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Form 990  Department of the Treasury Internal Revenue Service	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) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements	OMB No 1545-0047 2012 Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 04-01-2012 , 2012, and ending 03-31-2013

B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS		D Employer identification number 88-0468000
	Doing Business As		
	Number and street (or P O box if mail is not delivered to street address) PO BOX 50049	Room/suite	E Telephone number (702) 812-6932
	City or town, state or country, and ZIP + 4 HENDERSON, NV 89016		G Gross receipts \$ 1,741,182
	F Name and address of principal officer THOMAS JINGOLI PO BOX 50049 HENDERSON, NV 89016		H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number
I Tax-exempt status ☐ 501(c)(3) ☒ 501(c) (6) (insert no) ☐ 4947(a)(1) or ☐ 527			
J Website: WWW.AGEM.ORG			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS (AGEM) IS AN INTERNATIONAL TRADE ASSOCIATION REPRESENTING MANUFACTURERS OF ELECTRONIC GAMING DEVICES, SYSTEMS, AND COMPONENTS FOR THE GAMING INDUSTRY THE ASSOCIATION, AS A GOOD CORPORATE CITIZEN, IDENTIFIES AND ACTS UPON ISSUES RELATING TO EDUCATION, TRADE SHOW REPRESENTATION, REGULATION, MANUFACTURING AND LICENSING STANDARDS, AND PROMOTES THE EXPANSION OF RESPONSIBLE GAMING FOR THE BENEFIT OF ITS MEMBERS AND THE INDUSTRY		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	59
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	59
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	60
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, line 34	7b	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	811,523	849,357
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,996	1,982
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	657,387	889,843
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,470,906	1,741,182
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	156,500	211,080
Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ☐ 0		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,318,249	1,337,951
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	1,474,749	1,549,031
	19 Revenue less expenses Subtract line 18 from line 12	-3,843	192,151
	Net Assets or Fund Balances		Beginning of Current Year
20 Total assets (Part X, line 16)		959,829	1,151,956
21 Total liabilities (Part X, line 26)			0
22 Net assets or fund balances Subtract line 21 from line 20		959,829	1,151,956

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	***** Signature of officer			2013-05-24 Date	
	THOMAS JINGOLI PRESIDENT Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name DIANNA RUSSO		Preparer's signature		Date 2013-07-15
	Check ☐ if self-employed			PTIN	
	Firm's name ▶ HOULDSWORTH RUSSO & COMPANY PC			Firm's EIN ▶	
	Firm's address ▶ 8675 S EASTERN AVE STE A LAS VEGAS, NV 891232839			Phone no (702) 269-9992	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☐ ☒

1

Briefly describe the organization's mission

THE ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS (AGEM) IS AN INTERNATIONAL TRADE ASSOCIATION REPRESENTING MANUFACTURERS OF ELECTRONIC GAMING DEVICES, SYSTEMS, AND COMPONENTS FOR THE GAMING INDUSTRY THE ASSOCIATION, AS A GOOD CORPORATE CITIZEN, IDENTIFIES AND ACTS UPON ISSUES RELATING TO EDUCATION, TRADE SHOW REPRESENTATION, REGULATION, MANUFACTURING AND LICENSING STANDARDS, AND PROMOTES THE EXPANSION OF RESPONSIBLE GAMING FOR THE BENEFIT OF ITS MEMBERS AND THE INDUSTRY

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 1,236,201 including grants of \$) (Revenue \$ 849,357)

TO PROMOTE EXCELLENCE IN THE MANUFACTURE OF GAMING DEVICES AND EQUIPMENT

4b

(Code) (Expenses \$ 101,750 including grants of \$) (Revenue \$)

TO ADVOCATE THE FAIR AND REASONABLE ENFORCEMENT AND IMPOSITION OF STATUTES AND REGULATIONS PERTAINING TO MANUFACTURERS OF GAMING DEVICES AND EQUIPMENT

4c

(Code) (Expenses \$ 211,080 including grants of \$ 211,080) (Revenue \$)

AID FOR EDUCATIONAL PROGRAMS AND OTHER CHARITABLE ORGANIZATIONS

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses

1,549,031

Part IV Checklist of Required Schedules

	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	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	No
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes
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, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes
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 "Yes," complete Schedule D, Part I	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
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	No
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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes
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? If "Yes," complete Schedule D, Part VII	11b	No
c 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	No
d 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	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes
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 foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes
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	Yes
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
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	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
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)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	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 employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
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 with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	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 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . .	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

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.	1a	20			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a				No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b				
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				No
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				No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				No
c	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 as charitable contributions?	6a				No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a				
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 8822?	7c				
d	If "Yes," indicate the number of Forms 8822 filed during the year.	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 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?	8				
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?	9a				
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b				
11	Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders.	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b				
c	Enter the amount of reserves on hand.	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a				No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b				

