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Form 990

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)

OMB No 1545-0047

Department of the Treasury

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

Open to Public Inspection

		vertue Service	The organization may have to use a copy of this focus to said of said to said			
<u>A</u> _	For t	he 2012 calen	dar year, or tax year beginning $10/01$, 2012, and endin			2013
В	Check	if applicable	C		D Employer Identi	fication Number
	A	ddress change	The Red Castle Gun Club		73-0770	151
	\square_{N}	ame change	PO Box 4302	Ī	E Telephone numb	
	\vdash	nitial return	Tulsa, OK 74159		918-582	-3022
	H				910 302	3322
	\vdash	erminated				
	ЫA	mended return	·		G Gross receipts	 , , / ,
	A _I	pplication pending	F Name and address of principal officer		group return for affil	□ □
			Same As C Above	H(b) Are all a	ffiliates included? Itach a list (see ins	tructions) Yes No
ī	Tax-	-exempt status	501(c)(3) X 501(c) (7) < (insert no.) 4947(a)(1) or 527	11 140, 6	macii a iist (see iiis	uructions)
<u></u>		bsite: ► N/		H(a) Group a	xemption number	
K		n of organization	X Corporation Trust Association Other ► L Year of Format	tion 1963	IVI State of le	egal domicile OK
Pa	rt l	Summar	<u>y</u>			
	1	Briefly descri	be the organization's mission or most significant activities Gun safe	ty, Tra	ining and	shooting
d)	ļ					
ဋ	1		~			
Ħ						
Governance	2	Check this bo	if the organization discontinued its operations or disposed of mo	ore than 25	% of its net as	sets
පි	3		ting members of the governing body (Part VI, line 1a)		3	14
∘ಶ			dependent voting members of the governing body (Part VI, line 1b)		4	14
Activities &	-		of individuals employed in calendar year 2012 (Part V, line 2a)		5	0
픻	٦		of volunteers (estimate if necessary)		6	37
ਚੁੰ	",				7 a	
A			ed business revenue from Part VIII, column (C), line 12			71,932.
	b	Net unrelated	business taxable income from Form 990-T, line 34		7 b	-32,257.
				Pr	ior Year	Current Year
-	8	Contributions	and grants (Part VIII, line 1h)			330,868.
Revenue	9	Program serv	rice revenue (Part VIII, line 2g)		408,985.	131,816.
Ye	10	-	come (Part VIII, column (A), lines 3, 4, and 7d)	-	1,256.	
ě	11		e (Part VIII, column:(A), lines 5, 6d, 8c, 9c, 10c, and 11e)		4,384.	3,700.
_	1		£— add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u> </u>	414,625.	466, 384.
	12			 	414,625.	400,304.
	13	, ,	milar amounts paid (Part IX, column (A), lines 1-3)			
	14		to or for members, (Part IX, column (A), line 4)			
_ :	15	Salaries, othe	r compensation, employee benefits (Part IX, column (A), lines 5-10)			
Expenses	16 a	(*11)	fundraising_fees (Part IX, column (A), line 11e)			
SE SE						
×	b	Total fundrais	ing expenses (Part IX,-column (D), line 25)			
Ŵ	17	Other expens	es (Part IX, column (A), lines 11a-11d, 11f-24e)		462,094.	346,267.
			es Add lines 13-17 (must equal Part IX, column (A), line 25)		462,094.	346,267.
		•	expenses Subtract line 18 from line 12	···· ·		
- X &		Revenue less	expenses Subtract line to from line 12	<u> </u>	-47,469.	120,117.
Net Assets of Fund Balance			(D. 1. V.) 10		of Current Year	End of Year
age Bals	20		(Part X, line 16)	1,	087,761.	1,175,935.
at A	21	Total liabilitie	s (Part X, line 26)		58,943.	27,000.
žΞ	22	Net assets or	fund balances Subtract line 21 from line 20	1	028,818.	1,148,935.
[Da	rt II				020,010.	1/110/300.
		Signatur				
Unde	r penal olete Do	Ities of perjury, I de eclaration of prepai	clare that I have examined this return, including accompanying schedules and statements, and to t rer (other than officer) is based on all information of which preparer has any knowledge	the best of my	knowledge and belie	ef, it is true, correct, and
		I.				
			() 4 M			
Sig	ın	Signatu		Date	<i>1</i>	Spellut
He	re	16	MINO MUSTER ROBERT ECHINOS PRE	SIDER	et /C	1/64//4
		Type or	print name and title			'''
		Print/Type or	reparer's name Preparer's signature Date	Т,	Check X if	PTIN
_	_		$A \wedge A \wedge$		lieck [7] "	
Pai		Celia		14 s	elf-employed	P00113951
	pare		Celia J. Thompson, CPA			
Use Only Firm's address 214 N. Main St. / PO Box 637 Firm's EIN ▶ 73-1093596						
			Sand Springs, OK 74063		Phone no (918	
Mai	the !	RS discuss the	is return with the preparer shown above? (see instructions)		TOTIE III (310	X Yes No
ıvıay	. u (# 1	uiscuss IIII	is return with the preparer Shown above; (See IIISHUUUDIS)			17 162 MO

