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SCANNED JUN 1 1 2013

Form **990-EZ**

Department of the Treasury

Internal Revenue Service

Short Form Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 51(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

Α	For the	2012 caleng	dar year, or tax year beginning , and ending	g	_				
В	Check if a	applicable	C Name of organization D Employer identification number						
	Address	change							
Щ	Name cha	ange	Soo Line Historical & Technical Soc 39-1418948						
	Initial retu	ıru	Number and street (or P O box, if mail is not delivered to street address)			Room/suite		hone number	
	Terminate	ed	39105 Fishermans Ln				90	6-523-9209	
	Amended	return	City or town, state or country, and ZIP + 4	-			F Grou	p Exemption	
Ļ		on pending	Chassell MI 49916	<u> </u>				per ►	
G.		iting Method						if the organization is not	
ļ,			v.sooline.org			 '		ach Schedule B	
<u>J</u>				947(a)(1) or	52			0-EZ, or 990-PF)	
K	Check		e organization is not a section 509(a)(3) supporting organization o				_		
Ec.			000 A Form 990-EZ or Form 990 return is not required though Fo	orm 990-N	(e-postc	ard) may be r	equired (se	e instructions) But if	
	_		poses to file a return, be sure to file a complete return						
L			7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or low) are \$500,000 or more, file Form 990 instead of Form 990-EZ	more, or if	total asse	ets (Part II,	ì.	07 650	
-	Part I		nue, Expenses, and Changes in Net Assets or Fur	nd Balan	000 (0	oo the ineter	\$		
	aitt		if the organization used Schedule O to respond to any que		•		ictions for	X	
1	1		, gifts, grants, and similar amounts received			· ·	1	12,543	
	2		rvice revenue including government fees and contracts				2	50,584	
	3	_	o dues and assessments	See S	tate	ment	3	34,453	
•	4	Investment i	income				4	70	
١ ـ	5a	Gross amou	unt from sale of assets other than inventory	5a					
8	b	Less cost o	other passe and sales expenses	5b					
\; •^~; '	С	Gain or (loss)	rom sale of assets other than inventory (Subtract line 5b from line 5a)		-		5c		
CLUT	6	Gaming and	from draising everital 2013						
īe	а	Gross incom	netrom gaming (attach Schedulers) if greater than						
Revenue		\$15,000)		6a					
	b		ne from fundraising events inot including \$	of co	ntributio	ns			
() () () () () () () () () ()			ising events reported on line 1) (attach Schedule G if the		1				
			n gross income and contributions exceeds \$15,000)	6b					
1	1		expenses from gaming and fundraising events	6c					
<u> </u> _	d		or (loss) from gaming and fundraising events (add lines 6a and 6	b and subt	ract				
-	_	line 6c)		1 _ 1	1		6d		
	7a		s of inventory, less returns and allowances	7a					
-	[Less cost of		7b			─ <u></u>		
	C	•	or (loss) from sales of inventory (Subtract line 7b from line 7a)				7c		
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8				8 9	97,650	
	10		similar amounts paid (list in Schedule O)				10	670	
	11		d to or for members				11		
, 0	42	·	her compensation, and employee benefits				12		
Ses	13		if fees and other payments to independent contractors				13	10,713	
Expenses	14		, rent, utilities, and maintenance				14	6,930	
Ж	15	•	blications, postage, and shipping				15	43,206	
	16		nses (describe in Schedule O)				16	32,949	
	17	•	nses. Add lines 10 through 16				▶ 17	94,468	
	18		deficit) for the year (Subtract line 17 from line 9)				18	3,182	
Net Assets	19		or fund balances at beginning of year (from line 27, column (A)) (r	nust agree	with				
Ass			figure reported on prior year's return)	-			19	195,345	
늘	20	Other chang	ges in net assets or fund balances (explain in Schedule O)				20		
-	21	Net assets o	or fund balances at end of year. Combine lines 18 through 20				▶ 21	198 527	

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2012)

	transaction. It is, complete roun bood-1			400	.L	1 23
41	List the states with which a copy of this return is filed ▶ None					
42a	The organization's books are in care of ▶ C. David Pulse	Telephone no	•	906-52	23-9	}20
	39105 Fishermans Lane					
1	Located at ▶ Chassell MI	ZIP + 4		49916		
ੂ `b	At any time during the calendar year, did the organization have an interest in or a signature or other auth	ority over			Yes	No
-	a financial account in a foreign country (such as a bank account, securities account, or other financial account	count)?		42b		X
3Ģ.	If "Yes," enter the name of the foreign country					
•	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign B	ank				
	and Financial Accounts.					
, C	At any time during the calendar year, did the organization maintain an office outside the U.S.?			42c		X
	If "Yes," enter the name of the foreign country			<u>-</u>		
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			
					Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be					
	completed instead of Form 990-F7			44a	1	l x

44 completed instead of Form 990-EZ Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ

C Did the organization receive any payments for indoor tanning services during the year?

