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## 990

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the information on the form.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Internal Revenue Service 2013, and ending For the 2013 calendar year, or tax year beginning 20 Check if applicable PIONEERS INC C Name of organization D Employer Identification number 61-0909387 Address change Doing Business As Number & street (or P O box if mail is not delivered to street address) Room/suite Telephone number Name change 904A NORTH MAIN ST PO BOX 820 270-885-0825 Initial return City or town, state or province, country, and ZIP or foreign postal code 177864. Terminated HOPKINSVILLE KY 42241-0820 Amended return H(a) Is this a group return Application Name and address of principal officer DWIGHT MC GEE Yes X No for subordinates? pending 902 NORTH MAIN HOPKINSVILLE KY 42240-Are all subordinates included? If "No," attach a list (see instructions) 501(c)(3) 501(c)( ) ◀ (insert no.) Tax-exempt status 4947(a)(1) or 527 Yes WWW.PIONEERSINC.ORG Website: H(c) Group exemption number Year of formation 1952 X Corporation Trust M State of legal domicile KY Part I Summary CULTURAL AWARENESS, Briefly describe the organization's mission or most significant activities ASSIST CITI ctivities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 33 <del>33</del> Number of independent voting members of the governing body (Part VI, line 1b) . . 4 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) SCANNED SEF I 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12. 7a Net unrelated business taxable income from Form 990-T, line 34 7b **Current Year** 5180. 8 Contributions and grants (Part VIII, line 1h) 320. 9 Program service revenue (Part VIII, line 2q) 13. 10 Investment income (Part VIII column (A); lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 86,96, 10c, and 11e) 69864. 11 Total revenue - add lines 8 through 11 (must equal Part VIII, 75377. 12 column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 173 Benefits paid to or for mempers (Part IX, column (A), line 4) 17920. 13 14 6345. Salaries, other compensation, employee benefits (Part IX, 15 column (A), lines 5-10) Professional fundraising fees (Patt) (2011) (4), line 16a Total fundraising expenses, (Part IX, column (D), line 42738. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . . . 67003. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 8374. 19 **Beginning of Current End of Year** 474082. 505378 20 Total assets (Part X, line 16) 8282. 21 Total liabilities (Part X, line 26) 22 497096. 474082 Net assets or fund balances. Subtract line 21 from line 20 Signature Block Part II Under penalties of penury, 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

08/15/2014 Signature of officer Sign Date DWIGHT MCGEE PRESIDENT Here Type or prnt name and title Paid Print /Type preparer's name Preparer's signature Date Check 08/15/2014| self-employed BERNARD B STANDARD P00001881 Preparer S & S BOOKKEEPING Firm's EIN ▶ 61-1015608 **Use Only** Firm's name PO BOX 284 Firm's address Phone no HOPKINSVILLE KY 42241-0284 270-885-1223

May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

Yes Form 990 (2013)

e0

Form	n 990 (2013) PIONEERS INC	61-0909387 Page <b>2</b>
Pai	Statement of Program Service Accomplishments	- Det III
1	Check if Schedule O contains a response or note to any line in this Briefly describe the organization's mission CULTURAL AWARENESS / UNITY / CRISIS RELI	
3	Did the organization undertake any significant program services during the year of the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O  Did the organization cease conducting, or make significant changes in how it con if "Yes," describe these changes on Schedule O  Describe the organization's program service accomplishments for each of its three Section 501(c)(3) and 501(c)(4) organizations are required to report the amount and revenue, if any, for each program service reported	nducts, any program services? Yes X No
4a	11052	615.)(Revenue\$
	GRANTS WERE MADE TO CITIZENS OF THE COMM	
4b		
	DURING THE HOLIDAYS WE HAVE A THANKSGIVE LARGE WE ALSO SPONSOR CHRISTMAS BASKETS	
4c	(Code:) (Expenses \$ including grants of \$	) (Revenue \$
4d 4e	(Expenses \$ 11653. including grants of \$ 615	5。)(Revenue \$ )
BCA		Form <b>990</b> (2013)

Par	t IV Checklist of Required Schedules			<del></del>
	1		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	X	
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		X
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		X
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		X
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		X
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		X
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		Х
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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		\$16. "	
	VII, VIII, IX, or X as applicable	, a,	7.7 <u>3</u>	
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	Х	
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		Х
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		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e		X
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statement 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	l	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ь	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	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance			
	to or for any foreign organization? 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 other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
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		X
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	X	ļ
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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
ь	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) Yes No 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Х 21 22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States Χ on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 . . . . . . . . . Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's 23 current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," Χ complete Schedule J 23 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? If "Yes," answer lines Χ Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . 24b 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 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 Х 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 X 990-EZ? If "Yes," complete Schedule L, Part I 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? Χ 26 If so, complete Schedule L, Part II 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 Х 27 . . . 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L. . . 9. ્ષ 🥞 Part IV instructions for applicable filing thresholds, conditions, and exceptions) X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Χ 28b 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? If "Yes," complete Schedule L, Part IV Х 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Χ 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Part I X 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II X 32 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 Х 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R. Part II. Х III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . . . . 35a 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)? If "Yes," complete Schedule R. Part V. line 2 X 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related 36 organization? If "Yes," complete Schedule R, Part V, line 2 Х 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Χ and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and Х 38

Form 990 (2013) PIONEERS INC 61-0909387 Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V . . . . . . n 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . . . **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . . . . . . c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 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 . . . . b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?. . . 2b 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?. . . . X 3a b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 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)? . . . . 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? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? . . . . . . . . . . . . . 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X b If "Yes," did the organization include with every solicitation an express statement that such contributions or 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? . . . c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g If the organization rec'd 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 7h . . . . . . . . . . . . . . . . . . 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, Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? . . . . . . . b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter 10 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter . 11a b Gross income from other sources (Do not net amounts due or paid to other sources 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 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 

14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . . .

Form 990 (2013) Part VI

1	77
1	х

Sec	tion 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			
	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			1
b	Enter the number of voting members included in line 1a, above, who are independent			;
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	Ì		
	any other officer, director, trustee, or key employee?	2	X	
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		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more	<u> </u>	1	
	members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons			
-	other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	75		
•	the year by the following			
а	The governing body?		Х	!
- h	Each committee with authority to act on behalf of the governing body?	8a	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	8b	Λ	
•	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			Х
Sac	tion B. Policies (This Section B requests information about policies not required by the Internal Rever	9	) odo	
000	tion B. I oncies (This occitor B requests information about policies not required by the internal Never	iue C		/ Na
102	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	102		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	405		
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	10b	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a		
	Did the organization have a written conflict of interest policy? If "No," go to line 13	420	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	Δ.	
·	describe in Schedule O how this was done	400		Х
13	Did the organization have a written whistleblower policy?	12c		X
14	- · · ·	13 14		X
15	Did the organization have a written document retention and destruction policy?	14		
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			,
	The organization's CEO, Executive Director, or top management official	48-		v ·
		15a		X
D	Other officers or key employees of the organization	15b		
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
104	· · · · · · · · · · · · · · · · · · ·	40-		v
_	with a taxable entity during the year?	16a		X
U	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			
Socti	the organization's exempt status with respect to such arrangements?	16b		Ĺ. <u></u>
	on C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed   KY  Section 6404 requires an arrangement of the Form 4000 (and 4004) (and 400			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only	)		
	available for public inspection. Indicate how you made these available. Check all that apply.			
40	Own website Another's website X 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 ►WENDELL LYNCH 3642 STEEP HOPKINSVIL KY 42240 270-885-	655	4	

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

Check if Schedule O contains a response or note to any line in this Part VII. . . . .

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

- 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, 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

Keek this box if neither the organization nor any related organizations compensated any current officer, director, or trustee.

		(C)								
		Position								
	1	(do n				nan one				
(A)	(B)	,				both ar		(D)	(E)	(F)
Name and Title	Average	l		-		trustee	j	Reportable	Reportable	Estimated
	hours per	·			_	T		compensation	compensation	amount of
HENDY GNODWON	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1)HENRY SNORTON								_		
PRESIDENT	4			X	<u> </u>			0	0	0
(2) DWIGHT MCGEE	1				}				_	
VICE PRESIDENT	8			X				0	0	0
(3)KENNETH GREENW	]			.,				_		•
SECRETARY	4			X			_	0	0	0
(4)ANDREW WATKINS TREASURER	5			X				0	^	0
(5)ANDERSON HIGHT	3			Δ.	<u> </u>			U	0	0
ASST SECRETARY	4			X				О	0	0
(6)BERNARD STANDA						-	-			
FINANCIAL SECR	6			X		1		0	0	0
(7)WENDELL LYNCH										
CATERING COORD	] 10			X	ł			0	0	0
(8)										
(9)										
(10)										
(11)										
(12)			-		<b></b> -					
(13)										
(14)					-					
		1 1		ــــــــــــــــــــــــــــــــــــــ			<u> </u>	<u> </u>		- 000

Part VII Section A. Officers, Direct	iors, irus	stees,		(C	)	yees,	and	d Highest Compe	nsated Employee	s (con	tinued	<u>d)</u>
(A) Name and title	(B) Average	ge officer and a director/trustee) Reportable Reportable									(F) timated	í
	hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	∞mp fr orga and	nount of other pensation om the anization I related nization	on on d
(15)										<u> </u>	•	
(16)			_							••		
(17)		1										
(18)												
(19)												
(20)	-											
(21)												
(22)												<del></del>
(23)	ļ <u>.</u>			ļ <u>.</u>	 							
(24)							-					
(25)										.= .		
1b Sub-total					٠.		<b>&gt;</b>	0	0		0	
c Total from continuation sheets to Part d Total (add lines 1b and 1c)	VII, Sectio						<b>&gt;</b>	0	0		0	
2 Total number of individuals (including but from the organization ▶	•	•						<del></del>	0,000 of reportable o	ompens	ation	-
											Yes	No
3 Did the organization list any former office employee on line 1a? If "Yes," complete S				•		oyee, o	or ni	ghest compensated		3		$\tilde{\mathbf{x}}$
4 For any individual listed on line 1a, is the								-				
the organization and related organizations	greater th	an \$15	50,000	)? If 	"Ye:	s," con	nple	te Schedule J for suc	ch	4		X :
5 Did any person listed on line 1a receive or	accrue co	mpens	sation	from	n any	y unre	lated	d organization or indi	vidual for			<u> </u>
services rendered to the organization? If	"Yes," com	plete	Sched	ule .	l for	such į	pers	on	··· · · · · · · · · · ·	. 5	<u> </u>	X
Section B. Independent Contractors  1 Complete this table for your five highest of	ompensate	ed inde	pende	ent c	ontr	actors	that	t received more than	\$100,000 of			
compensation from the organization Repo										year.		
(A) (B)  Name and business address Description of services Co									Compe	C) nsation		
		· · · ·										
2 Total number of independent contractors		out not	lımıte	d to	thos	se liste	d at	pove) who received r	nore than	<del></del>		
\$100,000 in compensation from the organ	ızation ▶											

Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII . . . (C) (B) (D) Related or Unrelated Total revenue Revenue exempt business excluded from tax function revenue under sections revenue 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts Federated campaigns 1a 4565. Membership dues 1b b Fundraising events 1c Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts 615. not included above included in lines 1a-1f 5180. Total. Add lines 1a-1f **Business Code** 320. 320. ANNIVERSITY 722320 Program Service Revenue All other program service revenue . . 320. Total. Add lines 2a-2f Investment income (including dividends, interest, and 13. 13. other similar amounts) . . . . . . . . . Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 950. 6a Gross rents Less rental expenses -Rental income or (loss) 950. 950. 950. d Net rental income or (loss) Gross amount from (i) Securities (ii) Other sales of assets other than inventory Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) 171401 See Part IV, line 18 102487. b Less direct expenses . b 68914. 102487 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 garning activities 10a Gross sales of inventory, less returns and allowances . b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11a d All other revenue e Total. Add lines 11a-11d

75377.

1283.