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012

Forr	n 990 (2012) The Red Castle Gun Club	73-0	77015	51	Р	age 2
Pa	Statement of Program Service Accomplishments					
	Check if Schedule O contains a response to any question in this Part III	· -				
1	January Company of the Company of th					
	Gun safety, Training and shooting				-	- - -
						. – – -
	Did the organization undertake any significant program services during the year which were not listed on the prior	r	-		_	
_	Form 990 or 990-EZ?			Yes	X	No
	If 'Yes,' describe these new services on Schedule O.		ш			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program ser	vices?		Yes	X	No
	If 'Yes,' describe these changes on Schedule O		_		ш	
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of others, the total expenses, and revenue, if any, for each program service reported	ces, as grants a	measure nd alloca	ed by e itions t	expen 0	ses
4 8	a (Code) (Expenses \$ 336,537. including grants of \$) (Re	evenue	\$	13	1,81	L6.)
	Gun safety training and shooting ranges					
						.
						- - -
						. – – –
	(0.1)		<u>.</u>			
4 t	(Code) (Expenses \$ including grants of \$) (Re	evenue	* <u></u>)
						_ _ _
40	c (Code) (Expenses \$ including grants of \$) (Re	evenue	\$)
				·	-	
			. – – –			
	10ther areas (December 20therlife 0)					
4 0	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$				`	
	(Expenses \$ including grants of \$) (Revenue \$ ≥ Total program service expenses > 336,537.				<u>, </u>	
BAA				Form	990 ((2012)

Form 990 (2012) The Red Castle Gun Club
Parel 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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
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		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
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		Х
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III .	8		Х
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		X
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		X
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	11 a	х	
t	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	11 b		X
	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	11 c		X
	I 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	11 d		X
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X.	11 e		<u>X</u>
	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	11 f		<u> </u>
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII.	12a		X
	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		<u> </u>
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		$\frac{\lambda}{X}$
		144	\dashv	
	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		Х
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		X
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		X
	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		X
	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		X
	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		X
	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		<u>X</u>
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

		1	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
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? If 'Yes,' complete Schedule I, Parts I and III	22		х
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		х
24 8	a 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, and 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		Х
ŀ	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
ď	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		
25 a	a 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? If 'Yes,' complete Schedule L, Part I	25a		
t	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? If 'Yes,' complete Schedule L, Part 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? If 'Yes,' complete Schedule L, Part II	26	Х	
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? If 'Yes,' complete Schedule L, Part III	27		Х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		_X
	3 A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M.	28c		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
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? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		<u> </u>
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	olf '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)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	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? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38		X
BAA		Form	990 (2012)

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
1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	9		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		Х
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	0		
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	X	
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q	3 b	X	
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)?	4 a		Х
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.		:	
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	\ '	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a 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?	ation 6 a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ь		
7 Organizations that may receive deductible contributions under section 170(c).	- 00	1	
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?	7 a		
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	-	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?.	7 e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	a 7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess busine holdings at any time during the year?	Did the ess 8		
9 Sponsoring organizations maintaining donor advised funds.	_		_
a Did the organization make any taxable distributions under section 4966?	9 a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12	9,884.		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 7	1,932.		
11 Section 501(c)(12) organizations. Enter		1 1	
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).			
12a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
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?	13a		
Note. See the instructions for additional information the organization must report on Schedule O.			
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			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?	. 14a		X
h If 'Yes' has it filed a Form 720 to report these payments? If 'No' provide an explanation in Schedule O	146	r	

