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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150 2012

Department of the Treasury Internal Revenue Service

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

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

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▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

					L					
Α	A For the 2012 calendar year, or tax year beginning $10/01/12$, and ending $09/30/13$									
В	Check if a		1	D Employer identification number						
Ц	Address of	· ·		26 255554						
	Name cha			36-3555511						
	Initial retu		om/suite	-	one number					
	Terminate				2-461-3685					
	Amended		F	Group	Exemption					
		n pending PRIOR LAKE MN 55372		Numb						
G		iting Method X Cash	H Check	▶ [X] 1	f the organization is not					
i		e: N/A	require	d to atta	ch Schedule B					
J	Tax-exe	mpt status (check only one) — X 501(c)(3) 501(c)() ◀ (insert no) 4947(a)(1) or 527	(Form	990, 990	-EZ, or 990-PF)					
K	Check	If the organization is not a section 509(a)(3) supporting organization or a section 527 orga	nization and its	gross re	eceipts are normally					
	not mo	re than \$50,000 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcal	d) may be requ	ııred (see	e instructions). But if					
	the org	anization chooses to file a return, be sure to file a complete return								
Ł	Add line	s 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets	(Part II,							
	line 25,	column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ		▶ \$	18,191					
I	Part I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (se	e the instruction	ons for I	Part I)					
_		Check if the organization used Schedule O to respond to any question in this Part		.,,	X					
	1	Contributions, gifts, grants, and similar amounts received		1	966					
	2	Program service revenue including government fees and contracts		2	17,132					
	3	Membership dues and assessments		3						
	4	Investment income		4	93					
	5a	Gross amount from sale of assets other than inventory 5a]						
	b	Less cost or other basis and sales expenses 5b]							
	С	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c							
14	6	Gaming and fundraising events								
1 6 2014 Revenue	а	Gross income from gaming (attach Schedule G if greater than								
© §		\$15,000)		4 1						
₩ď	b	Gross income from fundraising events (not including \$ of contributions	;							
JAN		from fundraising events reported on line 1) (attach Schedule G if the								
7		sum of such gross income and contributions exceeds \$15,000) 6b		4						
\bigcirc	C	Less direct expenses from gaming and fundraising events 6c		4						
Щ	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract								
2		line 6c)		6d						
Scanned	7a	Gross sales of inventory, less returns and allowances 7a	·	4						
(A)	b	Less. cost of goods sold 7b		4						
100	С	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c						
	8	Other revenue (describe in Schedule O) RECEIVEL)	8						
	9	Total revenue. Add lines 1, 2, 5, 4, 50, 60, 70, and 6		9	18,191					
	10	Grants and similar amounts paid (list in Schedule O) Benefits paid to or for members Selection of the componential and amplicate benefits	SE-OSC	10						
	11	Benefits paid to or for members DEC 8 1 2913		11						
y.	12	Salaries, other compensation, and employee benefits	一篇	12						
Expenses	13	Professional fees and other payments to independent contractors	F	13	460					
X De	. 14	Occupancy, rent, utilities, and maintenance	recer	14						
ú	15	Printing, publications, postage, and shipping		15	655					
	16	Other expenses (describe in Schedule O)		16	18,672					
_	17	Total expenses. Add lines 10 through 16	<u> </u>	17	19,787					
u	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18						
ď	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with								
Ā		end-of-year figure reported on prior year's return)		19	90,600					
Net Assets	20	Other changes in net assets or fund balances (explain in Schedule O)		20						
_	21	Net assets or fund balances at end of year Combine lines 18 through 20	_	21	89,004					

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2012)