12 Total revenue. See instructions

## Form 990 (2013) PIONEERS INC Part IX Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must o				
	Check if Schedule O contains a	<del></del>			
	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 US See Part IV, line 21	17920.	17920.		
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	Benefits paid to or for members		<u></u>		· · · · · · · · · · · · · · · · · · ·
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)	65.45			
7	Other salaries and wages	6345.	<del></del>		6345.
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			- , ,	<del></del>
b	Legal	2014.		2014	
C	Accounting	2014.		2014.	<del></del>
d	Lobbying				
e	Prof fundraising services See Part IV, line 17	· · · · · · · · · · · · · · · · · · ·			
f -	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
40	col. (A) amount, list line 11g expenses on Sch O )				
12 13	Advertising and promotion				
14	Office expenses				
15	Royalties				····
16	Occupancy				<del>-</del>
17	Travel		·····		
18	Payments of travel or entertainment expenses	······································			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				· · · · · · · · · · · · · · · · · · ·
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	24517.		24517.	
23	Insurance	9707.		9707.	
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)				
а	COMMUNITY APPRECIATI	3000.	3000.		
b	HOLIDAY ASSISTANCE	3500.	3500.		·
C					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	67003.	24420.	36238.	6345.
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)				

## Form 990 (2013) PIONEERS INC Part X Balance Sheet

	Check if Schedule O contains a response or note to any line in this Par	(A)		(B)
		Beginning of year		End of year
1	Cash - non-interest-bearing	34546.	1	24548
2	Savings and temporary cash investments	62006	2	63088
3	Pledges and grants receivable, net		3	03000
4		31500.	4	10200
5		31300.	4	10200
ا ا	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)			
, l	voluntary employees' beneficiary organizations (see instructions) Complete			
Assets	Part II of Schedule L		6	
Š   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	<u> </u>		
	basis Complete Part VI of Schedule D 10a 560000	•		
b	Less accumulated depreciation 10b 183754	376246.	10c	376246
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	<u> </u>	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	505378.	16	474082
17	Accounts payable and accrued expenses	303370.	17	4/4002
18			18	
1		<b> </b>	19	
19	Deferred revenue			· · · · · · · · · · · · · · · · · · ·
20	Tax-exempt bond liabilities		20	
g 21	Escrow or custodial account liability. Complete Part IV of Schedule D	•	21	
22	Loans and other payables to current and former officers, directors,			
Liabilities 22	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	<u>-</u>
24	Unsecured notes and loans payable to unrelated third parties	. 8282.	24	
25	Other liabilities (including federal income tax, payables to related third	1		
	parties, and other liabilities not included on lines 17-24) Complete Part X			
- 1	of Schedule D	·L	25	
26	Total liabilities. Add lines 17 through 25	8282.	26	
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
စ္က	complete lines 27 through 29, and lines 33 and 34.			
Ž 27	Unrestricted net assets	497096.	27	474082
g 28	Temporarily restricted net assets		28	
© 29	Permanently restricted net assets		29	
5	Organizations that do not follow SFAS 117 (ASC 958), check here ▶	, <del></del>		
<u>፟</u>	and complete lines 30 through 34.	1		
ম 30		-	30	
988 31	• • •	· · · · · · · · · · · · · · · · · · ·		
¥   31	Paid-in or capital surplus, or land, building, or equipment fund	<del></del>	31	
Net Assets or Fund Balances 27 28 29 30 31 32 32 32 32 32 32 32 32 32 32 32 32 32	Retained earnings, endowment, accumulated income, or other funds	407000	32	474002
33	Total net assets or fund balances	E 0 E 2 7 0	33	474082
34	Total liabilities and net assets/fund balances	505378.	34	474082

3b

Form **990** (2013)

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

### **SCHEDULE A**

(Form 990 or 990-EZ)

### **Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization **Employer identification number** 

OMB No. 1545-0047

2013

Open to Public Inspection

	PIC	ONEERS	INC						61	-090	9387			
Pa	art I	Rea	son fo	r Public Charity	Status (All organizations m	ust com	plete the	s part ) S	See insti	uctions				
The	orga	nızatıon ıs no	ot a priva	te foundation becau	use it is: (For lines 1 through 11	, check o	only one	box.)						
1 [	] <i>p</i>	A church, cor	vention	of churches, or asso	ociation of churches described i	n sectio	n 170(b)	(1)(A)(i)						
2	Ĩ A	A school desc	cribed in	section 170(b)(1)(	A)(ii). (Attach Schedule E)									
3	_				e organization described in sec	tion 170	)(b)(1)(A	.)(iii)						
4	7	A medical res	search or	ganization operated	I in conjunction with a hospital o	lescribed	d in sect	ion 170	b)(1)(A	(iii). Ent	er the ho	ospital's	name	
-		aty, and state		,	•									•
5	_	•		ted for the benefit o	f a college or university owned	or opera	ted by a	governr	nental u	nit desc	nbed in s	ection		-
_	_	-		nplete Part II )			<b>,</b> -	3						
6	_			•	overnmental unit described in se	ection 1	70(h)(1)	(A)(v)						
7	===			-	substantial part of its support fro				r from th	ne dener	al public			
		-		170(b)(1)(A)(vi). (Co		iii a gov	Cililicia	ar armi o		ie gener	ai public			
8 [	_				70(b)(1)(A)(vi) (Complete Part	H V								
9	==	_			) more than 33 1/3 % of its sup	•	- contrib	utione n	amban	hin food	and are	200		
<b>3</b> L	_				pt functions - subject to certain					•		JSS		
					d unrelated business taxable in	•								
			_		0, 1975 See section 509(a)(2)	•			ax) 110/11	Dusines	363			
10	$\neg$				exclusively to test for public safe			-	11					
11	≕	-	-	•	exclusively to test for public sale	•			•		••			
''' L		•	•	•	ed organizations described in se	•				•	-			
					he type of supporting organizati						secuon	i		
	a	— — ·		b Type II	· · · · · · · · · · · · · · · · · · ·		•		_ `	•	Non-fund	oden na llee	intons	nt n d
٦				·	c	•	•			•		atonally	megra	aleu
е	_	-		•	and other than one or more put	•				•				
		509(a)(1) or s		•	and other than one or more put	niciy sup	ported	nganizai	ions de:	scribed ii	n section	,		
					competion from the IDC that it is	o Tuno	l Tuma l	l a a T	. 111					
f		•		_	mination from the IRS that it is	• •		•		oorting				_
_		•			ion accorded only off or contain						••••		• • • • • •	∟
g		-		•	ion accepted any gift or contribu		-		• •	rsons				
	Į,	•		-	ntrols, either alone or together v	•					1	44 41	Yes	No
	,				the supported organization?							11g(i)		
					ed in (i) above?					• • • •		11g(ii)		
				• .	escribed in (i) or (ii) above? .			• • • • • •			• • • • • • • • • • • • • • • • • • • •	11g(iii)	<u> </u>	L
<u>h</u>			<u>_</u>	T	e supported organization(s)	1	<del></del>	r <del></del>		T				
,		ame of supp		(ii) EIN	(iii) Type of organization	1 ' '	he organ-	( <b>v</b> ) D	•	1	ls the	, ,	Amour	
		organization	l		(described on lines 1-9	ızatıon		notif	y the	_	zation in	St	rbbott	
					above or tRC section	(i) listed	-	l -	ation in	∞l	(i)			
					(see instructions))	_	ming	∞ı (i)		_	nized			
						docun			cort?		US?			
						Yes	No	Yes	No	Yes	No			
(A)								ł						
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(B)					:	Ì								
										ļ <u></u>				
(C)						l				İ	}			
(D)											1			
									L					
(E)														
						<u> </u>			L	<u></u>				
Tota	ıl					1								