If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Did the organization have a controlled entity within the meaning of section 512(b)(13)? 45a

Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)

X

44b

44c

44d

45a

COLILI	990-62	(2012) SOO LINE HIStorical	& Technic	al 50C 39-14	18948		T	age 4
46 '		` ne organization engage, directly or indirectly, in political ndidates for public office? If "Yes," complete Schedule (s on behalf of or in oppo	sition	46	Yes	No X
Pa	rt VI	Section 501(c)(3) organizations only All section 501(c)(3) organizations must answ 50 and 51	·		,	nes	l	
		Check if the organization used Schedule O to	o respond to any	question in this Part	VI		T	
47		ne organization engage in lobbying activities or have a s	section 501(h) elec	tion in effect during the t	ах	47	Yes	No
40	year? If "Yes," complete Schedule C, Part II Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E						-	X
48 49a		e organization a school as described in section 170(b)(1 ne organization make any transfers to an exempt non-cl				48	 	X
b		es," was the related organization a section 527 organization		ganization		49a 49b	 	_
50		plete this table for the organization's five highest compe		(other than officers, dire	ectors trustees and key	430	I	——
٧.		oyees) who each received more than \$100,000 of comp						
·\ha		(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimate other con		
No	one				deterred compensation			
i, C								
' ;								
-						-		
٠, f		number of other employees paid over \$100,000		>				
51	\$100,	olete this table for the organization's five highest compe ,000 of compensation from the organization. If there is a	ensated independe none, enter "None	nt contractors who each	received more than			
;	(a) N	Name and address of each independent contractor paid more	than \$100,000	(b) Typ	e of service	(c) Compe	nsation	١
No	ne							
,								
						•		
;								
-								
	Total	number of other independent contractors each receiving	ng over \$100.000	•				
52		ne organization complete Schedule A? Note All section exempt charitable trusts must attach a completed Sched		ations and 4947(a)(1)	•	X Yes		No
	r penalt	ties of perjury, I declare that I have examined this return, include and complete. Declaration of preparer (other than officer) is be	ding accompanying s			<u> </u>		
<u> </u>		Cellail			-			
Sigr		Signature of officer C. David Pulse TARAS	UNEN	Da	5-14-13			
Here	₹	Type or print name and title	U I U I V U		5-17-13	 		—
		Print/Type preparer's name Pre	parer's signature	1 - 1	Date Check	If PTIN	· · · ·	
Paid	i	Laurie L. Aho	Joh h Was	ATT (YA			43264	19
Prep	oarer	Firm's name Joseph M. Daavet	tila, PC,	CPA	Firm's EIN			
Use	Only	Firm's address P.O. Box 488						
.	4b - 10		931		Phone no 9	06-482		7
way	me IR	S discuss this return with the preparer shown above? S	ee instructions			Form 99	es 0_F7	No (2012)
						rum 33	リーĽ と	(2012)

SCHEDULE A (Form 990 or 990-EZ)