Form 990 (2012) The Red Castle Gun Club 73-0770151 Page 6 Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below. and for a 'No' response to line 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 guestion in this Part VI X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 14 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 b Enter the number of voting members included in line 1a, above, who are independent 1 b 14 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 X Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х $\overline{\mathbf{x}}$ 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X Did the organization have members or stockholders? 6 7 a 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? 7 a Х **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? Х 7 h Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8 a **b** Each committee with authority to act on behalf of the governing body? 8 b X Is there any officer, director or 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes No X 10 a Did the organization have local chapters, branches, or affiliates? 10 a **b** 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? 10 b 11 a $\overline{\mathbf{x}}$ 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12 a $\overline{\mathbf{X}}$ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12 b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c 13 Х 13 Did the organization have a written whistleblower policy? X 14 14 Did the organization have a written document retention and destruction policy? 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? a The organization's CEO, Executive Director, or top management official 15 a X \overline{X} 15_b **b** Other officers of key employees of the organization 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? 16 a X **b** 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? 16_b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed OK Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year See Schedule O 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization.

Form	990	(2012)	The	Red	Castle	Gun	Club
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73-0770151

Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a 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, and 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

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

<u></u>										
				(C	;)				'	
(A) Name and Title	(B) Average hours per	Average hours per officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation
	hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Officer Institutional trustee Individual trustee or director		Key employee	Highest compensated employee	Former	the organization (W-2/1099 MISC)	related organizations (W 2/1099 MISC)	from the organization and related organizations
(1) Robert Hinds	20								-	-
President	0				i		<u> </u>	0.	0.	0.
(2) John Campbell	_ 20 _									
President & CEO	0							0.	0.	0.
(3) Alan Woodside	20_									
Secretary	0			_			<u> </u>	0.	0.	0.
(4) Bill Copeland	_ 20 _							0.	0.	•
Treasurer (5)	0		_				-	U.	<u> </u>	0.
	{·			1		Ï				
<u>(6)</u>										
<u></u>										
(8)				-						
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Tare the occupant a officers, proceeds, fras		Τ.						i mgnost oon	ponsatea Emp	10 y c c c (00 / 1.)
(A) Name and title	Average (do not check mon hours box, unless person		Position not check more than one , unless person is both an cer and a director/trustee)			than is bot or/trus	h an itee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	(list any hours for related organiza - tions below dotted	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W 2/1099-MISC)	compensation from the organization and related organizations
	line)		й			Ē				
<u>(15)</u>		-								
(16)										
(17)										
(18)										
(19)										
(20)							_		7.	
(21)								-		
(22)						-				
(23)									1	
(24)				_						
(25)										
1 b Sub-total	<u> </u>					L	•	0.	0.	0.
c Total from continuation sheets to Part VII, Section	Α						>	0.	0.	0.
d Total (add lines 1b and 1c)	0	-41		\			P	0.	0.	0.
2 Total number of individuals (including but not limited to from the organization ► 0	tnose II	stea	abov	ve) v	vno	recei	vea	more than \$100,00	or reportable com	pensation
3 Did the agreement but any few and those disease			l.a					ahaat aamaanaat	ad amplaya	Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such	ındıvıdu	al						•	•	3 X
4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater such individual.	eportabi than \$1	e coi 50,00	mpe	insa If 'Y	tion 'es'	com	plet	e Schedule J for	rrom	4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,'	compen comple	satio te Sc	n fro	om a lule	any <i>J fo</i>	unre r suc	late h p	d organization or erson	ındıvıdual	5 - X
Section B. Independent Contractors	4 - al al a		dont		1.0	otoro	the	t recoved more th	non \$100,000 of	
Complete this table for your five highest compensa compensation from the organization. Report compensa	tion for t	the ca	alend	dar <u>y</u>	/ear	endi	ng v	vith or within the or	ganization's tax yea	
(A) Name and business addres	ss							Description o	of services	(C) Compensation
							_			
	·					-				
2 Total number of independent contractors (including but \$100,000 in compensation from the organization ►		ted to	tho	se li	sted	abo	ve) v	who received more	than	<u></u>
BAA	<u> </u>	rEEA0	108L	01/2	4/13					Form 990 (2012)