### 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						<del></del>
Cale	ndar year (or fiscal year beginning in) 🕒 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")	954.	850.	1611.	1008.	615.	5038.
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		1		i		
	organization without charge		;	•			
4	Total. Add lines 1 through 3	954.	850.	1611.	1008.	615.	5038.
	The portion of total contributions by each						····
_	person (other than a governmental unit		Ì				
	or publicly supported organization)						
	included on line 1 that exceeds 2% of						
	the amount shown on line 11,						
	column (f)						
•	Public support. Subtract line 5 from line 4.						5038.
	tion B. Total Support	<u> </u>			-		3030.
	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 4	954.	850.	1611.	1008.	615.	5038.
	Gross income from interest, dividends,			1011.	1000.		3030:
•	payments received on securities loans,						
	• •						
	rents, royalties and income from similar	3364.	12550.	7211.	5460.	976.	29561.
	Sources	3304.	12330.	/211.	3400.	970.	29301.
9	Net income from unrelated business		1				
	activities, whether or not the business is						
	regularly carried on						<del> </del>
10	Other income Do not include gain or						
	loss from the sale of capital assets		İ	1			
	(Explain in Part IV)						24500
	Total support. Add lines 7 through 10	L		<u> </u>			34599.
	Gross receipts from related activities, etc (see	=				12	
13	First five years. If the Form 990 is for the orga			=			
	organization, check this box and stop here			<u> </u>			
	tion C. Computation of Public Support						14 56
	Public support percentage for 2013 (line 6, colu	• • •					14.56 %
	Public support percentage from 2012 Schedule						13.27 %
16a	33 1/3% support test - 2013. If the organization					· ·	. —
	and stop here The organization qualifies as a						_
b	33 1/3% support test - 2012. If the organization						<del></del>
	and stop here. The organization qualifies as a						▶ ∐
17a	10% facts-and-circumstances test - 2013. If	•		•	•		
	is 10% or more, and if the organization meets t				-	•	
	in Part IV how the organization meets the "fact	s-and-circumstan	ces" test. The or	rganization quali	fies as a publicly	y supported	C C
	organization						▶ 🏻
b	10%-facts-and-circumstances test - 2012. if	the organization of	did not check a l	oox on line 13, 1	6a, 16b, or 17a,	and line	
	15 is 10% or more, and if the organization mee	ts the "facts-and-	circumstances"	test, check this t	oox and stop he	re	
	Explain in Part IV how the organization meets to	he "facts-and-cire	cumstances" tes	t The organizati	on qualifies as a	a publicly	_
	supported organization						▶ 🔲
18	Private foundation. If the organization did not	check a box on li	ine 13, 16a, 16b	, 17a, or 17b, ch	eck this box and	d see	-
	instructions	<u></u>					▶ ∏
BCA		•	· · · · · · · · · · · · · · · · · · ·	<del></del>		le A (Form 990	

Schedule A (Fo	rm 990	or 990-EZ	) <b>2013</b> PTOI	NEERS	INC				61	09093	887	Page 4
Part IV			tal Informati	on. Provi	ide the expla	nations red	uired by Pa	rt II. line 10.	Part II, line	17a or 17b a	and	
			Also complete t							,		
	1 011	111, 11110 12.	Also complete	ilis pait io	any addition	ilai illioilliai	tion (See in	istructions)				
CHROUGH	ITS	FUND	RAISING	EVEN	ſS							
<del></del>						· · · · · · · · · · · · · · · · · · ·				- <del></del>		
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## SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
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.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization PIONEERS INC

**Employer identification number** 61-0909387

Pa	nt I Organizations Maintaining Donor Adv	vised Funds or Othe	r Similar Funds	or Accounts.	
	Complete if the organization answered "	Yes" to Form 990, Pa	rt IV, line 6		
		(a) Donor advised		(b) Funds and other	er 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 he	eld in donor advised	funds	
_	are the organization's property, subject to the organization				'es 🔲 No
6	Did the organization inform all grantees, donors, and donor for charitable purposes and not for the benefit of the donor.	or advisors in writing that gi	rant funds can be use	ed only	
	impermissible private benefit?	,,,		X Y	
Pa	rt II Conservation Easements. Complete	if the organization ans	wered "Yes" to I	Form 990, Part I\	/, line 7.
1	Purpose(s) of conservation easements held by the organization	zation (check all that apply)	1		
	Preservation of land for public use (e g , recreation or	education)	Preservation of	f an historically impor	tant land area
	Protection of natural habitat		Preservation of	f certified historic stru	cture
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qu	ualified conservation contrib	oution in the form of	a conservation easer	ment on the
	last day of the tax year				
				Held at the E	nd of the Tax Yr.
а				2a	<del> </del>
b	Total acreage restricted by conservation easements			2b	
	Number of conservation easements on a certified historic	• • •		2c	
đ	Number of conservation easements included in (c) acquire				
	structure listed in the National Register			2d	
3	Number of conservation easements modified, transferred,	, released, extinguished, or	terminated by the or	rganization during	
	the tax year				
4	Number of states where property subject to conservation		<del></del>		
5	Does the organization have a written policy regarding the	•	<del>-</del>		. <del>.</del>
_	and enforcement of the conservation easements it holds?			· · · · · · · · · · · · · · · · · · ·	es X No
6	Staff and volunteer hours devoted to monitoring, inspecting	-			
7	Amount of expenses incurred in monitoring, inspecting, ai	<u> </u>	•	· · · · · · · · · · · · · · · · · · ·	<del> </del>
8	Does each conservation easement reported on line 2(d) a	•		_	/
9	and section 170(h)(4)(B)(ii)?				'es ∐ No
9	include, if applicable, the text of the footnote to the organi				
	conservation easements	zation 5 illiandar statement	is that describes the	organization's accou	inting ioi
Pa	rt III Organizations Maintaining Collection	s of Art. Historical T	reasures or Ot	her Similar Ass	ets
	Complete if the organization answered '	•	·	inor Onimar Acc	· · · · · · · · · · · · · · · · · · ·
1 2	If the organization elected, as permitted under SFAS 116	<del></del>	<del></del>	ent and balance sheet	t works of art
	historical treasures, or other similar assets held for public				
	in Part XIII, the text of the footnote to its financial stateme	·		, p	,
	,				
ı	If the organization elected, as permitted under SFAS 116	(ASC 958), to report in its i	revenue statement a	ind balance sheet wo	rks of art,
	historical treasures, or other similar assets held for public	•			·
	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 g	gain, provide the follo	wing amounts
	required to be reported under SFAS 116 (ASC 958) relation	ng to these items.	_		-
á	Revenues included in Form 990, Part VIII, line 1			▶ \$	
	Assets included in Form 990. Part X			<b>-</b> s	