Form	990-EZ (2012) AREA VII AGEHR AMERICAN GUILD OF EN 36-3555511		F	Page 3
Pa	Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V			
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			
	detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the	١		7.7
	change on Schedule O (see instructions)	34	ļ —	X
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business	25-	ŀ	x
_	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,	35b	 	
С	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		x
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets	1000		
	during the year? If "Yes," complete applicable parts of Schedule N	36		x
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions			
b	Did the organization file Form 1120-POL for this year?	37b		Х
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	_		
39	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on line 9	_		
b	Gross receipts, included on line 9, for public use of club facilities	_		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
	section 4911 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit			
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been	405		x
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c	·		
ŭ	reimbursed by the organization			
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter	·		
-	transaction? If "Yes," complete Form 8886-T	40e		x
41	List the states with which a copy of this return is filed MN			
42a	The organization's books are in care of ▶ JEAN SCHUELLER Telephone no ▶ 50	7-53	2-5	735
	612 REDWOOD ST #B			
	Located at ► MARSHALL MN ZIP + 4 ► 56	5258		,
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	-	X
	If "Yes," enter the name of the foreign country	٠		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			1
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c	1	x
·	If "Yes," enter the name of the foreign country:			1
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here			▶□
	and enter the amount of tax-exempt interest received or accrued during the tax year			
	•		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			
	completed instead of Form 990-EZ	44a	L	X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			
	completed instead of Form 990-EZ	44b	L	X
С	Did the organization receive any payments for indoor tanning services during the year?	44c	<u> </u>	X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an		-	
	explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	<u> </u>	X
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the		Ī	
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of		1	1
	Form 990-EZ (see instructions)	45b	<u> </u>	X

Form	990-E	Z (2012) AREA VII AGEHR AMERI	CAN GUILD	OF EN	1 36-35	<u> 22211</u>				Page 4
								r	Yes	No
46		he organization engage, directly or indirectly, in political		s on behalf	of or in oppos	sition				v
Ď-	rt VI	ndidates for public office? If "Yes," complete Schedule Section 501(c)(3) organizations only	C, Part I					<u> </u>	<u> </u>	X
Fa	er Ax	All section 501(c)(3) organizations must ans	wer auestions 47	_49b and	52, and con	nolete the	tables for lu	nes	V.	
		50 and 51			,					
		Check if the organization used Schedule O to	o respond to any	question	ın this Part \	<u>√I</u>				<u> </u>
47	Did tl	he organization engage in lobbying activities or have a s	section 501(h) elec	tion in effec	rt duana the t	av			Yes	No
		P If "Yes," complete Schedule C, Part II		-	or during the ti	-		4	,	x
48	-	e organization a school as described in section 170(b)(1)(A)(II)? If "Yes," co	omplete Sc	hedule E		_	4	3	X
49a		he organization make any transfers to an exempt non-c		-				49	а	X
b	If "Y∈	es," was the related organization a section 527 organiza	tion?					49	b	<u> </u>
50		plete this table for the organization's five highest compe		•						
	empl	oyees) who each received more than \$100,000 of comp	pensation from the	organizatio	n If there is r	one, ente	"None"			
		(a) Name and title of each employee	(b) Average hours per week		eportable ensation		Ith benefits, as to employee	(e) Estima		
		paid more than \$100,000	devoted to position			benefit	plans, and compensation	other c	ompensa	tion
No	one					40.0				
,					== :					
			 							
f	Total	number of other employees paid over \$100,000			> .	·				
51		plete this table for the organization's five highest compe			ors who each	received n	ore than			
		,000 of compensation from the organization. If there is		<u>" </u>						
		Name and address of each independent contractor paid more	than \$100,000		(b) Typ	e of service		(c) Com	pensation	<u> </u>
No	ne									
				1						
			-						_	
					<u> </u>	_				
	~	I a select of all a select of								
d 52		I number of other independent contractors each receiving the organization complete Schedule A? Note: All sections	3	ations and	4047(a)(1)					
32		exempt charitable trusts must attach a completed Sched	, , , , ,	ations and	4547 (a)(1)			X	as	No
 Unde		Ities of perjury, I declare that I have examined this return, inclu		schedules an	d statements, a	ind to the b	est of my knowle			
		, and complete Declaration of preparer (Ather than officer) is t						ougo uno o	oor, 10 10	
		Sean Schuller	1			12 -	26-13			
Sigr	n	Signature of officer			Da	ate				
Her	e	Type or print name and title								
			eparer's signature			Date			TIN	
Paid	4						Check	if		
	a parer	LISA ZMESKAL, CPA LI Firm's name Hoffman & Brobst	SA ZMESKAL, CP	'A	 -	12,	20/13		003511	
-	Only		, PLLP				Firm's EIN	41-0	9785)4Z
	y	Timis address?	258				Phone no 5	07-53	2-57	735
May	the IF	RS discuss this return with the preparer shown above?					i none no	<u> </u>	Yes	No
								Form S	990-EZ	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