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

			Soo Line His	storical &	Techn:	ical	Soc			39-	-141	8948		
Pa	rt I	Reas	on for Public Charity	Status (All organ	nizations	must co	mplete	this pa	rt) Se	e inst	ruction	าร		
he	orga	nızatıon ıs not	a private foundation because	se it is (For lines 1 th	rough 11, c	heck only	one box)						
) 1		A church, cor	nvention of churches, or ass	sociation of churches	described i	n section	170(b)(1)(A)(i).						
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)												
3	П		a cooperative hospital servi			tion 170	(b)(1)(A)(i	ıii).						
4	П	A medical res	search organization operate	d in conjunction with	a hospital d	described	ın sectio	n 170(b	(1)(A)(i	ii). Ente	er the ho	ospital's	name.	
i		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	Ħ	A rederal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public												
•	لـــا	-	section 170(b)(1)(A)(vi). (C	•	опррои по	m a gove	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	unit or i		genera	n pabilo	•		
8	\Box		trust described in section	•	nolete Part	ш								
9	X	-	on that normally receives (•		contributio	ons mei	mhershi	n fees	and are	188		
•			activities related to its exen								_	,33		
			gross investment income ai	•		-								
		• •	he organization after June 3			•			,	4311103	303			
10	\Box		on organized and operated	•				•						
11	H	•	on organized and operated	•	•	•			to carn	out the	.			
r.	ш		one or more publicly support	· · · · · · · · · · · · · · · · · · ·					-			,		
			eck the box that describes t									-		
		a Type			/ I–Functiona		•	d ĺ	— ·		n-funct	lionally ir	ntegrated	
e	\Box		this box, I certify that the org					ı				•		
	ш	-	undation managers and other			=								
		or section 50	-			,	,					•		
f			ation received a written dete	ermination from the IF	RS that it is	a Type I,	Type II, o	or Type	II suppo	orting				
		-	check this box			•••			• •	•				
g		Since August	t 17, 2006, has the organiza	ition accepted any gif	t or contribi	ution from	any of th	ne						ب
•		following per		, , ,										
		(i) A persor	n who directly or indirectly co	ontrols, either alone o	r together v	with perso	ns descr	ibed in (ıı) and				Yes	No
		(III) belov	w, the governing body of the	supported organizat	ion?								11g(ı)	
		(ii) A family	member of a person descri	bed in (i) above?									11g(II)	
		(iii) A 35% c	ontrolled entity of a person	described in (i) or (ii)	above?								11g(III)	T
h		Provide the f	following information about t	the supported organiz	zation(s)							•		
· (ı	Nam	e of supported	(II) EIN	(III) Type of organi	ization	(IV) Is the c	rganization	(v) Did y	-	1 ' '	ls the	(vii) A	mount of mor	netary
	org	ganization		(described on line		1 ''	sted in your	the organ	ization in	organization in col (i) organized in the			support	
ťΪ				above or IRC sec		governing	document?		ort?		S ?			
F).						Yes	No	Yes	No	Yes	No			
A)														
B)														
C)														
D)														
											<u> </u>			
E)														
					<u></u>	ļ	<u> </u>			ļ		-		
											!			
ota	1		<u> </u>				.							

