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Form **990-EZ****Short Form**
Return of Organization Exempt From Income TaxUnder 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**Department of the Treasury
Internal Revenue Service**A For the 2012 calendar year or tax year beginning and ending****B** Check if applicable

- ☐ Address change
☐ Name change
☐ Init at return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization**Ames-Bern Amesville Volunteer
Firefighters, Inc**

Number and street (or P O box if mail is not delivered to street address)

PO Box 186

Room/suite

City or town state or country and ZIP 4

Amesville**OH 45711****D** Employer identification number**31-1751472****E** Telephone number**740-448-1040****F** Group Exemption

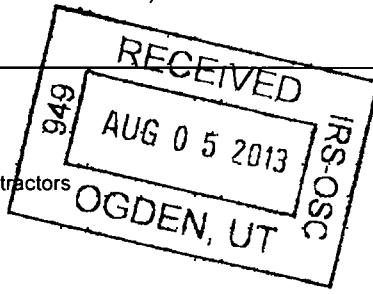
Number ►

G Accounting Method ☐ Cash ☒ Accrual Other (specify) ►**I** Website ► **N/A****J** Tax exempt status (check only one) — ☒ 501(c)(3) ☐ 501(c)() (insert no) ☐ 4947(a)(1) or ☐ 527**H** Check ☒ if the organization is not required to attach Schedule B (Form 990 990 EZ or 990 PF)**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► \$ **109,571****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	19,481
	2	Program service revenue including government fees and contracts	2	78,592
	3	Membership dues and assessments	3	
	4	Investment income	4	3,124
	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	6	
	6a	Gross income from gaming (attach Schedule G if greater than \$15 000)	6a	
	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	
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		
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	8,374	
9	Total revenue Add lines 1 2 3 4 5c 6d 7c and 8	9	109,571	
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	
	13	Professional fees and other payments to independent contractors	13	575
	14	Occupancy rent utilities and maintenance	14	894
	15	Printing publications postage and shipping	15	
	16	Other expenses (describe in Schedule O)	16	78,959
	17	Total expenses Add lines 10 through 16	17	80,428
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	29,143
	Net Assets	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
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	499,347



For Paperwork Reduction Act Notice see the separate instructions

Form **990-EZ** (2012)

b 14

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	33	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)	34	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)?	35a	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	35b	
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	35c	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	36	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?	37b	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?	38a	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	40b	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 None		
42a The organization's books are in care of WILLIAM GATES Telephone no 740-448-1040 18865 SAND ROCK ROAD Located at AMESVILLE OH ZIP + 4 45711		
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 42b		X
See the instructions for exceptions and filing requirements for Form TD F 9022.1 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.? If Yes, enter the name of the foreign country 42c		X
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43		
44a Did the organization maintain any donor advised funds during the year? If Yes, Form 990 must be completed instead of Form 990-EZ 44a		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 44b		X
c Did the organization receive any payments for indoor tanning services during the year? 44c		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 44d		
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 45a		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) 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

	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		X
48		X
49a		X
49b		

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

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

- 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

(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
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

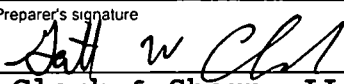
(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

- 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 ▶ ☒ 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		8-2-13
	Signature of officer	Date
	William Gates	Treasurer
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Garett W. Clark		7/29/13		P00005967
	Firm's name ▶	Firm's EIN ▶			
	Cotner, Cooley, Clark & Sharp, LLC	31-1386598			
	Firm's address ▶	Phone no			
	108 E Main St McArthur, OH 45651	740-596-5126			

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

SCHEDULE A
(Form 990 or 990 EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust

▶ Attach to Form 990 or Form 990 EZ ▶ See separate instructions

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization

**Ames-Bern Amesville Volunteer
Firefighters, Inc**

Employer identification number

31-1751472

Part I Reason for Public Charity Status (All organizations must complete this part) See instructions

The organization is not a private foundation because it is (For lines 1 through 11 check only one box)

