

Form	990 (2011) Military Service Club, Inc	4	5-0394	1142	Pa	ge 12
Par	t XI Reconciliation of Net Assets		-			
	Check if Schedule O contains a response to any question in this Part XI		· · ·	•	· ·	<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1			98	3,607
2	Total expenses (must equal Part IX, column (A), line 25)	2			81	,915
3	Revenue less expenses. Subtract line 2 from line 1	3			_16	5,692
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			118	3,253
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,	6	_		12	1,945
Dar	column (B))	. 0			134	+,945
гац	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: X Cash Accrual 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?		. [2a	Х	l
b	Were the organization's financial statements audited by an independent accountant?		. [2b		Х
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh the audit, review, or compilation of its financial statements and selection of an independent accountant? .		. [2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	1				
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 separate basis, consolidated basis, or both:		- 1			
	Separate basis X Consolidated basis 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		ſ			
	the Single Audit Act and OMB Circular A-133?		[3a		Х
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			3b		
				Form	990	(2011)

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

ZU II II ttachment

Department of the Treasury Internal Revenue Service

(99)

► See separate instructions. ► Attach to yo

Attach to your tax return.

Sequence No 179

Name(s) shown on return	Busin	ess or acti	vity to which this f	orm relates		Identifying num	ber			
Military Service Club, Inc						45-0394142				
Part Election To Expense										
Note: If you have any listed							,			
1 Maximum amount (see instruction							1	500,000		
2 Total cost of section 179 property							2	24,053		
3 Threshold cost of section 179 pro							3	2,000,000		
4 Reduction in limitation. Subtract li							4	0		
5 Dollar limitation for tax year. Subtr								I		
separately, see instructions		<u></u>		<u> </u>	<u></u>		5	500,000		
6 (a) Description of	property		(b) Co	st (business use	only)	(c) Elected cos	it			
			<u> </u>							
7 Listed property. Enter the amount										
8 Total elected cost of section 179 p							8	0		
9 Tentative deduction. Enter the sm							9	0		
10 Carryover of disallowed deduction							10			
11 Business income limitation. Enter							11			
12 Section 179 expense deduction. A							12	0		
13 Carryover of disallowed deduction					▶ 13	L	0			
Note: Do not use Part II or Part III bei					1 1 1 1			<u> </u>		
Part II Special Depreciation						roperty.) (See i	nstru	ictions.)		
14 Special depreciation allowance fo							, ,	ı		
during the tax year (see instruction							14			
15 Property subject to section 168(f)(15			
Part III MACRS Depreciation	(S)			· · · · · ·	<u> </u>	· · · · ·	16			
Part III MACKS Depreciation	(Do not inclu			e instruction	IS.)	<u> </u>				
47 MA ODO 4 d d d d d d d d d d d d d d d d d d			ion A	0044		_ · _ ·		0.705		
17 MACRS deductions for assets pla							17	9,785		
18 If you are electing to group any as						- □				
general asset accounts, check he							Ц			
Section B - Assets	Placed in Serv	rice Durin	<u>ig 2011 Tax Ye</u>	ar Using the	General Dep	reciation Syster	<u>n</u>			
	(b) Month and	1 ''	s for depreciation	(d) Recovery	ł	ł				
(a) Classification of property	year placed	1 '	s/investment use	penod (e) Conve		l ' l (a) Convention l		(f) Method	(g) De	epreciation deduction
	in service	only—s	see instructions)				—			
19 a 3-year property							—			
b 5-year property					101		├ ─			
c 7-year property			24,05 <u>3</u>	7	HY	200DB	├	3,437		
d 10-year property							Ь—			
e 15-year property							₩			
f 20-year property		<u> </u>					↓ _			
g 25-year property		<u> </u>		25 yrs.		S/L	—			
h Residential rental				27.5 yrs.	MM	S/L	—			
property	ļ			27 5 yrs.	MM	S/L	—			
i Nonresidential real			<u> </u>	39 yrs.	MM	S/L	—			
property	<u> </u>	<u> </u>		<u> </u>	MM_	S/L	Щ			
Section C - Assets F	laced in Service	e During	2011 Tax Year	Using the A	Iternative De		<u>em</u>			
20 a Class life	Į			ļ <u>.</u>		S/L	Ļ			
b 12-year				12 yrs.		S/L_	—			
c 40-year	<u> </u>	L		40 yrs.	MM	S/L	Ь			
Part IV Summary (See instru							Tar			
21 Listed property. Enter amount fro							21			
22 Total. Add amounts from line 12,										
Enter here and on the appropriate						on s	22	13,222		
23 For assets shown above and place										
of the basis attributable to section	∠DJA COSIS .				23	1				