Sche	dule A (Form 990 or 990-EZ) 2012 SOC	Line His	torical o	<u>recnnic</u>	ar soc 39	-14T8349	5 Page 2
Pa	rt II Support Schedule for O						
	(Complete only if you che						alify under
<u>:</u>	Part III. If the organization	fails to qualify	under the tests	s listed below,	please comple	te Part III)	
	tion A. Public Support	4-1 2000	41,0000		1,0044	1 1 2010	1
Caler	idar year (or liscal 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	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
·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						
~~~	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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)		•••				
11	Total support. Add lines 7 through 10				<u> </u>		
12	Gross receipts from related activities, etc	(see instructions)				_1	2
13	First five years. If the Form 990 is for the	organization's firs	t, second, third, fo	urth, or fifth tax ye	ar as a section 50	1(c)(3)	. —
<u></u>	organization, check this box and stop her		4				<b>&gt;</b>
	tion C. Computation of Public Su	••	<del>_</del>		<del></del>	_I .	
14 	Public support percentage for 2012 (line 6			nn (f))		<del></del>	4 %
15 40-	Public support percentage from 2011 Sch			42 and line 44 in	22 4/20/		5 %
16a	33 1/3% support test—2012. If the organ				33 1/3% or more,	cneck this	▶ □
ь	box and stop here. The organization qual 33 1/3% support test—2011. If the organ		•		15 is 33 1/3% or m	vore	
D	check this box and stop here. The organi				13 13 33 1/3 /6 01 11	iore,	▶ □
17a	10%-facts-and-circumstances test—201	•	* * * * * * * * * * * * * * * * * * * *	-	6a or 16b and lin	e 14 is	
	10% or more, and if the organization meet	-					
	Part IV how the organization meets the "fa						
	organization			_ •••	, , ,	•	▶ □
b	10%-facts-and-circumstances test201	1. If the organizati	on did not check a	a box on line 13, 1	6a, 16b, or 17a, ai	nd line	
	15 is 10% or more, and if the organization	meets the "facts-a	and-circumstances	" test, check this t	oox and stop here		
	Explain in Part IV how the organization me	eets the "facts-and	-circumstances" te	est. The organizati	on qualifies as a p	ublicly	
12	supported organization						▶ []
18	Private foundation. If the organization did	d not check a box	on line 13, 16a, 16	b. 17a. or 17b. ch	eck this box and s	ee	

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)

Sec	tion A. Public Support			<u></u>		/	
Caler	ndar 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")	39,169	17,180	15,504	12,563	12,543	96,959
,2 18 5	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	85,962	79,231	87,756	74,056	85,107	412,112
<b>3</b>	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	125,131	96,411	103,260	86,619	97,650	509,071
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 Add lines 7a and 7b	80,962	74,231	82,756			237,949
8	Public support (Subtract line 7c from line 6)	80,962	74,231	82,756			237,949
Sec	tion B. Total Support	<u> </u>		<u></u>			271,122
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
. 9	Amounts from line 6	125,131	96,411	103,260	86,619	97,650	509,071
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,907	28	32	46	70	2,083
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	27307					2,003
С	Add lines 10a and 10b	1,907	28	32	46	70	2,083
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,						
5-7	and 12)	127,038	96,439	103,292	86,665	97,720	511,154
134 6-	First five years. If the Form 990 is for the		second, third, for	urth, or fifth tax year	r as a section 501	(c)(3)	. $\Box$
<u>C-</u>	organization, check this box and stop here tion C. Computation of Public Su			· ·		<u> </u>	<u> </u>
				n (f)		15	52.04%
15 16	Public support percentage for 2012 (line 8) Public support percentage from 2011 School		-	n (1))		16	53 04%
	tion D. Computation of Investme					_ 1 10 1	49.31%
17	Investment income percentage for 2012 (li			column (f))		17	<del>%</del>
18	Investment income percentage from 2011			(1,7)		18	2 %
19a	33 1/3% support tests—2012. If the organ			14, and line 15 is i	more than 33 1/3%		
ь	17 is not more than 33 1/3%, check this bo 33 1/3% support tests—2011. If the organ	ox and <b>stop here.</b> T	The organization q	ualifies as a public	ly supported orgar	nization	<b>▶</b> [X]
ม	line 18 is not more than 33 1/3%, check th						▶ []
20	Private foundation. If the organization did						<b>▶</b> [ ]

Schedule A (Form 990 or 990-EZ) 2012 Soo Line Historical & Technical Soc 39-1418948

Page 4

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).

### SCHEDULE-O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

Soo Line Historical & Technical Soc

Employer identification number 39-1418948

Form 990-EZ, Part I, Line 16 - Other	r Expen	ses					
Description Amount							
Merchandise							
Cost of Goods Sold	\$	13,904					
Soo Magazine							
Cost of Goods Sold	\$	1,074					
Expenses							
Supplies	\$	11					
Computer Services	\$	617					
Annual Meeting	\$	15,119					
Board of Directors	\$	110					
Promotion	\$	892					
Reconciliation discrepanc	\$	-4,246					
Non-investment Depreciation	\$	5,468					
Total	\$	32,949					

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

Description		Beg.	of Year	End	of Year
Other Loans Receivable		\$	0	\$	5,000
Equipment & other depreciable assets		\$	202,717	\$	202,717
Less Accumulated Depreciation		\$	28,665	\$	34,133
Utility deposit		\$	0	\$	0
	Total	\$	174,052	\$	173,584

Form 990-EZ, Part II, Line 26 - Other Liabilities

Schedule O (Form 990 or 990-EZ) (2012)						
Name of the organization  Soo Line Historical & Technical Soc	Employer identification number 39-1418948					
Description	Beg. of Year End of Year					
Unsecured Notes and Loans Payable	\$ 15,000 \$ 15,000					

Form 990-EZ, Part III, Line 31 - All Other Accomplishment
Donations to Colfax & Superior RR Museums and Archives

Form **4562** 

Name(s) shown on return

Department of the Treasury (99) Internal Revenue Service

## **Depreciation and Amortization**

(Including Information on Listed Property)

OMR No. 1545-0172

► See separate instructions.

► Attach to your tax return

Identifying number

Soo Line Historical & Technical Soc 39-1418948 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 500,000 1 Maximum amount (see instructions) 1 2 Total cost of section 179 property placed in service (see instructions) 2 2,000,000 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 3 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 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 7 Listed property. Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 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 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 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 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Do not include listed property ) (See instructions ) Section A 5,468 17 MACRS deductions for assets placed in service in tax years beginning before 2012 17 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 (b) Month and year (c) Basis for depreciation (d) Recover (f) Method (a) Classification of property placed in (business/investment use (e) Convention (g) Depreciation deduction period service only-see instructions 19a 3-year property 5-year property 7-year property 10-year property 15-year property 20-year property S/L 25 yrs 25-year property Residential rental 27 5 yrs MM S/L property MM S/L 27 5 yrs 39 yrs MM Nonresidential real S/L property MM S/L Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20a Class life S/L *≟*7 b 12-year S/I 12 yrs S/L Jog C 40-year MM 40 vrs "Part IV Summary (See instructions ) Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 22 and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 5,468 23 For assets shown above and placed in service during the current year, enter the