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI

Section 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	59	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
1b	Enter the number of voting members included in line 1a, above, who are independent	59	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	Yes
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	8a	Yes
8b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	15a	Yes
15b	Other officers or key employees of the organization	15b	Yes
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section 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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization MARCUS PRATER PO BOX 50049 HENDERSON, NV (702) 812-6932

Check if Schedule O contains a response to any question in this Part VII ☐

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

[illegible]

Part VII

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
MARCUS PRATER , PO BOX 50049 HENDERSON NV 89016	ED SERVICES	189,775

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►1

Part VIII

Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f					
Program Service Revenue	2a	G2E PARTY PAYMENTS	Business Code				
			541900	541,198		541,198	
	b	MEMBERSHIP DUES	541900	308,159	308,159		
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		849,357			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		1,982		1,982	
	4	Income from investment of tax-exempt bond proceeds . .					
	5	Royalties		889,843	889,843		
	6a	Gross rents	(i) Real	(ii) Personal			
		b	Less rental expenses				
		c	Rental income or (loss)				
	d	Net rental income or (loss)					
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		b	Less cost or other basis and sales expenses				
		c	Gain or (loss)				
	d	Net gain or (loss)					
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from fundraising events . . .					
	9a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities . . .					
	10a	Gross sales of inventory, less returns and allowances . .	a				
	b	Less cost of goods sold	b				
c	Net income or (loss) from sales of inventory . . .						
	Miscellaneous Revenue	Business Code					
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See Instructions		1,741,182	1,198,002		543,180	

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).

Check if Schedule O contains a response to any question in this Part IX

☐

Do not include amounts reported on lines 6b, 7b, 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.	203,350			
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	7,730			
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9	Other employee benefits.				
10	Payroll taxes.				
11	Fees for services (non-employees):				
a	Management.	174,012			
b	Legal.	145,630			
c	Accounting.	8,720			
d	Lobbying.	27,500			
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).				
12	Advertising and promotion.	63,911			
13	Office expenses.	11,436			
14	Information technology.	874			
15	Royalties.				
16	Occupancy.	148			
17	Travel.	13,184			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	792,661			
20	Interest.				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	523			
23	Insurance.	3,471			
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):				
a	POLITICAL CONTRIBUTIONS	74,250			
b	DUES AND SUBSCRIPTIONS	12,379			
c	MEALS AND ENTERTAINMENT	8,333			
d	RECOG LOSS ON CURR CONV	919			
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	1,549,031	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).				

Part X

Balance Sheet

Check if Schedule O contains a response to any question in this Part X

					(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			58	1	
	2	Savings and temporary cash investments			957,782	2	1,150,490
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.				5	
	6	Loans and other 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). Complete Part II of Schedule L.				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a	4,976			
	b	Less: accumulated depreciation	10b	3,510	1,989	10c	1,466
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 11.				12	
	13	Investments—program-related. See Part IV, line 11.				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11.				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34).			959,829	16	1,151,956
Liabilities	17	Accounts payable and accrued expenses				17	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.				21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.				25	
	26	Total liabilities. Add lines 17 through 25.			0	26	0
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			959,829	27	1,151,956
	28	Temporarily restricted net assets				28	
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			959,829	33	1,151,956
	34	Total liabilities and net assets/fund balances			959,829	34	1,151,956

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,741,182
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,549,031
3	Revenue less expenses Subtract line 2 from line 1	3	192,151
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	959,829
5	Net unrealized gains (losses) on investments	5	-24
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,151,956

Part XII Financial Statements and Reporting

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 ☒ 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Yes	
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	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		

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.
▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

If the organization answered “Yes” to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered “Yes” to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered “Yes” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS	Employer identification number 88-0468000
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization’s direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$ 74,250
3	Volunteer hours	

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$	
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$	
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?		☐ Yes ☐ No
4a	Was a correction made?		☐ Yes ☐ No
b	If “Yes,” describe in Part IV		

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$	74,250
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$	
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$	74,250
4	Did the filing organization file Form 1120-POL for this year?		☒ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization’s funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV		

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
See Additional Data Table				

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount Enter the amount from the following table in both columns															
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No													

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	No

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	308,159
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	101,750
b	Carryover from last year	2b	-48,628
c	Total	2c	53,122
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	138,672
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	-85,550