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,

201

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Employer identification number Name of the organization Military Service Club. Inc. 45-0394142 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) . . . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year. Held at the End of the Tax Year 2a Total number of conservation easements . . . 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 8 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

_	•
Page	Z

Part	Organizations Maintaining Collection	ctions of Art, Histor	rical Treasures, or	Other Similar Asset	s (continued)
3	Using the organization's acquisition, access	ion, and other records	, check any of the fo	llowing that are a signif	icant
	use of its collection items (check all that app	oly):			
а	Public exhibition	d	Loan or exchang	e programs	
b	Scholarly research	е 🗌	Other		
С	Preservation for future generations				
4	Provide a description of the organization's c Part XIV.	ollections and explain	how they further the	organization's exempt	purpose in
5	During the year, did the organization solicit assets to be sold to raise funds rather than				Yes No
Part	IV Escrow and Custodial Arrangen	nents. Complete if the	he organization and	swered "Yes" to Form	990, Part
	IV, line 9, or reported an amount of				,
1a	Is the organization an agent, trustee, custoo			or other assets not	
	included on Form 990, Part X?				Yes No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the fol	lowing table:	· · · · · ·	
					Amount
C	Beginning balance				0
d	Additions during the year				
e	Distributions during the year				
t	Ending balance			•	0
2a b	Did the organization include an amount on f	<i>I</i> .			Yes X No
Part	V Endowment Funds. Complete if	the organization ans			
			or year (c) Two yea	ars back (d) Three years ba	ck (e) Four years back
1a	Beginning of year balance	0	0		
b	Contributions				
С	Net investment earnings, gains,				
	and losses				
d	Grants or scholarships				
е	Other expenditures for facilities				
f	and programs				
-	End of year balance	0	0	0	0
g 2	Provide the estimated percentage of the cui				· · · · · · · · · · · · · · · · · · ·
a	Board designated or quasi-endowment	▶ %	(/5, 00:2:::: (=)	,	
b	Permanent endowment	%			
С	Temporarily restricted endowment	%			
	The percentages in lines 2a, 2b, and 2c sho				
3a	Are there endowment funds not in the posse	ession of the organizat	tion that are held and	d administered for the	
	organization by:				Yes No
	(i) unrelated organizations				3a(i)
	(ii) related organizations				3a(ii)
b	If "Yes" to 3a(ii), are the related organization	•			3b
4	Describe in Part XIV the intended uses of the				
Part					
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	0		0	0
b	Buildings	0		0 0	<u>_</u>
C	Leasehold improvements	0			
d	Equipment	0	119,20		
<u>e</u>	Other	0		0 0	
Total	. Add lines 1a through 1e. (Column (d) must	equai rorm 990, Part	A, COIUMN (B), IINE 1	(O(c).) ▶	67,488

(a) Description of security or category

(including name of security)

Investments—Other Securities. See Form 990, Part X, line 12.