		(2012) THE REU		Gui	I CIUD			73 0770131	- rage t
Pa	rt V	Statement of Re				an an Alban Dawk VIII			
		Check if Schedule O	contains	a resp	onse to any questi	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
N E	1 a	Federated campaigns		1 a					
Z N	Ŀ	Membership dues		1 b	321,244.	,			<u> </u>
5.₹	C	: Fundraising events		1 c	321,244.				
FE	d	Related organizations		1 d					
S. S.	e	Government grants (contributi	ons)	1 e		ļ ,			
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f	All other contributions, gifts, q similar amounts not included	•	-	9,624.				
8 8	g	Noncash contributions include	ed in Ins 1a-	1f: \$					ł
_ш	h	Total. Add lines 1a-1f			•	330,868.			
3					Business Code				
凝	2 a	Programs			711210	131,816.		71,932.	59,884.
냸	b	,		[
₹	С								
SE	d	'							<u> </u>
Z	е								
စ္တ	f	All other program service	ce reveni	ue . [<u></u>		<u> </u>
<u>ā</u>	g	Total. Add lines 2a-2f			<u> </u>	131,816.			<u> </u>
	3	Investment income (inc	luding di	vidend	s, interest and				
		other similar amounts)			•				
	4	Income from investmen	it of tax-e	exempt	bond proceeds				
	5	Royalties			•				
			(i) R	teal	(ii) Personal				
	6 a	Gross rents							
	b	Less rental expenses							
	С	Rental income or (loss)							
	d	Net rental income or (lo	oss)		•				
	7 a	Gross amount from sales of assets other than inventory	(ı) Seci	urities	(ii) Other				
	_	Less, cost or other basis and sales expenses							
		Gain or (loss)	L						
	d	Net gain or (loss)			•				
OTHER REVENUE	8 a	Gross income from fund (not including \$of contributions reporte	_						
S. RE		See Part IV, line 18			a 4,985.				
물	b	Less direct expenses		1	b 1,285.				
Ö		Net income or (loss) fro	m fundra	using 6		3,700.		-	
		Gross income from gan See Part IV, line 19		_	a	3,700.			
	b	Less direct expenses		I	b				
į	С	Net income or (loss) fro	m gamın	g activ	vities •				
	10 a	Gross sales of inventory and allowances	y, less re	turns	a		-		
	b	Less. cost of goods sold	d.		b				
	_ c	Net income or (loss) fro	m sales	of inve	ntory			· 	
		Miscellaneous Revenu	ıe		Business Code				
	11 a						-		<u> </u>
	b								
	С								
	d	All other revenue							
	е	Total. Add lines 11a-11d	d	_	>				

12 Total revenue. See instructions

466,384

71,932.

Form 990 (2012) The Red Castle Gun Club Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete

Sec	Check if Schedule O contains a r			ompiete column (A)	
	Crieck ii Scriedule O contains a r			/C\	
7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
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				,
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				· · · · · · · · · · · · · · · · · · ·
a	Management				
	Legal				
	: Accounting		 		
	,				
	Lobbying				
	Professional fundraising services See Part IV, line 17				
	Investment management fees			<u> </u>	
g	Other. (If line 11g amt exceeds 10% of line 25, col- umn (A) amt, list line 11g expenses on Sch 0)				
12	Advertising and promotion	439.	439.		
13	Office expenses	1,198.	599.	599.	
14	Information technology	1,170.	333.		
15	Royalties				
16	Occupancy	101,454.	101,454.		
17	Travel	101,454.	101,434.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .			7-2	
19	Conferences, conventions, and meetings				
20	Interest	2,015.	2,015.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
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)				1
a	Range Expenses	201,519.	201,519.		
t	Dues	19,275.	19,275.		
C	Postage & Shipping	10,943.	5,472.	5,471.	
	Printing & Publications	7,321.	3,661.	3,660.	
	All other expenses	2,103.	2,103.		
25	Total functional expenses Add lines 1 through 24e	346,267.	336,537.	9,730.	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)				

34

BAA

Total liabilities and net assets/fund balances

34

1,175,935.