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier	Return Reference	Explanation
	SCHEDULE C, PART I-A, LINE 1	CONTRIBUTIONS TO POLITICAL CANDIDATES
	SCHEDULE C, PART I-C, LINE 5	COMMITTEE TO ELECT TICK SEGERBLOM 2,500 0 700 S THIRD STREET, LAS VEGAS, NV 89101 COMMITTEE TO ELECT KELVIN ATKINSON 2,500 0 832 HIGH ALTITUDE AVENUE, N LAS VEGAS, NV 89032 KIRK FOR NEVADA 1,500 0 760 SILVER OAK DRIVE, CARSON CITY, NV 89706 COMMITTEE TO ELECT JOYCE WOODHOUSE 1,500 0 1000 N GREEN VALLEY PKWY 440-362, HENDERSON, NV 89074 BENNY FOR NEVADA 1,500 0 10620 SOUTHERN HIGHLANDS PKWY, LAS VEGAS, NV 89141 COMMITTEE TO ELECT MARK HUTCHINSON 1,500 0 10080 WEST ALTA DRIVE, SUITE 200, LAS VEGAS, NV 89145 FRIENDS OF ST MARTIN 1,000 0 9050 W WARM SPRINGS RD 2146, LAS VEGAS, NV 89148 FRIENDS FOR JUSTIN JONES 1,000 0 P O BOX 371626, LAS VEGAS, NV 89137 COMMITTEE TO ELECT AARON FORD 1,500 0 P O BOX 96003, LAS VEGAS, NV 89193 DEBBIE SMITH 2,500 0 3270 WILMA DRIVE, SPARKS, NV 89431 COMMITTEE TO ELECT SCOTT HAMMOND 1,000 0 101 N CARSON STREET, SUITE 3, CARSON CITY, NV 89701 COMMITTEE TO ELECT PETE GOCIOECHEA 2,500 0 1321 S HIGHWAY 160, PAHRUMP, NV 89048 COMMITTEE TO ELECT MARCUS CONKLIN 3,500 0 2251 N RAMPART 305, LAS VEGAS, NV 89128 FRIENDS FOR MARILYN KIRKPATRICK 2,000 0 4747 SHOWDOWN DRIVE, NORTH LAS VEGAS, NV 89031 FRIENDS OF PAT HICKEY 2,000 0 1180 FOREST STREET, RENO, NV 89509 ASSEMBLY DEMO CAUCUS 2,000 0 2251 N RAMPART BOULEVARD, 341, LAS VEGAS, NV 89128 REPUBLICAN ASSEMBLY CAUCUS 1,500 0 P O BOX 401508, LAS VEGAS, NV 89140 COMMITTEE TO ELECT JOHN HAMBRICK 750 0 1930 VILLAGE CENTER CIRCLE, LAS VEGAS, NV 89134 COMMITTEE TO ELECT PEGGY PIERCE 500 0 5304 GIPSY AVENUE, LAS VEGAS, NV 89107 COMMITTEE TO ELECT MICHELLE FIORE 500 0 9085 W ROSADA WAY, LAS VEGAS, NV 89149 MARILYN DONDERO LOOP CAMPAIGN 1,000 0 3724 EMERALD BAY CIRCLE, LAS VEGAS, NV 89147 COMMITTEE TO ELECT HARVEY MUNFORD 750 0 809 SUNNY PLACE, LAS VEGAS, NV 89106 COMMITTEE TO ELECT DINA NEAL 750 0 304 LANE AVENUE, NORTH LAS VEGAS, NV 89030 COMMITTEE TO ELECT JASON FREERSON 1,500 0 P O BOX 31623, LAS VEGAS, NV 89173 COMMITTEE TO ELECT JOE HOGAN 500 0 2208 PLAZA DE LE CANDELA, LAS VEGAS, NV 89102 COMMITTEE TO ELECT OLIVIA DIAZ 1,000 0 P O BOX 365072, NORTH LAS VEGAS, NV 89036 COM TO ELECT JAMES OHRENSCHALL 1,250 0 P O BOX 97741, LAS VEGAS, NV 89193 COMMITTEE TO ELECT PAUL ANDERSON 500 0 10000 W CHARLESTON BLVD , STE 135, LAS VEGAS, NV 89135 DESALVIO FOR NEVADA 500 0 8429 VIVID VIOLET AVENUE, LAS VEGAS, NV 89143 COMMITTEE TO ELECT MAGGIE CARLTON 750 0 5540 E CARTWRIGHT AVENUE, LAS VEGAS, NV 89110 NEV TO ELECT ANDERSON FOR ASSEMBLY 750 0 438 E SAHARA AVENUE, LAS VEGAS, NV 89104 COMMITTEE TO ELECT HEIDI SWANK 500 0 546 BARBARA WAY, LAS VEGAS, NV 89104 ELECT STEVEN BROOKS 1,000 0 5445 MOUNTAIN VISTA ST A, LAS VEGAS, NV 89120 COMMITTEE TO ELECT RICHARD CARRILLO 1,000 0 4819 DIZA CT, LAS VEGAS, NV 89122 CRESENT HARDY FOR NV ST ASEM DST 19 1,000 0 P O BOX 601, MESQUITE, NV 89024 ELLEN SPIEGEL CAMPAIGN 1,000 0 2764 N GREEN VALLEY PKWY , 327, HENDERSON, NV 89014 EISEN FOR NV ASSEMBLY 500 0 9850 S MARYLAND PKWY , STE A5-162, LAS VEGAS, NV 89138 BECKY HARRIS FOR ASSEMBLY 500 0 3333 E SERENE AVENUE, SUITE 150, HENDERSON, NV 89074 COMMITTEE TO ELECT LYNN STEWART 1,250 0 2720 COOL LILAC AVENUE, HENDERSON, NV 89052 WOODBURY FOR ASSEMBLY 750 0 9500 W FLAMINGO R SUITE 203, LAS VEGAS, NV 89147 FRIENDS OF RANDY KIRNER 750 0 18124 WEDGE PKWY , SUITE 519, RENO, NV 89511 ELECT TERESA BENITEZ-THOMPSON 750 0 P O BOX 20637, RENO, NV 89515 FRIENDS FOR FLORES 750 0 420 N NELLIS BLVD, SUITE A3-87, N LAS VEGAS, NV 89110 COMMITTEE TO ELECT APRIL MASTROLUCA 1,500 0 265 COPPER GLOW CT , HENDERSON, NV 89074 MIKE SPRINKLE FOR ASSEMBLY 500 0 P O BOX 51202, SPARKS, NV 89435 SKIP DALY FOR ASSEMBLY DISTRICT 31 500 0 2180 4TH STREET, SPARKS, NV 89431 COMMITTEE TO ELECT DAVID ESPINOSA 500 0 P O BOX 51016, SPARKS, NV 89435 COMMITTEE TO ELECT IRA HANSEN 1,000 0 58 HARDY DRIVE, SPARKS, NV 89431 COMMITTEE TO ELECT WILLIAM HORNE 2,000 0 2251 N RAMPART BLVD 357, LAS VEGAS, NV 89128 COMMITTEE TO ELECT JAMES HEALEY 500 0 7800 S RAINBOW BLVD , STE 2015, LAS VEGAS, NV 89139 OSCARSON FOR ASSEMBLY CAMPAIGN 500 0 1234 MAIN STREET 12, CARSON CITY, NV 89701 COMMITTEE TO ELECT TOM GRADY 1,250 0 43 FAIRWAY DRIVE, YERINGTON, NV 89447 COMMITTEE TO ELECT JIM WHEELER 500 0 P O BOX 2135, MINDEN, NV 89423 COMMITTEE TO ELECT PETE LIVERMORE 750 0 4 RAGLAN CIRCLE, CARSON CITY, NV 89701 COMMITTEE TO ELECT PAUL AIZLEY 750 0 237 EAST ELDORADO LN , LAS VEGAS, NV 89123 COM TO ELECT IRENE BUSTAMANTE ADAMS 1,250 0 3800 REFLECTION WAY, LAS VEGAS, NV 89147 JOHN ELLISON 1,000 0 P O BOX 683, ELKO, NV 89803