(b) Book value

(c) Method of valuation

Cost or end-of-year market value

Part VII

(1) Financial derivatives	0		
(2) Closely-held equity interests	0		
(3) Other	0		
(A)	0		
(B)	0		
(C)	0		
(D)	0		
(E)	0		
(F)	0		
(G)	0		
(H)	0		
(I)	0		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	O	<u> </u>	
Part VIII Investments—Program Relat	ed. See Form 990, Part X	, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation	
		Cost or end-of-year market value	
(1)	0		
(2)	0		
	0	· · · · · · · · · · · · · · · · · · ·	
(4)	0		
(5)	0		
(6)	0		
(7)	0		
(8)	0		
(9)	0		
(10)	0		
Total (Column (b) must equal Form 990, Part X, ∞I (B) line 13)	0		
Part IX Other Assets. See Form 990,	Part X, line 15.		
(;	a) Description	(b) Book val	ue
(1)			0
(2)			0
(3)			0
(4)			0
			0
			0
			0
(8)			0
<u>(9)</u>			0
(10)			0
Total. (Column (b) must equal Form 990, Part X, o		<u> ▶ </u>	0
Part X Other Liabilities. See Form 99			
1. (a) Description of liability	(b) Book value		1
	(b) Book Value		
(1) Federal income taxes	0		
	0 1,136		
(1) Federal income taxes	0		
(1) Federal income taxes (2) Payroll taxes payable	0 1,136		
(1) Federal income taxes (2) Payroll taxes payable (3) Sales tax payable	0 1,136		
(1) Federal income taxes (2) Payroll taxes payable (3) Sales tax payable (4)	0 1,136 3,268 0		
(1) Federal income taxes (2) Payroll taxes payable (3) Sales tax payable (4) (5) (6) (7)	0 1,136 3,268 0		
(1) Federal income taxes (2) Payroll taxes payable (3) Sales tax payable (4) (5) (6) (7) (8)	0 1,136 3,268 0		
(1) Federal income taxes (2) Payroll taxes payable (3) Sales tax payable (4) (5) (6) (7)	0 1,136 3,268 0		
(1) Federal income taxes (2) Payroll taxes payable (3) Sales tax payable (4) (5) (6) (7) (8) (9) (10)	0 1,136 3,268 0		
(1) Federal income taxes (2) Payroll taxes payable (3) Sales tax payable (4) (5) (6) (7) (8) (9) (10) (11)	0 1,136 3,268 0 0 0 0 0 0 0		
(1) Federal income taxes (2) Payroll taxes payable (3) Sales tax payable (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	0 1,136 3,268 0 0 0 0 0 0 0 0 4,404		
(1) Federal income taxes (2) Payroll taxes payable (3) Sales tax payable (4) (5) (6) (7) (8) (9) (10)	0 1,136 3,268 0 0 0 0 0 0 0 0 4,404 e the text of the footnote to the	ne organization's financial statements that repor	ts the

Sched	ule D (Form 990) 2011		_	Page 4
Par	Reconciliation of Change in Net Assets from Form 990 to Audite	d Financial	Stateme	nts
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	0
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	0
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	0
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV.)		8	
9	Total adjustments (net). Add lines 4 through 8		9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		10	0
	Reconciliation of Revenue per Audited Financial Statements Wit		per Retu	rn
1	Total revenue, gains, and other support per audited financial statements		_	T T
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
- a	Net unrealized gains on investments			
b	Donated services and use of facilities			
c	Recoveries of prior year grants			
d	Other (Describe in Part XIV.)			
e	Add lines 2a through 2d		2e	- o
3	Subtract line 2e from line 1		3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
a	Other (Describe in Part XIV.)			
b	Add lines 4a and 4b.		4c	- 0
C	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			0
5				<u>-</u>
	t XIII Reconciliation of Expenses per Audited Financial Statements W		s per Ke	turn
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities			
b	- · · · · · · · · · · · · · · · · · · ·			
C	——————————————————————————————————————			1
d	——————————————————————————————————————		2e	0
e	Add lines 2a through 2d		3	0
3	1 1		<u> </u>	<u> </u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIV.)			-
c	Add lines 4a and 4b			0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)] 3	10
	t XIV Supplemental Information		5 . 0	
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	lines 1a and 4;	Part IV, I	ines 1b
	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, I	ines 2d and 4t	o. Also co	mplete
this	part to provide any additional information.			
				