Form 990 (2012)

1,087,761

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 Cash - non-interest-bearing 114,231 1 192,398. 2 Savings and temporary cash investments 2 170,492 180,499 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 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 ASSETS 7 Notes and loans receivable, net 8 Я Inventories for sale or use Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 803,038. 10b **b** Less accumulated depreciation 803,038 10 c 803,038 11 11 Investments - publicly traded securities. 12 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 Other assets See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,087,761 16 1,175,935 17 17 Accounts payable and accrued expenses <u>18</u> 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D ABILIT 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 58,943 27,000. 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 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 25 26 26 Total liabilities. Add lines 17 through 25 27,000. 58,943 Organizations that follow SFAS 117 (ASC 958), check here > X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 1,028,818 27 27 1,148,935. 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets R Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. FUZD 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 33 Total net assets or fund balances 1,028,818 1,148,935.

TEEA0111L 01/03/13

For	m 990 (2012) The Red Castle Gun Club 73	<u>-0770:</u>	L51	P:	age 12
Pa	rt XI Reconciliation of Net Assets	<u></u>			
	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		166,	384.
2	Total expenses (must equal Part IX, column (A), line 25)	2		346,	267.
3	Revenue less expenses Subtract line 2 from line 1	3		120,	<u>117.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,0	028,	818.
5	Net unrealized gains (losses) on investments	5			
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			0.
10					
	column (B))	10	1,_	<u> 148, </u>	<u>935.</u>
<u>Pa</u>	rt 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. X Cash Accrual Other				
	If the ergonization abanded its method of executation from a prior year or abadyad 'Other' evaluation				1
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		İ]	
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both:	wed on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
1	b Were the organization's financial statements audited by an independent accountant?		2 b		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa	rate	ľ		
	basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				ئــــــــا
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the auc review, or compilation of its financial statements and selection of an independent accountant?	lit,	2 c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3 :	a 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?		3 a		X
		د.اس.		\vdash	
,	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a or audits, explain why in Schedule O and describe any steps taken to undergo such audits	uuit	3 6	,	

Form **990** (2012)

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

OMB No 1545-0047

2012

Copen to Rublic in Spection.

Th	e Red Castle Gun Club		73-0770151
	Organizations Maintaining Dono	or Advised Funds or Other Similar Fu	
264-2	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).		<u> </u>
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and dor are the organization's property, subject to the	nor advisors in writing that the assets held in di organization's exclusive legal control?	onor advised funds Yes No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing that grant fun- of the donor or donor advisor, or for any other	ds can be used only r purpose conferring Yes No
Pa	ห้เปรา Conservation Easements. Comp	lete if the organization answered 'Yes	to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by		
	Preservation of land for public use (e g , r	ecreation or education) Preservation	of an historically important land area
	Protection of natural habitat	Preservation of	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization hast day of the tax year.	neld a qualified conservation contribution in the for	m of a conservation easement on the
	ast day of the tax year.		Held at the End of the Tax Year
i	a Total number of conservation easements .		2 a
1	b Total acreage restricted by conservation ease	ments	2 b
(Number of conservation easements on a certification	fied historic structure included in (a)	2 c
(d Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, and not on a histo	ric 2 d
3	Number of conservation easements modified, trar tax year ►	sferred, released, extinguished, or terminated by t	he organization during the
4	Number of states where property subject to conse	rvation easement is located >	
5	Does the organization have a written policy re and enforcement of the conservation easemer	garding the periodic monitoring, inspection, ha	ndling of violations,
6	Staff and volunteer hours devoted to monitoring, i	nspecting, and enforcing conservation easements	during the year
7	Amount of expenses incurred in monitoring, insper	ecting, and enforcing conservation easements during	g the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of se	ction 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote conservation easements		
Pái	Till Organizations Maintaining Colle	ctions of Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization ansi	wered 'Yes' to Form 990, Part IV, line	8
1 a	a If the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finar	ld for public exhibition, education, or research in fi	
ŀ	If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items:	r SFAS 116 (ASC 958), to report in its revenue or public exhibition, education, or research in further	statement and balance sheet works of art, erance of public service, provide the
	(i) Revenues included in Form 990, Part VIII,	line 1	► \$
	(ii) Assets included in Form 990, Part X .	• •	> \$
	If the organization received or held works of art, h amounts required to be reported under SFAS	116 (ASC 958) relating to these items:	
é	Revenues included in Form 990, Part VIII, line	1	▶ \$