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
Attach to Form 990. See separate instructions.

Name of the organization ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS	Employer identification number 88-0468000
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if 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)	
4	Aggregate value at end of year	
5	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? YesNo	
6	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 purpose conferring impermissible private benefit? YesNo	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 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

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

YesNo

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

YesNo

9 In Part XIII, 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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. 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 XIII, the text of the footnote to its financial statements that describes these items

b 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

(i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 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

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

Yes

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

Yes

No

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land			
b	Buildings			
c	Leasehold improvements			
d	Equipment	4,976	3,510	1,466
e	Other			
Total.	Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)			1,466

Schedule D (Form 990) 2012

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

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	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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 XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
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For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50082W **Schedule F (Form 990) 2012**

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			UNITED KINGDOM	CONTRIBUTION	7,730	WIRE			FMV

2

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶

1

3

Enter total number of other organizations or entities ▶

Part III

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☐

Yes

☒

No

Supplemental Information
Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Schedule F (Form 990) 2012

Schedule I (Form 990) Department of the Treasury Internal Revenue Service	Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990	OMB No 1545-0047
		2012
		Open to Public Inspection
Name of the organization ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS		Employer identification number 88-0468000

Part I

General Information on Grants and Assistance

1	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	☐ Yes	☒ No
2	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States		

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) NATIONAL COUNCIL PROB GAMBLING 730 11TH STREET NW WASHINGTON,DC 20001	51-0141872	3	40,000		FMV		CONTRIBUTION
(2) PROBLEM GAMBLING CTR 2330 PASEO DEL PRADO LAS VEGAS,NV 89102	20-1861496	3	50,000		FMV		CONTRIBUTION
(3) NEVADA COUNCIL ON PROBLEM GAMBLING 4340 S VALLEY VIEW BLVD 220 LAS VEGAS,NV 89103	88-0206247	3	10,000		FMV		CONTRIBUTION
(4) JCMAGA GOLF CLASSIC 925 PILOT ROAD LAS VEGAS,NV 89119			50,000		FMV		CONTRIBUTION
(5) LIED DISCOVERY CHILDRENS MUSEUM 360 PROMENADE PLACE LAS VEGAS,NV 89106	94-2943891	3	12,500		FMV		CONTRIBUTION
(6) UNLV LEE BUSINESS SCHOOL INTL PROG 4505 S MARYLAND PKWY LAS VEGAS,NV 89154	94-2790134	3	10,000		FMV		CONTRIBUTION
(7) SPREAD THE WORD NEVADA 260 E DESERT ROSE DRIVE HENDERSON,NV 89015	22-3829041	3	10,000		FMV		CONTRIBUTION
(8) UNLV FOUNDATION 4505 MARYLAND PKWY PO BOX 451006 LAS VEGAS,NV 89154	94-2790134	3	17,500		FMV		CONTRIBUTION