Pa	(continued)	laintaining (	collections of Art,	Historical Treasur	es, or Other Simila	r Assets	
3	Using the organization's acquisi	tion accession	and other records, che	ck any of the following th	at are a significant use o	f its collection	n items
•	(check all that apply).	don, accession,	and other records, one	or any or are renowing th	at are a significant use o	i its wiledioi	i ileilis
а	Public exhibition			d Loan or exchang	ne programs		
b	Scholarly research			e Other	ge programs		
c	Preservation for future gene	erations					
4	Provide a description of the organic		ctions and explain how	they further the organiza	tion's exempt purpose in	Part XIII	
5	During the year, did the organiz			•			
_	to raise funds rather than to be						☐ No
Pa					on answered "Yes" t		
				990, Part X, line 21.			-,
1a	Is the organization an agent, tru						<del></del> ,
	on Form 990, Part X?		•			Yes	No
b	If "Yes," explain the arrangement	nt in Part XIII an	d complete the following	g table <sup>.</sup>		<b>—</b>	
				-		Amou	unt
С	Beginning balance				1c		
đ	Additions during the year				1d		
е	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an	amount on For	n 990, Part X, line 21?		<del></del>	Yes	X No
b	If "Yes," explain the arrangement	nt in Part XIII C	heck here if the explana	ition has been provided	n part XIII	··· ·· ·· ··	🔲
Pa	rt V Endowment Fun	i <b>ds.</b> Comple	ete if the organization	on answered "Yes"	to Form 990, Part IV	', line 10.	
	(a) C	Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four y	ears back
1a	Beginning of year						
	balance						
	Contributions		<u> </u>				
С	Net investment earnings, gains,						
	and losses						
d	Grants or scholarships			<u></u>			
е	Other expenditures						
	for facilities and						
	programs						
f	Administrative						
	expenses						
g				<u> </u>			
2	Provide the estimated percentage	-	^ ^	1g, column (a)) held as:			
a	Board designated or quasi-endo		0.00 %				
		0.00 ent ▶ 0.	<b>%</b>				
С	The assessment in lines 2s 2b		<del></del>			ſ	
20	The percentages in lines 2a, 2b			nat are hald and adminin	tored for the arrangement		V N-
Ja	Are there endowment funds not (i) unrelated organizations						Yes No
	(ii) related organizations					3a(i)	
h	If "Yes" to 3a(II), are the related					3a(ii)	
	Describe in Part XIII the intende	•	•			30	l
	rt VI Land, Buildings		=	it lulius			
بنكب				orm 990 PartIV lin	e 11a See Form 99	n Part Y	line 10
	Description of property		(a) Cost or other	(b) Cost or other	(c) Accumulated	(d) Boo	
	- sourption of property	•	basis (investment)	basis (other)	Depreciation	(4) 500	. Talue
1a	Land		60,000.	2000 (00101)	Depreciation	60	,000.
	Buildings		522,000.		231,662.		,338.
	Leasehold improvements	,	<del>,</del>				
	Equipment	3	146,600.		74,856.	71	,744.
	Other	r					<u> </u>
	I. Add lines 1a through 1e (Colui		ual Form 990, Part X. co	lumn (B), line 10(c).).	· · · · · · · · · · · · · · · · · · ·	422	,082.
				.,.,, (-,-,-			

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

### Supplemental Information Regarding Fundraising or Gaming Activities | OMB No 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

2013

Department of the Treasury Internal Revenue Service

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

lame of the organization PIONEERS INC						identification number 909387
Part I Fundraising Activities. C			ered "Yes" to Form 990	), Part IV, line	: 17	
Form 990-EZ filers are not		····	-llaura antimica Chart			
<ul> <li>Indicate whether the organization r</li> <li>Mail solicitations</li> </ul>	aised funds thro		ation of non-governmen		y	
b Internet and email solicitations			ation of government gra	-		
c Phone solicitations			al fundraising events	IIIS		
d In-person solicitations		g∐ opea	ar fundraising events			
2a Did the organization have a written	or oral agreem	ent with any indi	vidual (including officers	directors tru	istees or key	employees listed in
Form 990, Part VII) or entity in con						Yes No
b If "Yes," list the ten highest paid inc						
at least \$5,000 by the organization		(,	parametric agreements			
(i) Name and address of individual	(ii) Activity	(iii) Did fund-	(iv) Gross receipts	(v) Amount	paid to (or	(vi) Amount paid to
or entity (fundraiser)	-	raiser have	from activity	retained by		(or retained by)
		custody or control of		listed in	ľ	organization
		contributions?				•
1		Yes No				
		-			;	
2					1	
3						
<del></del>		ļ				<del></del>
4						
5						
6						· <del></del>
7	- · · ·					
· · · · · · · · · · · · · · · · · · ·						
8						
9						
10						
	· · · · · · · · · · · · · · · · · · ·					
Total						
3 List all states in which the organization is reg		<del></del>	ons or has been notified it is	exempt from re	egistration or li	censing
						<del> </del>
				-		
		<del></del>				· · · ·
	· · · · · · · · · · · · · · · · · · ·					
		<del></del>				·····