b Assets included in Form 990, Part X

Schedule D (Form 990) 2012 The Red Castl	le Gun Club		73-077	70151 Page 2
Partill Organizations Maintaining Colle	ections of Art, Hist	orical Treasures, o		
3 Using the organization's acquisition, accession, a items (check all that apply).	nd other records, check a	any of the following that a	are a significant use of its	collection
a Public exhibition	d Loan	or exchange programs		
b Scholarly research	e Other	•		
c Preservation for future generations				
4 Provide a description of the organization's collect Part XIII	ions and explain how the	y further the organization	's exempt purpose in	
5 During the year, did the organization solicit or to be sold to raise funds rather than to be ma	intained as part of the	organization's collectior	1?	Yes No
Escrow and Custodial Arrangements. (reported an amount on Form 990)	Complete if the organize organize), Part X, line 21.	zation answered 'Yes' t	o Form 990, Part IV, III	ne 9, or
1 a Is the organization an agent, trustee, custodia on Form 990, Part X?			her assets not included	Yes No
b If 'Yes,' explain the arrangement in Part XIII a	and complete the follow	ing table		
				Amount
c Beginning balance	•		1c	
d Additions during the year	•		1 d	
e Distributions during the year			1 e	
f Ending balance		2	11	V ₂ N ₂
2 a Did the organization include an amount on Fo b If 'Yes,' explain the arrangement in Part XIII.			d in Part XIII	Yes No
Part Endowment Funds. Complete if	the organization ar	nswered 'Yes' to Fo	orm 990, Part IV, III	ne 10.
(a) Curren			(d) Three years	(e) Four years
1 a Beginning of year balance				
b Contributions				
c Net investment earnings, gains, and losses				
d Grants or scholarships				
Other expenditures for facilities and programs				
f Administrative expenses				
g End of year balance				
2 Provide the estimated percentage of the curre		ne 1g, column (a)) held	l as.	
a Board designated or quasi-endowment				
b Permanent endowment				
c Temporarily restricted endowment				
The percentages in lines 2a, 2b, and 2c should	d equal 100%			
3 a Are there endowment funds not in the possession organization by	of the organization that	are held and administere	d for the	Yes No
(i) unrelated organizations				3a(i)
(ii) related organizations				3a(ii)
b If 'Yes' to 3a(ii), are the related organizations	•			3b
4 Describe in Part XIII the intended uses of the				
Particol Land, Buildings, and Equipment			(a) A = 0	(d) Poole value
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land		·		

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land			· Committee (Co	
b Buildings		668,685.		668,685.
c Leasehold improvements				
d Equipment		122,668.		122,668.
e Other		11,685.		11,685.
Total. Add lines 1a through 1e (Column (d)	must equal Form 990, Part X, co	olumn (B), line 10(c)) •	803,038.

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Schedule **D** (Form 990) 2012

Schedule D (Form 990) 2012 The Red Castle Gu		73-0770	151 Page :
Part VII Investments - Other Securities. See	Form 990, Part X,	line 12. N/A	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. (end-of-year market valuation)	Cost or alue
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
	 		·
(B)			
(C)		· · · · · · · · · · · · · · · · · · ·	
(A) (B) (C) (D)			
(E)	·		
(F)		····	
(G)			
(H)	ļ		
(l)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)	1		
Part VIII Investments - Program Related. See			<u> </u>
(a) Description of investment type	(b) Book value	(c) Method of valuation.	
(1)	 	end-of-year market va	alue
(1)			
(2)			
(3)			
(4)		· · · · · · · · · · · · · · · · · · ·	
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)	•		
Part IX Other Assets. See Form 990, Part X,	line 15. N/A		
	scription		(b) Book value
(1)			
(2)			
(3)			
(4)			
	 		
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B), line 15)	<u> </u>	
Part X Other Liabilities. See Form 990, Part	X, line 25.		
(a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2)			
(3)			
(4)	 		
(5)			
(6)	 	- 	
(7)			
		_	
(8)		-	
(9)			
(10)			
(11)		→	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	<u> </u>		
2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote under FIN 48 (ASC 740) Check here if the text of the footnote has been pro-	to the organization's financial si	tatements that reports the organization's liability fo	r uncertain tax positions
under FIN 48 (ASC /4U). Check here if the text of the foothote has been pro	VIGEO IN PART XIII	6-1-1	a D (Form 990) 2012