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	7
3	Enter total number of other organizations listed in the line 1 table	1

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS INSIDE THE UNITED STATES	SCHEDULE I, PAGE 1, PART I, LINE 2	WHEN A GRANT OR SPONSORSHIP IS MADE, AGEM IS ABLE TO MONITOR ITS USE AS THE ORGANIZATION IS GENERALLY INVOLVED WITH THE EVENT THE MONEY IS EARMARKED FOR AN EXAMPLE OF THIS IS THE JCM/AGA GOLF CLASSIC AS A "TITLE SPONSOR" AGEM IS ABLE TO VIEW ITS LOGO ON THE EVENT'S WEBSITE AS WELL AS MONITOR THEIR IMAGE AND BRAND PLACEMENT AT THE EVENT

Schedule J (Form 990) Department of the Treasury Internal Revenue Service	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23. ▶ Attach to Form 990. ▶ See separate instructions.	OMB No 1545-0047
		2012
		Open to Public Inspection

Name of the organization ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS	Employer identification number 88-0468000
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Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☐ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☐ Compensation survey or study ☒ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.	4a	No
		4b	No
		4c	No
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? b Any related organization? If "Yes," to line 5a or 5b, describe in Part III	5a	
		5b	
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of a The organization? b Any related organization? If "Yes," to line 6a or 6b, describe in Part III	6a	
		6b	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII
Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)MARCUS PRATER EXECUTIVE DIRECTOR	(i) (ii)	142,675	47,100				189,775	

Part III **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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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 to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
ASSOCIATION OF GAMING EQUIPMENT
MANUFACTURERS

Employer identification number

88-0468000

Identifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990 - ORGANIZATION'S MISSION	THE ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS (AGEM) IS AN INTERNATIONAL TRADE ASSOCIATION REPRESENTING MANUFACTURERS OF ELECTRONIC GAMING DEVICES, SYSTEMS, AND COMPONENTS FOR THE GAMING INDUSTRY THE ASSOCIATION, AS A GOOD CORPORATE CITIZEN, IDENTIFIES AND ACTS UPON ISSUES RELATING TO EDUCATION, TRADE SHOW REPRESENTATION, REGULATION, MANUFACTURING AND LICENSING STANDARDS, AND PROMOTES THE EXPANSION OF RESPONSIBLE GAMING FOR THE BENEFIT OF ITS MEMBERS AND THE INDUSTRY
MANAGEMENT DELEGATED	FORM 990, PAGE 6, PART VI, LINE 3	MARCUS PRATER IS AN INDEPENDENT CONTRACTOR WHO HANDLES ALL THE ADMINISTRATIVE DUTIES OF THE ORGANIZATION
ELECTION OF MEMBERS AND THEIR RIGHTS	FORM 990, PAGE 6, PART VI, LINE 7A	A "MEMBER" CAN BE DEFINED AS A COMPANY , WHICH THEN OFFERS UP A REPRESENTATIVE TO SIT ON THE BOARD (WHICH IS THE GOVERNING BOARD)
DECISIONS SUBJECT TO APPROVAL OF MEMBERS	FORM 990, PAGE 6, PART VI, LINE 7B	ALL MEMBERS HAVE VOTING RIGHTS
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	THE FORM 990 IS DISTRIBUTED ELECTRONICALLY TO ALL MEMBERS BEFORE BEING APPROVED, SIGNED, AND FILED WITH THE IRS
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	THE CONFLICT OF INTEREST POLICY IS ENFORCED BY REGULAR REMINDERS AND COMMUNICATION AMONG THE BOARD OF DIRECTORS
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	THE BOARD OF DIRECTORS VOTE ON THE COMPENSATION PACKAGE FOR THE EXECUTIVE DIRECTOR
COMPENSATION PROCESS FOR OFFICERS	FORM 990, PAGE 6, PART VI, LINE 15B	THE BOARD VOTES ON THE COMPENSATION PACKAGES FOR OFFICERS AND KEY EMPLOYEES, IF ANY
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2012

Attachment
Sequence No **179**

Name(s) shown on return
ASSOCIATION OF GAMING EQUIPMENT
MANUFACTURERS

Business or activity to which this form relates
INDIRECT DEPRECIATION

Identifying number

88-0468000

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	
6				
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	317

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	206
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	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (see instructions)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	523
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	