Schedule D (Form	n 990) 2011	Page 5
Part XIV	Supplemental Information (continued)	
Lait XIV	Supplemental information (community)	
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Military Service Club, Inc

45-0394142

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

2011

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

Military Service Club, Inc	45-0394142
Form 990 Part VI Section B Line 15 Compensation of key employees is reviewed by the board	of
directors.	
Form 990 Part VI Section C Line 19 When requested a copy is made for the requestor.	
	
	·····

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization	Employer Identification number
Military Service Club, Inc	45-0394142
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Elections

Election to NOT claim first-year special depreciation - All Property

Pursuant to IRC Section 168(k)(2)(D)(iii), the Taxpayer elects out of first-year special depreciation for all depreciable property placed in service during the current tax year.

Det	Detail Report			9/30/2012	Military	Service Club, Inc	45-0394142							
066					216,787		0	0 0	0	216,787				
Item	Description of	Date	Asset	Bus	Cost or	Sec. 179	Credit	Special	Salvage	Recovery		Recovery	Method	, Con-
ž	Property	Placed in	Code	Use	Other	Deduction		Allowance	Value	Basis	AMT	Period		vention
	"**" indicates DISPOSED	Service		%	Basis						Туре	(years)		Code
	Freezer	5/24/2006	F-10	F-10 100 00%	3,536		0	0	0	3,536		7	SUGDS	¥
	Charbroiler	5/24/2006	F-10	100 00%	680		0	0	0	089		7	SU/GDS	È
	Steamtable	5/24/2006	F-10	100.00%	2,898		0	0	0	2,898		7	SU/GDS	눞
	Ice bin	6/6/2006	F-10	100 00%	1,173		0	0	0	1,173		7	SUGDS	¥
	Security cameras	9/26/2007	<u>π</u>	100 00%	1,658		0	0	0	1,658		2	SUGDS	¥
	Porch heater	11/8/2007	F-10	100 00%	150		0	0	0	150		7	200DB	È
	2 freezers	6/5/2008	F-10	100.00%	1,470		0	0	0	1,470		7	200DB	¥
	credit card terminal	10/29/2008	F.6	100 00%	383		0	0	0	383		ъ	200DB	È
	Misc equipment	1/28/2010	F-10	100 00%	280		0	0	0	280		7	200DB	¥
	Cash register system	1/26/2012	F-10	100 00%	10,168		0	0	0	10,168		7	200DB	È
	Pop corn machine	3/20/2012	F-10	100.00%	493		0	0	0	493		7	200DB	È
	furniture	2/23/2012	F-10	100 00%	9,732		0	0	0	9,732		7	200DB	¥
	≥	10/5/2011	F-1	100 00%	3,660		0	0	0	3,660		7	200DB	¥
	SubTotals				216,787		0	0	0	216,787				
	Less Disposed Assets			•	(0))) (0	(0 (0	(0)	6				
	Ending Totals				216,787		0	0	0	216,787				
				•										