2

3

Public Charity Status and Public Support

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

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

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

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,

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Name of the organization

A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)

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

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

Employer identification number AREA VII AGEHR AMERICAN GUILD OF EN 36-3555511

3	Ш	An organizati	on operated for the benefit	of a college of diliversity owned	or operat	ed by a g	Jvennie	andi um	Luesciii	bed iii		
		section 170(b)(1)(A)(iv). (Complete Part	tII)								
6		A federal, sta	ite, or local government or g	governmental unit described in s	section 17	'0(b)(1)(A)(v).					
7	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public										
		described in section 170(b)(1)(A)(vi). (Complete Part II)										
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)										
9		An organizati	on that normally receives (1) more than 33 1/3% of its sup	port from	contribution	ons, me	mbershi	p fees,	and gros	SS	
		receipts from	activities related to its exer	npt functions—subject to certain	n exceptio	ns, and (2	2) no mo	re than	33 1/3%	6 of its		
		support from	gross investment income a	nd unrelated business taxable ii	ncome (le	ss section	511 tax	() from b	usines	ses		
		acquired by t	he organization after June 3	30, 1975 See section 509(a)(2)	. (Comple	te Part III)					
10		An organization organized and operated exclusively to test for public safety See section 509(a)(4).										
11	П	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the										
		purposes of o	one or more publicly suppor	ted organizations described in s	ection 50	9(a)(1) or	section	509(a)(2	2). See	section		
		509(a)(3). Ch	eck the box that describes	the type of supporting organizat	ion and co	omplete lu	nes 11e	through	11h			
		a Type	I b Type II	c Type III-Function	ally integr	ated	d	Typ	e III–No	n-functi	onally integrated	
е		By checking	this box, I certify that the org	ganization is not controlled direc	tly or indi	rectly by o	ne or m	ore disq	ualified	persons	s	
	_	other than for	undation managers and other	er than one or more publicly sup	oported or	ganizatior	s descr	ıbed ın s	ection	509(a)(1	ı)	
		or section 50	9(a)(2)									
f		If the organiz	ation received a written dete	ermination from the IRS that it is	s a Type I	Type II,	or Type	III suppo	orting			
		organization, check this box										
g		Since Augus	t 17, 2006, has the organiza	ation accepted any gift or contrib	oution fron	n any of th	ne					
		following per	rsons?									
		(i) A persor	n who directly or indirectly o	ontrols, either alone or together	with pers	ons descr	ibed in (ıı) an d			Yes No	
			w, the governing body of the								11g(ı)	
		(ii) A family	member of a person descri	bed in (i) above?							11g(II)	
		(iii) A 35% c	controlled entity of a person	described in (i) or (ii) above?							11g(III)	
h		Provide the	following information about	the supported organization(s)								
(1) Nam	e of supported	(II) EIN	(III) Type of organization	(iv) Is the	organization	(v) Did y	ou notify	(vi)	s the	(vii) Amount of monetary	
	org	ganization		(described on lines 1–9		sted in your		nization in	organizat		support	
			above or IRC section (see instructions))		governing document?		col (i) of your support?		ur (i) organized in th US?			
				(see instructions))	Yes	No	Yes	No	Yes	No		
(A)												
• •												
(B)												
(C)										-		
•												
(D)												
• •										1		
(E)												
. ,												
Tota	al							<u> </u>	1			
		erwork Redu	ction Act Notice, see the Ir	nstructions for					Sched	ule A (F	orm 990 or 990-EZ) 2012	
	-	0 or 990-EZ.	•							,	•	