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

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

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

Section B—Information on Use of Vehicles

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

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

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

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

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

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2012 tax year (see instructions)					
43 Amortization of costs that began before your 2012 tax year				43	
44 Total. Add amounts in column (f) See the instructions for where to report				44	

Additional Data

Software ID:

Software Version:

EIN: 88-0468000

Name: ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
TOM O'BRIEN DIRECTOR	1 00	X						0	0	0
JENS HALLE DIRECTOR	1 00	X						0	0	0
ERIK R BATZLOFF DIRECTOR	1 00	X						0	0	0
MIKE FIELDS DIRECTOR	1 00	X						0	0	0
ROY STUDENT DIRECTOR	1 00	X						0	0	0
GLEN GOULET DIRECTOR	1 00	X						0	0	0
BRIAN WEDDERSPOON DIRECTOR	1 00	X						0	0	0
PATRICK RAMSEY DIRECTOR	1 00	X						0	0	0
JON YARBROUGH DIRECTOR	1 00	X						0	0	0
JAMES BRENDDEL DIRECTOR	1 00	X						0	0	0
ROGER HAWKINS DIRECTOR	1 00	X						0	0	0
TONY SPIER DIRECTOR	1 00	X						0	0	0
GORDON DICKIE DIRECTOR	1 00	X						0	0	0
JIM BRESLO DIRECTOR	1 00	X						0	0	0
DON BAUGH DIRECTOR	1 00	X						0	0	0
RORY FRADELLA DIRECTOR	1 00	X						0	0	0
SIMON HERBERT DIRECTOR	1 00	X						0	0	0
RICHARD CAMMEGH DIRECTOR	1 00	X						0	0	0
LYNN BECKER DIRECTOR	1 00	X						0	0	0
BOB MIODUNSKI DIRECTOR	1 00	X						0	0	0
KATIE LEVER DIRECTOR	1 00	X						0	0	0
JOHN ACRES DIRECTOR	1 00	X						0	0	0
JOHN GLASER DIRECTOR	1 00	X						0	0	0
ROVER HUA DIRECTOR	1 00	X						0	0	0
GIORGIO ABBIATI DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN BUYACHECK DIRECTOR	1 00	X						0	0	0
TOM MCCORMICK DIRECTOR	1 00	X						0	0	0
NICOLE FLOYD DIRECTOR	1 00	X						0	0	0
MIKE CANNON DIRECTOR	1 00	X						0	0	0
ALBERT RADMAN DIRECTOR	1 00	X						0	0	0
VICTOR ANDREEV DIRECTOR	1 00	X						0	0	0
ROBERT SAUCIER DIRECTOR	1 00	X						0	0	0
BILL NICOLS DIRECTOR	1 00	X						0	0	0
LAURA MCALLISTER COX DIRECTOR	1 00	X						0	0	0
TINA TUCCILLO DIRECTOR	1 00	X						0	0	0
RICHARD DITTON DIRECTOR	1 00	X						0	0	0
LUCY BUCKLEY DIRECTOR	1 00	X						0	0	0
JOANNE IVERSON DIRECTOR	1 00	X						0	0	0
SIMON LAI DIRECTOR	1 00	X						0	0	0
SHIGEKI MACHIDA DIRECTOR	1 00	X						0	0	0
MARK KOMOROWSKI DIRECTOR	1 00	X						0	0	0
AMIT SHARMA DIRECTOR	1 00	X						0	0	0
ROB ZIEMS DIRECTOR	1 00	X						0	0	0
LAURALYN MCCARTHY DIRECTOR	1 00	X						0	0	0
MARCOS TAVARES DIRECTOR	1 00	X						0	0	0
JOHNNY ORTIZ DIRECTOR	1 00	X						0	0	0
GLENN WICHINSKY DIRECTOR	1 00	X						0	0	0
SHANE HARTIGAN DIRCECTOR	1 00	X						0	0	0
SEAN SMITH DIRECTOR	1 00	X						0	0	0
MARCUS PRATER EXECUTIVE DI	30 00			X				189,775	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
THOMAS A JINGOLI PRESIDENT	1 00			X				0	0	0
ORRIN J EDIDIN VICE PRESIDE	1 00			X				0	0	0
SEAMUS MCGILL SECRETARY	1 00			X				0	0	0
MARK LERNER CO-GENERAL C	1 00			X				0	0	0
NEIL FRIEDMAN CO-GENERAL C	1 00			X				0	0	0
TOM NIEMAN TREASURER	1 00			X				0	0	0

Additional Data

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Name: ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS

Form 990, Schedule C, Part 1-C, Line 5

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's own internal funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
NEVADA STATE DEMOCRATS	6233 DEAN MARTIN DRIVE LAS VEGAS,NV 89118		2000	
SENATE REPUBLICAN LEADERSHIP CONF	405 HART SENATE OFFICE BUILDING WASHINGTON,DC 20510		2000	
COMMITTEE TO ELECT DAVID PARKS	PO BOX 71887 LAS VEGAS,NV 89170		1500	
BROWER FOR NEVADA	3883 HOWARD HUGHES PKWY 1100 LAS VEGAS,NV 89169		1500	
SHEILA LESLIE CAMPAIGN	864 DANIEL DRIVE RENO,NV 89509		1500	
COMMITTEE TO ELECT PAT SPEARMAN	5575 SIMMONS STREET STE 1-174 N LAS VEGAS,NV 89031		1000	
COMMITTEE TO ELECT TICK SEGERBLOM	700 S THIRD STREET LAS VEGAS,NV 89101		2500	
COMMITTEE TO ELECT KELVIN ATKINSON	832 HIGH ALTITUDE AVENUE N LAS VEGAS,NV 89032		2500	
KIRK FOR NEVADA	760 SILVER OAK DRIVE CARSON CITY,NV 89706		1500	
COMMITTEE TO ELECT JOYCE WOODHOUSE	1000 N GREEN VALLEY PKWY 440-362 HENDERSON,NV 89074		1500	
BENNY FOR NEVADA	10620 SOUTHERN HIGHLANDS PKWY LAS VEGAS,NV 89141		1500	
COMMITTEE TO ELECT MARK HUTCHINSON	10080 WEST ALTA DRIVE SUITE 200 LAS VEGAS,NV 89145		1500	
FRIENDS OF ST MARTIN	9050 W WARM SPRINGS RD 2146 LAS VEGAS,NV 89148		1000	
FRIENDS FOR JUSTIN JONES	PO BOX 371626 LAS VEGAS,NV 89137		1000	
COMMITTEE TO ELECT AARON FORD	PO BOX 96003 LAS VEGAS,NV 89193		1500	
DEBBIE SMITH	3270 WILMA DRIVE SPARKS,NV 89431		2500	
COMMITTEE TO ELECT SCOTT HAMMOND	101 N CARSON STREET SUITE 3 CARSON CITY,NV 89701		1000	
COMMITTEE TO ELECT PETE GOCIOECHEA	1321 S HIGHWAY 160 PAHRUMP,NV 89048		2500	
COMMITTEE TO ELECT MARCUS CONKLIN	2251 N RAMPART 305 LAS VEGAS,NV 89128		3500	
FRIENDS FOR MARILYN KIRKPATRICK	4747 SHOWDOWN DRIVE NORTH LAS VEGAS,NV 89031		2000	
FRIENDS OF PAT HICKEY	1180 FOREST STREET RENO,NV 89509		2000	
ASSEMBLY DEMO CAUCUS	2251 N RAMPART BOULEVARD 341 LAS VEGAS,NV 89128		2000	
REPUBLICAN ASSEMBLY CAUCUS	PO BOX 401508 LAS VEGAS,NV 89140		1500	
COMMITTEE TO ELECT JOHN HAMBRICK	1930 VILLAGE CENTER CIRCLE LAS VEGAS,NV 89134		750	
COMMITTEE TO ELECT PEGGY PIERCE	5304 GIPSY AVENUE LAS VEGAS,NV 89107		500	
COMMITTEE TO ELECT MICHELLE FIORE	9085 W ROSADA WAY LAS VEGAS,NV 89149		500	
MARILYN DONDERO LOOP CAMPAIGN	3724 EMERALD BAY CIRCLE LAS VEGAS,NV 89147		1000	
COMMITTEE TO ELECT HARVEY MUNFORD	809 SUNNY PLACE LAS VEGAS,NV 89106		750	
COMMITTEE TO ELECT DINA NEAL	304 LANE AVENUE NORTH LAS VEGAS,NV 89030		750	
COMMITTEE TO ELECT JASON FREERSON	PO BOX 31623 LAS VEGAS,NV 89173		1500	
COMMITTEE TO ELECT JOE HOGAN	2208 PLAZA DE LE CANDELA LAS VEGAS,NV 89102		500	
COMMITTEE TO ELECT OLIVIA DIAZ	PO BOX 365072 NORTH LAS VEGAS,NV 89036		1000	
COM TO ELECT JAMES OHRENSCHALL	PO BOX 97741 LAS VEGAS,NV 89193		1250	
COMMITTEE TO ELECT PAUL ANDERSON	10000 W CHARLESTON BLVD STE 135 LAS VEGAS,NV 89135		500	
DESALVIO FOR NEVADA	8429 VIVID VIOLET AVENUE LAS VEGAS,NV 89143		500	
COMMITTEE TO ELECT MAGGIE CARLTON	5540 E CARTWRIGHT AVENUE LAS VEGAS,NV 89110		750	
NEV TO ELECT ANDERSON FOR ASSEMBLY	438 E SAHARA AVENUE LAS VEGAS,NV 89104		750	
COMMITTEE TO ELECT HEIDI SWANK	546 BARBARA WAY LAS VEGAS,NV 89104		500	
ELECT STEVEN BROOKS	5445 MOUNTAIN VISTA ST A LAS VEGAS,NV 89120		1000	
COMMITTEE TO ELECT RICHARD CARRILLO	4819 DIZA CT LAS VEGAS,NV 89122		1000	
CRESENT HARDY FOR NV ST ASEM DST 19	PO BOX 601 MESQUITE,NV 89024		1000	
ELLEN SPIEGEL CAMPAIGN	2764 N GREEN VALLEY PKWY 327 HENDERSON,NV 89014		1000	
EISEN FOR NV ASSEMBLY	9850 S MARYLAND PKWY STE A5-162 LAS VEGAS,NV 89138		500	
BECKY HARRIS FOR ASSEMBLY	3333 E SERENE AVENUE SUITE 150 HENDERSON,NV 89074		500	
COMMITTEE TO ELECT LYNN STEWART	2720 COOL LILAC AVENUE HENDERSON,NV 89052		1250	
WOODBURY FOR ASSEMBLY	9500 W FLAMINGO R SUITE 203 LAS VEGAS,NV 89147		750	
FRIENDS OF RANDY KIRNER	18124 WEDGE PKWY SUITE 519 RENO,NV 89511		750	
ELECT TERESA BENITEZ-THOMPSON	PO BOX 20637 RENO,NV 89515		750	
FRIENDS FOR FLORES	420 N NELLIS BLVD SUITE A3-87 N LAS VEGAS,NV 89110		750	
COMMITTEE TO ELECT APRIL MASTROLUCA	265 COPPER GLOW CT HENDERSON,NV 89074		1500	
MIKE SPRINKLE FOR ASSEMBLY	PO BOX 51202 SPARKS,NV 89435		500	
SKIP DALY FOR ASSEMBLY DISTRICT 31	2180 4TH STREET SPARKS,NV 89431		500	
COMMITTEE TO ELECT DAVID ESPINOSA	PO BOX 51016 SPARKS,NV 89435		500	
COMMITTEE TO ELECT IRA HANSEN	58 HARDY DRIVE SPARKS,NV 89431		1000	
COMMITTEE TO ELECT WILLIAM HORNE	2251 N RAMPART BLVD 357 LAS VEGAS,NV 89128		2000	
COMMITTEE TO ELECT JAMES HEALEY	7800 S RAINBOW BLVD STE 2015 LAS VEGAS,NV 89139		500	
OSCARSON FOR ASSEMBLY CAMPAIGN	1234 MAIN STREET 12 CARSON CITY,NV 89701		500	
COMMITTEE TO ELECT TOM GRADY	43 FAIRWAY DRIVE YERINGTON,NV 89447		1250	
COMMITTEE TO ELECT JIM WHEELER	PO BOX 2135 MINDEN,NV 89423		500	
COMMITTEE TO ELECT PETE LIVERMORE	4 RAGLAN CIRCLE CARSON CITY,NV 89701		750	
COMMITTEE TO ELECT PAUL AIZLEY	237 EAST ELDORADO LN LAS VEGAS,NV 89123		750	
COM TO ELECT IRENE BUSTAMANTE ADAMS	3800 REFLECTION WAY LAS VEGAS,NV 89147		1250	
JOHN ELLISON	PO BOX 683 ELKO,NV 89803		1000	