066					216,787	0		0		Į				
Item No	Description of Property	Date Placed in	Asset	Bus. Use	Cost or Other	Sec. 179 Deduction	Credit	Special Allowance	Salvage Value	Recovery Basis	AMT	Recovery Period	Method	Convention
	"**" Indicates DISPOSED	Service		%	Basis						Туре	(years)		Code
	Leasehold improvements	5/1/2004	R-5	100 00%	53,778	0	J	0	0	53,778	~	15	SU/GDS	Σ
	Leasehold improvements	11/15/2004	R-5	100 00%	152	0	J	0	0	152	~ 1	15	SL/GDS	Σ
	Lesehold improvements	12/15/2004	R-5	100 00%	177	0	•	0	0	177	_	15	SUGDS	Σ
	Leasehold improvements	1/15/2005	R-5	100.00%	318	0		0	0	318	.	15	SUGDS	Σ
	Leasehold improvements	2/15/2005	R-5	100.00%	27,242	0	_	0	0	27,242	~	15	SUGDS	Σ
	Leasehold improvements	3/15/2005	R-5	100 00%	282	0	•	0	0	282	~	15	SU/GDS	Σ
	Leasehold improvements	4/15/2005	R-5	100 00%	8,005	0		0	•	8,005	10	15	SU/GDS	Σ
	Leasehold improvements	5/15/2005	R-5	100.00%	471	0		0	0		_	15	SUGDS	Σ
	Leasehold improvements	8/15/2005	R-5	100 00%	4,161	0		0	_		_	15	SU/GDS	Σ
	Leasehold improvements	7/16/2005	R-5	100.00%	1,255	0		0	•	1,255	.	15	SUGDS	Σ
	Leasehold improvements	10/10/2006	R-5	100 00%	1,742	0		0	•	1,742	~	15	SUGDS	Σ
	Misc equip and furniture	9/30/2001	F-10	100 00%	35,333	0		0	0	35,333		S	200DB	Ì
	Misc equip and furniture	10/1/2001	F-10	100 00%	7,187	0	_	0	0	7,187	_	7	200DB	Ì
	Popcorn popper	10/31/2001	F-10	100.00%	851	0	_	0	•	851	_	7	200DB	¥
	Misc cooking equipment	1/1/2002	F-10	100 00%	1,442	0		0	•	1,442	2	7	200DB	¥
	Grill	7/29/2002	F-10	100 00%	554	0		0	0		4	7	200DB	¥
	Stereo system	9/24/2002	F-10	100.00%	1,094	0		0		1,094	₹	7	200DB	Ì
	Dell computer	11/14/2002	F-5	100.00%	1,404	0	-	0	0	1,404	₹	သ	200DB	¥
	Printer	11/29/2002	F-5	100.00%	289	0		0	0	289	on.	က	200DB	눞
	Cash register	11/15/2003	F-10	100.00%	396	0		0		396	G	7	SL/GDS	¥
	Kitchen utensıls	11/29/2003	F-10	100 00%	36	0		0		98	G	7	SU/GDS	¥
	Microwave & fryer	1/6/2004	F -10	100.00%	101	0		0	_	101	_	7	SUGDS	¥
	Cooler	4/22/2004	F-10	100 00%	11,886	0		0	_	11,886	ω	7	SUGDS	Ì
	2 roasters	5/18/2004	F-10	100 00%	111	0		0	_	111	_	7	SL/GDS	Ì
	Roaster	7/28/2004	F-10	100 00%	117	0		0		0 117		7	SU/GDS	¥
	Drop in ice bins	4/5/2005	F-10	100 00%	483	0		0		0 483	က	7	SUGDS	¥
	3 compartment sink	4/5/2005	F-10	100.00%	808	0		0		0 809	o	7	SUGDS	Ì
	16 bar stools	4/11/2005	F-10	100 00%	1,214	0		0			44	7	SU/GDS	Ì
	Custom dish table	4/19/2005	F-10	100 00%	4,568	0				•	œ	7	SU/GDS	Ì
	1.5 Disposer package	4/19/2005	F-10	100 00%	1,706	0		0		0 1,706	ဖ	7	SUGDS	Ì
	Hot water sanitizer	4/19/2005	F-10	100.00%	1,016	0					ဖ	7	SUGDS	₹
	Custom serving counter	4/19/2005	F-10	100 00%	1,643	0					ဗ	7	SUGDS	₹
	Work table	4/19/2005	F-10	100.00%	1,391	0				-	_	7	SUGDS	È
	36x60 8/s table	4/19/2005	F-10	100 00%	714	0					4	7	SUGDS	È
	122 Formica	4/19/2005	F-10	100 00%	336	0				••	9	7	SUGDS	È
	Portable motion detector	8/8/2005	F-10	100 00%	59	0		0		0 29	o	7	SUGDS	È
	Cash register	6/20/2005	F-10	100 00%	327	0					7	7	SU/GDS	Ŧ
	Undercounter dishwasher	8/2/2005	F-10	100.00%	3,897	0		0		ຕັ	7	7	SU/GDS	Ŧ
	Misc equipment	11/16/2005	F-10	100 00%	700	0					0	7	SU/GDS	Ŧ
	Karaoke machine	5/28/2006	F-10	100 00%	3,075	0			0	က်	5	7	SU/GDS	Ì
	2 heat lamps	5/24/2008	F-10	100 00%	214	0		0	_	0 214	4	7	SUGDS	¥