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

			(a) Event #1 BARBEQUE	(b) Event #2 CATERING	(c) Other events	(d) Total events (add col (a) through
			(event type)	(event type)	(total number)	∞l (c)
Revenue	1	Gross receipts	52,582.	107,847.		160,429.
	2	Less Contributions				
	3	Gross income (line 1	50 500	100 010		
		minus line 2)	52,582.	107,847.		160,429.
	4	Cash pnzes				
Ses	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Direc	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	33,485.	66,655.		100,140.
	10	-	_	mn (d)		100,140.
	11			mn (d)		60,289.
Pa	rt II		e if the organization answered	"Yes" to Form 990, Part IV, line	e 19, or reported more than \$	315,000 on Form 990-EZ,
		line 6a	(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
nue			(a) biligo	bingo/progressive bingo	(c) Other gaining	col. (a) through col. (c)
Revenue						
<u>m</u>	1	Gross revenue				
ses	2	Cash prizes	<del></del>			
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				· · · · · · · · · · · · · · · · · · ·
	5	Other direct expenses.				
	6	Volunteer labor	Yes 0.0%	Yes 0.0%	Yes 0.0%	
	7	,	<del></del>	mn (d)		
	8	Net gaming income sum	mary Subtract line 7 from line	1, column d	▶	
	a Ist	the organization licensed t	e organization operates gamin o operate gaming activities in	each of these states?		Yes No
	_					
		Voc. " ovolous	's gaming licenses revoked, si	uspended or terminated during	the tax year?	Yes No
	_				· · · · · · · · · · · · · · · · · · ·	

# Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990. ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States General Information on Grante and Accietance Name of the organization PIONEERS INC Department of the Treasury Internal Revenue Service SCHEDULE (Form 990)

OMB No 1545-0047

2013

Employer identification number 61-0909387

Open to Public Inspection

1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection criteria	records to substant	ate the amount of the qu	rants or assistance, the qu	rantees' eliqibility for the	grants or assistance, an	the selection criteria	
used to award the grants or assistance?	sistance?			:			X Yes
2 Describe in Part IV the organization's procedures for monitoring the	ation's procedures fo		use of grant funds in the United States.	States.			
Part II Grants and Other Part IV, line 21, for any	Assistance to recipient that received	Governments and ed more than \$5,000. P	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	he United States. additional space is need	Complete if the organiza	tion answered "Yes" to	-orm 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) KY					oner)		
(2)						,	
(3)							
(4)							
(9)							
(9)							
(7)							
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organization	01(c)(3) and governr	nent organizations listed	is listed in the line 1 table				
3 Enter total number of other organizations listed in the line 1 table	anizations listed in th	le line 1 table	•••••••••••••••••••••••••••••••••••••••			<b>A</b>	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	e, see the Instruct	ions for Form 990.				Sched	Schedule I (Form 990) (2013

Schedule I (Form 990) (2013)

BCA

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public

Inspection

Employer identification number

PIONEERS INC	61-0909387
REGULAR MEETING	
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 2013

179

Attachment Sequence No

Name(s) shown on return PTONEERS TNC

Business or activity to which this form relates

Identifying number

PΙ	IONEERS INC		902 N MA	.IN			j	61-0909387
Ρ	art   Election To Expe	ense Certain	Property Under Se	ection 179				
	Note: If you have	e any listed pr	operty, complete Pa	art V before y	ou complete	e Part I.		
1	Maximum amount (see instru	uctions)					1	500,000.
2	Total cost of section 179 pro	perty placed in	service (see instruction	ons)			2	
3	Threshold cost of section 17	9 property befor	re reduction in limitati	on (see instruc	tions)	[	3	2,000,000.
	Reduction in limitation. Sub-			*	•	-	4	· · · · · · · · · · · · · · · · · · ·
	Dollar limitation for tax year.					<u> </u>		
	filing separately, see instruct					ſ	5	
6	<del> </del>	· · · · · · · · · · · · · · · · · · ·	<del> </del>	ness use only)		ted cost		- 1
_					, , , ,			
		<del></del>			-		コ	! !
7	Listed property. Enter the ar	mount from line	29	·	7	• • • • • • • • • • • • • • • • • • • •	-	
	Total elected cost of section			<u>L.</u>			8	
	Tentative deduction. Enter t			(0),00 0 0			9	· · · · · · · · · · · · · · · · · · ·
	Carryover of disallowed ded			n 4562			10	
	Business income limitation Ent		•				11	
	Section 179 expense deduct		,	•	•	′ ⊢	12	<del></del>
	Carryover of disallowed deduction						-	• • • •
	ote: Do not use Part II or Pa				<u> </u>			<u> </u>
		<del></del>	Other Depreciation (D		sted property )	/See instru	ctio	ne )
	Special depreciation allowar				<del></del>			
17	during the tax year (see instr	•			•		14	
15	Property subject to section 1	•				<u>-</u>	15	
	Other depreciation (including					_	16	
			include listed prop			_:_:_:_	10	
	MAONO Deprecia	ation (Do not	Section		structions.)			
17	MACRS deductions for asse	ts placed in ser			013	T,	17	<del> </del>
	If you are electing to group a	•		-	013		'''	
	into one or more general ass	-		•				
_			vice During 2013 Ta				tio	n System
	0000011 0-7,0000	(b) Month and	(c) Basis for depr	(d) Recovery	Γ	Deprecia		<del></del>
(	(a) Classification of property	year placed in	(business/investment use	penod	(e) Convention	(f) Method	<b>;</b>	(g) Depreciation deduction
19	a 3-year property	service	only - see instructions)				-	
	b 5-year property	1 1	·····	<del> </del>			-	<del></del>
_	c 7-year property	┨				<del></del>		
	d 10-year property	-	<del> </del>	· · · · · · · · · · · · · · · · · · ·			$\dashv$	<del></del>
_	e 15-year property	1 1		<del>-</del>			$\dashv$	
	f 20-year property	1	<del> </del>		<u></u>	<del> </del>	-	· · · · · · · · · · · · · · · · · · ·
	g 25-year property	┥ !		25 vm		S/L		
	h Residential rental			25 yrs. 27.5 yrs	MM	S/L	$\dashv$	
						<del>                                     </del>	$\dashv$	<del> </del>
	i Nonresidential real			27 5 yrs.	MM	S/L		
			<del>- · · · · · · · · · · · · · · · · · · ·</del>	39 yrs	MM	S/L S/L		
	property Section C Accets	Placed in Serv	ice During 2013 Tax	Voor Hoine ti	MM	I		on Custom
20	a Class life	Placeu III Selv	ice During 2013 Tax	Tear Using u	le Aitemau	T	iau	on System
	b 12-year	┨		12		S/L	$\dashv$	
		-		12 yrs.	1,114	S/L	+	<del></del>
	c 40-year art IV Summary (See i	netructions \		40 yrs.	MM	S/L		
_						<del></del>	24	
21						<u> </u>	21	· · · · · · · · · · · · · · · · · · ·
22			-					
22	Enter here and on the approp	-			s - see instruct	ions	22	
23			_	ııı year, enter				
	the portion of the basis atti	IDUIADIE TO SECT	iuiì ∠doa costs 💎 🚬		23		- 1	

Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization** (Including Information on Listed Property)

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

OMB No 1545-0172

Attachment Sequence No

179

Name(s) shown on return Business or activity to which this form relates Identifying number 2002 FORD VAN PIONEERS INC 61-0909387 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 500,000. 2 Total cost of section 179 property placed in service (see instructions) . 2 2,000,000. 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . . . . . 3 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 (a) Description of property (b) Cost (business use only) (c) Elected cost 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 10 Carryover of disallowed deduction from line 13 of your 2012 Form 4562. . . 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....... 13 Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 . . . ▶ 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions ) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) . . . . . . . . . 14 15 Property subject to section 168(f)(1) election . . . . . . 15 16 Other depreciation (including ACRS) . . . 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2013 . . . . . . . . 17 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 2013 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depr (d) Recovery (g) Depreciation (e) (a) Classification of property (f) Method véar placed in (business/investment use period Convention deduction service only - see instructions) 3-year property 5-year property 7-year property d 10-year property

<ul> <li>Nonresidential real</li> </ul>		39 yrs	MM	S/L	
property			MM	S/L	
Section C-Asse	ts Placed in Service During 201	13 Tax Year Using t	he Alternativ	e Depreciat	tion System
20a Class life				S/L	
b 12-year		12 yrs		S/L	
c 40-year		40 yrs.	MM	S/L	
Part IV Summary (Se	e instructions.)				• • • • • • • • • • • • • • • • • • • •

25 yrs

27 5 yrs

27.5 yrs

S/L

S/L

S/L

ММ

ММ

e 15-year property f 20-year property g 25-year property

h Residential rental

property

21	Listed property. Enter amount from line 28	2
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.	Γ
	Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	12

23	For assets shown above and placed in service during the current	year,	ente	er
	the portion of the basis attributable to section 263A costs			

## 4562 Form

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 2013

Attachment Sequence No

Name(s) shown on return PIONEERS INC

Business or activity to which this form relates PIONEERS COMPLEX

Identifying number 61-090938

LT	ONEERS INC		PIONEERS	COMPLEX				61-0909387
Pa			Property Under Se					
	Note: If you have	e any listed pr	operty, complete Pa	art V before ye	ou complete	e Part I.		
1	Maximum amount (see instru	uctions)					1	500,000.
2	Total cost of section 179 pro-	perty placed in	service (see instruction	ons)			2	
3	Threshold cost of section 179	9 property before	re reduction in limitati	on (see instruc	tions)		3	2,000,000.
4	Reduction in limitation. Subt	tract line 3 from	line 2. If zero or less	s, enter -0			4	
5	Dollar limitation for tax year.	Subtract line 4	from line 1. If zero o	r less, enter -0-	. If married .			
	filing separately, see instruct	ions	<u> </u>		<u> </u>		5	
6	(a) Description of pro	perty	(b) Cost (bus	ness use only)	(c) Elec	cted cost		
7	Listed property. Enter the ar	mount from line	29		7	_		
	Total elected cost of section						8	
9	Tentative deduction. Enter t	he <b>smaller</b> of li	ne 5 or line 8				9	
10	Carryover of disallowed ded	uction from line	13 of your 2012 Forn	n <b>4562</b>			10	
11	Business income limitation. Ent	er the smaller of	business income (not le	ss than zero) or l	ine 5 (see inst	tructions)	11	
12	Section 179 expense deduct	tion. Add lines	9 and 10, but do not e	enter more thar	line 11		12	
13	Carryover of disallowed deduction	on to 2014 Add	ines 9 and 10, less line	12▶ 1	3			
	te: Do not use Part II or Pa	rt III below for li	sted property. Instea	d, use Part V.				
Pa	Int II Special Depreciation	Allowance and	Other Depreciation (D	o not include lis	ted property.)	(See instr	uctio	ons)
14	Special depreciation allowar	ice for qualified	property (other than I	isted property)	placed in se	rvice		
	during the tax year (see instr	ructions)					14	
15	Property subject to section 1	68(f)(1) election	1				15	
16	Other depreciation (including	ACRS)	<u> </u>	<u></u>	<u> </u>		16	
Pa	Int III MACRS Deprecia	ation (Do not	include listed prop	erty.) (See ins	structions.)			
			Section	n A				
	MACRS deductions for asse	-	_	_	013		17	9,999.
18	If you are electing to group a	iny assets place	ed in service during th	ne tax year		_		
	into one or more general ass				<u> </u>		<u> </u>	
	Section B-Asset		rvice During 2013 Ta	x Year Using	the General	Depreci	atio	n System
(6	a) Classification of property	(b) Month and year placed in service	(c) Basis for depr (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Meth	od	(g) Depreciation deduction
19 a	a 3-year property							
_ b	5-year property							
	7-year property							
	d 10-year property							
e	15-year property							
1	f 20-year property	]						
	g 25-year property			25 yrs		S/L		
h	n Residential rental			27 5 yrs	MM	S/L		
_	property			27.5 yrs	MM	S/L		
	i Nonresidential real			39 yrs.	MM	S/L		
	property				MM	S/L		
	Section C-Assets	Placed in Serv	rice During 2013 Tax	Year Using th	ne Alternativ	ve Depre	ciat	ion System
<b>20</b> a	a Class life					S/L		
t	o 12-year			12 yrs		S/L		
	c 40-year			40 yrs	MM	S/L		
Pa	art IV Summary (See i	nstructions.)						
21	Listed property. Enter amo	ount from line 2	8				21	
22	Total. Add amounts from I	ine 12, lines 14	through 17, lines 19	and 20 in colun	nn (g), and li	ne 21.		
	Enter here and on the approp						22	9,999.
23	For assets shown above a						•	
	the portion of the basis attr	ributable to sect	tion 263A costs	<u> </u>	23			
_								<del></del>