Page 3

Schedule D (Form 990) 2012 The Red Castle Gun Club	73-0770151 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Re	venue per Return N/A
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	
b Donated services and use of facilities 2 b	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	2 e
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)	
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 Ex	knenses ner Return N/A
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	
c Other losses . 2c	
d Other (Describe in Part XIII)	
e Add lines 2a through 2d	2 e
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.	
b Other (Describe in Part XIII)	
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 line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part XII, lines 2d and 4b. Also complete this part XII, lines 2d and 4b.	a and 4; Part IV, lines 1b and 2b, Part V, it to provide any additional information
	·
BAA	Schedule D (Form 990) 2012

SCHEDULE L (Form 990 or 990-EZ)

Part I

Transactions With Interested Persons

➤ Complete if the organization answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, 28c,
or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Attach to Name of the organization

Red Castle Gun Club

Employer identification number 73-0770151

	Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-E2, Part V, line 40b									
1	(a) Name of disqualified person	(b) Relationship between disqualified	(c) Description of transaction	(d) Corrected						
		person and organization		Yes	No					
(1)										
(2)										
(3)										
(4)				7	T					
(5)										
(6)										

Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958

^\$-

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part II Loans to and/or From Interested Persons.

Complete if the organization answered 'Yes' on Form 990-EZ, Page V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		from the		`from the		(e) Original principal amount	(f) Balance due	(g) In c	lefault?	by bo	proved ard or nittee?		ritten ment?
			То	From			Yes	No	Yes	No	Yes	No				
(1) John W Camph	ell															
(2)	Member	Building	Х		10,000.	10,000.		X	X		X					
(3) Bob Huntingt	on	-										- 				
(4)	Member	Building	X		10,000.	10,000.		Х	X		Х					
(5) Helen Huntir	gton															
(6)	Member	Building	X		10,000.	10,000.		Х	X		Х					
(7) Leonard Fraz	ier															
(8)	Member	Building	X		5,000.	5,000.		Х	X		X					
(9) Dale Schule:	Member	Building	Х		10,000.	10,000.		X	X		Х					
(10) Del Schuler	Member	Building	X		5,000.	2,000.		Х	X		Х					
Total					▶ \$	54,000.										

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of Assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2012

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, 28c,
or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

The Red Castle Gun Club

Employer identification number 73-0770151

	Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b										
1	(a) Name of disqualified person			(d) Co	rrected?						
		person and organization		Yes	No						
(1)											
(2)					Γ						
(3)											
(4)											
(5)											
(6)											

Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958

\$ •\$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Loans to and/or From Interested Persons.

Complete if the organization answered 'Yes' on Form 990-EZ, Page V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	fro	an to or m the ization?	(e) Original principal amount	(f) Balance due	(g) In (default?	(h) Ap by bo comm	ard or	(ı) Wı agreei	itten nent?
	1		То	From			Yes	No	Yes	No	Yes	No
(1) James Smithe	r											
(2)	Member	Building	X		2,000.	2,000.		X	Х		X	
(3) Roger Vander	hende											
(4)	Member	Building	X		5,000.	5,000.		Х	X		X	
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
otal					▶ \$,	

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of Assistance	(e) Purpose of assistance
(1)					<u> </u>
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2012

Part V Business Transactions In Complete if the organization answ	tolting interested i cist	ns.			
	vered 'Yes' on Form 990, Part IV	/, line 28a, 28b, or 28d			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	-	aring of ization's nues?
(1)				Yes	No
(2)				<u> </u>	1
(3)					
(4)					
(5)					ļ
(6)					ļ
(7) (8)			<u> </u>		
(9)					-
(10)					
Partivi Supplemental Information					4
Complete this part to provide additi	onal information for responses	to questions on Sched	ule L (see instructions).		
					- - -
					- -
					-
					· ·
					· ·

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Name of the organization	Employer identification number
The Red Castle Gun Club	73-0770151
Form 990, Part VI, Line 11b - Form 990 Review Process	
No_review was or will be conducted.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
No documents available to the public.	
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