Detail Report

290			136,078	13,222	149,300
Item	Description of	Date	Prior Accum.	2011	2011
ò	Property	Placed in	Deprec.,	Current	Accum.
	"**" indicates DISPOSED	Service	179, Bonus	Deprec.	Deprec.
	Leasehold improvements	5/1/2004	26,889	3,585	30,474
	Leasehold improvements	11/15/2004	65	10	75
	Lesehold improvements	12/15/2004	77	12	89
	Leasehold improvements	1/15/2005	137	21	158
	Leasehold improvements	2/15/2005	11,805	1,816	13,621
	Leasehold improvements	3/15/2005	123	19	142
	Leasehold improvements	4/15/2005	3,470	534	4,004
	Leasehold improvements	5/15/2005	203	31	234
	Leasehold improvements	8/15/2005	1,802	277	2,079
	Leasehold improvements	7/16/2005	545	8	629
	Leasehold improvements	10/10/2006	522	116	638
	Misc equip and furniture	9/30/2001	35,333	0	35,333
	Misc equip and furniture	10/1/2001	7,187	0	7,187
	Popcorn popper	10/31/2001	851	0	851
	Misc cooking equipment	1/1/2002	1,442	0	1,442
	Grill	7/29/2002	554	0	554
	Stereo system	9/24/2002	1,094	0	1,094
	Dell computer	11/14/2002	1,404	0	1,404
	Printer	11/29/2002	289	0	289
	Cash register	11/15/2003	396	0	396
	Kitchen utensıls	11/29/2003	36	0	36
	Microwave & fryer	1/6/2004	100	0	100
	Cooler	4/22/2004	11,886	0	11,886
	2 roasters	5/18/2004	111	0	111
	Roaster	7/28/2004	117	0	117
	Drop in ice bins	4/5/2005	448	35	483
	3 compartment sink	4/5/2005	752	57	808
	16 bar stools	4/11/2005	1,126	87	1,213
	Custom dish table	4/19/2005	4,244	324	4,568
	1.5 Disposer package	4/19/2005	1,585	121	1,706
	Hot water sanitizer	4/19/2005	943	73	1,016
	Custom serving counter	4/19/2005	1,528	115	1,643
	Work table	4/19/2005	1,292	66	1,391
	36x60 8/s table	4/19/2005	663	51	714
	122 Formica	4/19/2005	312	24	336
	Portable motion detector	8/8/2005	26	2	28
	Cash register	6/20/2005	304	23	327
	Undercounter dishwasher	8/2/2005	3,618	278	3,896
	Misc equipment	11/16/2005	920	100	650
	Karaoke machine	5/28/2006	2,415	439	2,854
	2 heat lamps	5/24/2008	169	31	200

Detail Report

990			136,078	13,222	149,300
Item	Description of	Date	Prior Accum	2011	2011
Š	Property	Placed in	Deprec,	Current	Accum
	"**" indicates DISPOSED	Service	179, Bonus	Deprec	Deprec.
	Freezer	5/24/2006	2,778	505	3,283
	Charbroiler	5/24/2006	534	26	631
	Steamtable	5/24/2006	2,276	414	2,690
	Ice bin	6/6/2006	922	168	1,090
	Security cameras	9/26/2007	1,658	0	1,658
	Porch heater	11/8/2007	103	13	116
	2 freezers	6/5/2008	1,011	131	1,142
	credit card terminal	10/29/2008	274	44	318
	Misc equipment	1/28/2010	109	49	158
	Cash register system	1/26/2012	0	1,453	1,453
	Pop corn machine	3/20/2012	0	70	70
	furniture	2/23/2012	0	1,391	1,391
	≥	10/5/2011	0	523	523
	SubTotals		136,078	13,222	149,300
	Less: Disposed Assets		0	(0)	(0)
	Ending Totals		136.078	13,222	149,300