Software ID:

Software Version:

EIN: 88-0468000

Name: ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL COUNCIL PROB GAMBLING730 11TH STREET NW WASHINGTON,DC 20001	51-0141872	3	40,000		FMV		CONTRIBUTION
PROBLEM GAMBLING CTR 2330 PASEO DEL PRADO LAS VEGAS,NV 89102	20-1861496	3	50,000		FMV		CONTRIBUTION
NEVADA COUNCIL ON PROBLEM GAMBLING4340 S VALLEY VIEW BLVD 220 LAS VEGAS,NV 89103	88-0206247	3	10,000		FMV		CONTRIBUTION
JCMAGA GOLF CLASSIC 925 PILOT ROAD LAS VEGAS,NV 89119	94-2943891		50,000		FMV		CONTRIBUTION
LIED DISCOVERY CHILDRENS MUSEUM360 PROMENADE PLACE LAS VEGAS,NV 89106		3	12,500		FMV		CONTRIBUTION
UNLV LEE BUSINESS SCHOOL INTL PROG4505 S MARYLAND PKWY LAS VEGAS,NV 89154	94-2790134	3	10,000		FMV		CONTRIBUTION
SPREAD THE WORD NEVADA260 E DESERT ROSE DRIVE HENDERSON,NV 89015	22-3829041	3	10,000		FMV		CONTRIBUTION
UNLV FOUNDATION4505 MARYLAND PKWY PO BOX 451006 LAS VEGAS,NV 89154	94-2790134	3	17,500		FMV		CONTRIBUTION