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

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

	tion A. Public Support										
Caler	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total				
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	50	575	1,435	6,959	966	9,985				
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		-	-							
3	The value of services or facilities furnished by a governmental unit to the organization without charge										
4	Total. Add lines 1 through 3	50	575	1,435	6,959	966	9,985				
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)										
6	Public support. Subtract line 5 from line 4						9,985				
	tion B. Total Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total				
7	Amounts from line 4	50	575	1,435	6,959	966	9,985				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	255	442	77	189	93	1,056				
9	Net income from unrelated business activities, whether or not the business is regularly carried on										
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)										
11	Total support. Add lines 7 through 10						11,041				
12	Gross receipts from related activities, etc	(see instructions)				12	17,225				
13	First five years. If the Form 990 is for the	organization's first	t, second, third, for	urth, or fifth tax yea	ar as a section 501	(c)(3)					
	organization, check this box and stop her				<u> </u>		•				
Sec	tion C. Computation of Public Su	• •	_ 								
14	Public support percentage for 2012 (line 6		•	ın (f))		14	90.44%				
15	Public support percentage from 2011 Sch					_ 15	%				
16a	33 1/3% support test—2012. If the organ				33 1/3% or more, o	heck this	. ==				
	box and stop here. The organization qual	•	• •				► X				
b	33 1/3% support test—2011. If the organ				5 is 33 1/3% or m	ore,	. —				
	check this box and stop here. The organization										
1/a	10%-facts-and-circumstances test—201										
	_	10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported									
	organization		·	,	. , , .,		>				
b	10%-facts-and-circumstances test—201	•									
	15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly										
		eets the "facts-and-	-circumstances" te	est. The organization	on qualifies as a pu	iblicly					
40	supported organization	d	luna 42 40 - 40	h 47- ar 47- 1	ali dhia b		▶ ∐				
18	Private foundation. If the organization districtions	a not cneck a box o	on iine 13, 16 3, 1 6	υ, 17a, or 17b, che	eck this dox and se	ee	>				

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.) If the organization fails to qualify under the tests listed below, please complete Part II.)

	If the organization fails to	qualify under tl	he tests listed t	<u>pelow, please c</u>	omplete Part I	l.)	
	tion A. Public Support			·	•		
Caler	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge		,				
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) >	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b			<u> </u>			
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)			1		<u> </u>	
14	First five years. If the Form 990 is for the	•	st, second, third, fo	ourth, or fifth tax ye	ar as a section 50	1(c)(3)	
	organization, check this box and stop her						>
	tion C. Computation of Public St					T 1	
15	Public support percentage for 2012 (line 8	•	•	nn (†))		15	<u> </u>
16 Soc	Public support percentage from 2011 Schettion D. Computation of Investment			_		16	%_
17	·	*		3 column (fl)		17	
18	Investment income percentage for 2012 (Investment income percentage from 2011)	•	•	5, Widilii (1))		17	% %
19a	33 1/3% support tests—2012. If the orga			e 14, and line 15 is	s more than 33 1/3	L	
.54	17 is not more than 33 1/3%, check this b					·	▶ □
ь	33 1/3% support tests—2011. If the orga		-				٠ 🗀
-	line 18 is not more than 33 1/3%, check the						▶ □
20	Private foundation. If the organization di		=			•	▶□

Schedule A (Form 990 or 990-EZ) 2012 AREA VII AGEHR AMERICAN GUILD OF EN 36-3555511

Page 4

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

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

AREA VII AGEHR AMERICAN GUILD OF EN

Employer identification number 36-355511

,	•				
Description Amoun					
Expenses					
OFFICE SUPPLIES	\$	65			
FESTIVAL EXPENSES	\$	991			
MEETING EXPENSE	\$	5,651			
FINANCE CHARGE	\$	-39			
YOUTH CAMPS	\$	10,161			
DIRECTORS SEMINAR	\$	1,843			

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

Total \$ 18,672

0

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

Non-investment Depreciation

Description		Beg.	of Year	End	of Year
		\$	17,843	\$	17,843
Less Accumulated Depreciation		\$	17,843	\$	17,843
	Total	\$	0	\$	0

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

Attachment Sequence No 179

Department of the Treasury Internal Revenue Service Name(s) shown on return

► See separate instructions. (99)

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▶ Attach to your tax return.