- 1 ☐ A church convention of churches or association of churches described in **section 170(b)(1)(A)(i)**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)** (Attach Schedule E)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)** Enter the hospital's name
city and state
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in
section 170(b)(1)(A)(iv) (Complete Part II)
- 6 ☐ A federal state or local government or governmental unit described in **section 170(b)(1)(A)(v)**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public
described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions membership fees and gross
receipts from activities related to its exempt functions—subject to certain exceptions and (2) no more than 33 1/3% of its
support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses
acquired by the organization after June 30 1975 See **section 509(a)(2)** (Complete Part III)
- 10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**
- 11 ☐ An organization organized and operated exclusively for the benefit of to perform the functions of or to carry out the
purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section**
509(a)(3) Check the box that describes the type of supporting organization and complete lines 11e through 11h
- a ☐ Type I b ☐ Type II c ☐ Type III—Functionally integrated d ☐ Type III—Non functionally integrated
- e ☐ By checking this box I certify that the organization is not controlled directly or indirectly by one or more disqualified persons
other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1)
or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I Type II or Type III supporting
organization check this box ☐
- g Since August 17 2006 has the organization accepted any gift or contribution from any of the
following persons?

- (i) A person who directly or indirectly controls either alone or together with persons described in (ii) and
(iii) below the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

For Paperwork Reduction Act Notice see the Instructions for
Form 990 or 990 EZ

Schedule A (Form 990 or 990 EZ) 2012

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5 7 or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)	1,072	1,190	250	2,150	19,481	24,143
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	92,149	67,897	74,187	52,757	78,592	365,582
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	93,221	69,087	74,437	54,907	98,073	389,725
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6 Public support. Subtract line 5 from line 4						389,725

Section B Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	93,221	69,087	74,437	54,907	98,073	389,725
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,668	2,551	3,583	3,694	3,124	16,620
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part IV.)	480	3,733	11,341	9,268	8,374	33,196
11 Total support. Add lines 7 through 10						439,541
12 Gross receipts from related activities, etc. (see instructions)					12	90,090

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ☐**Section C Computation of Public Support Percentage**

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	88.67%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	86.38%

16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ☒**b 33 1/3% support test—2011.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ☐**17a 10% facts and circumstances test—2012.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts and circumstances test, check this box and stop here. Explain in Part IV how the organization meets the facts and circumstances test. The organization qualifies as a publicly supported organization. ☐**b 10% facts and circumstances test—2011.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts and circumstances test, check this box and stop here. Explain in Part IV how the organization meets the facts and circumstances test. The organization qualifies as a publicly supported organization. ☐**18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II
If the organization fails to qualify under the tests listed below please complete Part II.)**Section A Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ► <input type="checkbox"/>						

Section C Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15.	16	%

Section D Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)).	17	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17.	18	%

19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ► ☐

b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ► ☐

Part IV Supplemental Information Complete this part to provide the explanations required by Part II line 10 Part II line 17a or 17b and Part III line 12. Also complete this part for any additional information. (See instructions)

Part II, Line 10 - Other Income Detail

FUNDRAISERS	\$	33,196
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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ

OMB No 1545-0047

2012

Open to Public
Inspection

**Ames-Bern Amesville Volunteer
Firefighters, Inc**

Employer identification number

31-1751472

Form 990-EZ, Part I, Line 8 - Other Revenue

Description	Amount
FUNDRAISERS	\$ 7,354
200 CLUB	\$ 950
REIMBURSEMENT	\$ 70
Total	\$ 8,374

Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Expenses	
FD SUPPLIES & REPAIRS	\$ 35,239
FESTIVAL EXPENSE	\$ 9,994
FIREFIGHTER TRAINING	\$ 1,141
TRUCK OPERATIONS & REPAIR	\$ 3,003
INSURANCE	\$ 175
OFFICE SUPPLIES	\$ 1,758
DUES & MEMBERSHIP	\$ 225
COMMUNITY RELATIONS	\$ 1,039
TELEPHONE	\$ 1,080
WORKERS COMP	\$ 1,002
Non-investment Depreciation	\$ 24,303
Total	\$ 78,959

Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beg	of Year	End of Year
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Name of the organization

Ames-Bern Amesville Volunteer

Employer identification number

31-1751472

	\$	470,907	\$	470,907
Less Accumulated Depreciation	\$	246,033	\$	270,336
Total	\$	224,874	\$	200,571

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

2012Attachment
Sequence No **179**Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions

▶ Attach to your tax return

Name(s) shown on return

**Ames-Bern Amesville Volunteer
Firefighters, Inc**

Identifying number

31-1751472

Business or activity to which this form relates

Indirect Depreciation**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	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less enter 0 If married filing separately see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c) lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2011 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10 but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 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	12,792

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	11,511
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		

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 depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3 year property						
b 5 year property						
c 7 year property						
d 10 year property						
e 15 year property						
f 20 year property						
g 25 year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	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	24,303
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)

DAA

There are no amounts for Page 2