Identifying number 36-3555511

	ess or activity to which this form relates ndirect Depreciat	ion							
	art I Election To Exper		erty Under Se	ection 179					
	Note: If you have a				comple	ete Part	l.		
1	Maximum amount (see instruction	ns)						1	500,000
2	Total cost of section 179 property	placed in service (se	e instructions)					2	
3	Threshold cost of section 179 pro	perty before reduction	n in limitation (see	instructions)				3	2,000,000
4	Reduction in limitation Subtract li	ine 3 from line 2 If ze	ero or less, enter -0)-				4	
5	Dollar limitation for tax year Subtract li	ne 4 from line 1 If zero o	or less, enter -0- If ma	arried filing separately,	, see ınstı	ructions		5	
6	(a) Descriptio	n of property		(b) Cost (business use	only)	(c)	Elected cost		
	 								
7	Listed property Enter the amount	t from line 29			7				
8	Total elected cost of section 179		ts in column (c) lir	nes 6 and 7	<u> </u>			8	
9	Tentative deduction Enter the sn							9	
10	Carryover of disallowed deduction							10	
11	Business income limitation Enter	•		ss than zero) or line	e 5 (see	instruction	ns)	11	
12	Section 179 expense deduction.		•	•	`		,	12	
13	Carryover of disallowed deduction			_	13				
	: Do not use Part II or Part III below								<u> </u>
Pa	art II Special Depreciat	ion Allowance a	nd Other Dep	reciation (Do r	ot inc	lude liste	ed prope	rty.)	(See instructions)
14	Special depreciation allowance for								
	during the tax year (see instruction	ns)						14	
15	Property subject to section 168(f)	(1) election						15	
16	Other depreciation (including ACF	RS)						16	302
Pa	art III MACRS Deprecia	tion (Do not inclu	ude listed prope	erty.) (See instr	uctions	s.)			
			Sect	ion A					
17	MACRS deductions for assets pla	aced in service in tax	years beginning be	efore 2012				17	74
18	If you are electing to group any assets place		•				>	<u> </u>	
	Section B—	Assets Placed in Se	 		he Gen	eral Depre	eciation S	ysten	<u>1</u>
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depre (business/investmen only-see instruct	t use	y (e) (Convention	(f) Meth	od	(g) Depreciation deduction
19a	3-year property	-}							
b	5-year property	_							
С	7-year property	_							
d	10-year property	_[
е	15-year property	-}							
f	20-year property	_							
g			-	25 yrs.	-		S/L		
h	Residential rental			27 5 yrs		MM	S/L		· -
	property			27 5 yrs		MM	S/L		<u> </u>
i	Nonresidential real property			39 yrs		MM	S/L		
	<u> </u>	ssets Placed in Serv	ico During 2012	Fay Year Heine th	o Altorn	MM Don	S/L		
		SSELS Flaced III SELV	Total During 2012	Tax Teal Osing th	Aitein	alive Dep	T		7111
20a		-	}	12 1/15			S/L		
	12-year			12 yrs		MANA	S/L S/L	-	
	40-year art IV Summary (See ins	structions)	<u> </u>	40 yrs		MM	₁ 3/L		L.
	Listed property Enter amount fro							24	
21 22	Total. Add amounts from line 12,		lines 10 and 20 in	column (a) and lin	o 21 ⊑.	nter bore		21	
22	and on the appropriate lines of yo	=		=		nei neie		22	376
23	For assets shown above and place				"	Ι	<u> </u>	j 44	370
23	portion of the basis attributable to	=	and current year, e	Inci lie	23	ļ			
	Panenwork Reduction Act Notice		uctions		1 23	1			Form 4562 (2012)