## **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 2013

Attachment Sequence No

179

Name(s) shown on return PIONEERS INC

Business or activity to which this form relates
PIONEERS INC 908 N MAIN ST

Identifying number 61-0909387

_	-		Property Under Se					
			operty, complete Pa	art V before y	ou complete	e Part I.		F 0 0 0 0 0
	Maximum amount (see instr						1	500,000.
	Total cost of section 179 pro			•			2	
	Threshold cost of section 17			•	•		3	2,000,000.
	Reduction in limitation. Sub						4	
5	Dollar limitation for tax year.	Subtract line 4	from line 1. If zero or	r less, enter -0	If married .			
	filing separately, see instruc	tions	· · · · · · · · · · · · · · · · · · ·	<u> </u>		<u> </u>	5	
6	(a) Description of pro	perty	(b) Cost (busi	ness use only)	(c) Elec	ted cost		
	<del></del>	<del>.</del>						'
	Listed property. Enter the a				7	<del></del>		
8	Total elected cost of section	179 property. A	Add amounts in colun	nn (c), lines 6 a	and 7		8	
	Tentative deduction. Enter						9	
10	Carryover of disallowed ded	luction from line	13 of your 2012 Form	14562			10	
	Business income limitation En			•	•		11	
	Section 179 expense deduc						12	
	Carryover of disallowed deduct	<del> </del>			3			·~
	te: Do not use Part II or Pa	_ <del></del>	<del></del>	<del> </del>				
		<del> </del>	Other Depreciation (D	<del></del>		<del></del>	uctio	ons )
14	Special depreciation allowa	nce for qualified	property (other than I	isted property)	placed in se	rvice		
	during the tax year (see inst	ructions)					14	
	Property subject to section 1						15	
16	Other depreciation (includin						16	
Pa	rt III MACRS Depreci	ation (Do not	include listed prope	erty.) (See ins	structions.)			
			Section	n A				
17	MACRS deductions for asse	ets placed in ser	vice in tax years begi	nning before 2	013		17	1,667.
18	If you are electing to group a							
		•	ed in service during th	e tax year				
	into one or more general as	set accounts, ch	neck here	<u> </u>		<b>&gt;</b>		
	into one or more general as	set accounts, ch	neck here	<u> </u>		▶ ☐ Deprecia	atio	n System
	into one or more general as	set accounts, ch	neck here	<u> </u>		Deprecial (f) Method		n System  (g) Depreciation deduction
	into one or more general ass Section B-Asset a) Classification of property	set accounts, ch s Placed in Ser (b) Month and year placed in	rvice During 2013 Ta  (c) Basis for depr (business/investment use	x Year Using (d) Recovery	the General			(g) Depreciation
19 8	into one or more general ass Section B-Asset a) Classification of property	set accounts, ch s Placed in Ser (b) Month and year placed in	rvice During 2013 Ta  (c) Basis for depr (business/investment use	x Year Using (d) Recovery	the General			(g) Depreciation
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19 a	into one or more general as:  Section B-Asset  a) Classification of property  a 3-year property  5-year property  7-year property  10-year property  15-year property  20-year property  25-year property	set accounts, ch s Placed in Ser (b) Month and year placed in	rvice During 2013 Ta  (c) Basis for depr (business/investment use	x Year Using (d) Recovery	the General			(g) Depreciation
19 a	Section B-Asset a) Classification of property a 3-year property 5-year property 7-year property 10-year property 115-year property 120-year property 120-year property 130-year property 140-year property 150-year property	set accounts, ch s Placed in Ser (b) Month and year placed in	rvice During 2013 Ta  (c) Basis for depr (business/investment use	x Year Using (d) Recovery penod	the General	(f) Method		(g) Depreciation
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19 a b c c c c c c c c c c c c c c c c c c	into one or more general as:  Section B-Asset  a) Classification of property  a 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  n Residential rental property  i Nonresidential real property  Section C-Assets	set accounts, ches Placed in Ser  (b) Month and year placed in service	reck here rvice During 2013 Ta (c) Basis for depr (business/investment use only - see instructions)	x Year Using (d) Recovery period  25 yrs 27 5 yrs 27.5 yrs 39 yrs	(e) Convention  MM MM MM MM	S/L S/L S/L S/L S/L	od	(g) Depreciation deduction
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19 & t	into one or more general as:  Section B-Asset  a) Classification of property  a 3-year property  b 5-year property  c 7-year property  d 10-year property  f 20-year property  g 25-year property  h Residential rental property  i Nonresidential real property  Section C-Assets  a Class life  b 12-year	set accounts, ches Placed in Ser (b) Month and year placed in service	reck here rvice During 2013 Ta (c) Basis for depr (business/investment use only - see instructions)	x Year Using (d) Recovery penod  25 yrs 27 5 yrs 27.5 yrs 39 yrs  Year Using to	MM MM MM MM MM MM MM MM MM MM MM MM MM	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	od	(g) Depreciation deduction
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20 a	into one or more general as:  Section B-Asset  a) Classification of property  a 3-year property  b 5-year property  c 7-year property  d 10-year property  f 20-year property  f 20-year property  g 25-year property  h Residential rental property  i Nonresidential real property  Section C-Assets  a Class life  b 12-year  c 40-year  art IV Summary (See	set accounts, ches Placed in Ser  (b) Month and year placed in service  Placed in Service  Placed in Service  instructions.)	rvice During 2013 Ta  (c) Basis for depr (business/investment use only - see instructions)  rice During 2013 Tax	25 yrs 27 5 yrs 27.5 yrs 39 yrs Year Using to the state of the state o	MM MM MM MM MM MM MM MM MM MM MM MM MM	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	ciat	(g) Depreciation deduction
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Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization** (Including Information on Listed Property)

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

OMB No 1545-0172

Attachment

179 Sequence No

Name(s) shown on return Business or activity to which this form relates Identifying number

PI	ONEERS INC		904 IMPR	OVEMENTS	PAVING			61-0909387
Pa	rt   Election To Exp	ense Certain	<b>Property Under Se</b>	ection 179				
	Note: If you have	e any listed pr	operty, complete Pa	art V before y	ou complete	Part I.		
1 1	Maximum amount (see instr	ructions)					1	500,000.
2	Total cost of section 179 pro	operty placed in	service (see instruction	ons)			2	
3	Threshold cost of section 17	79 property befo	re reduction in limitati	on (see instruc	ctions)		3	2,000,000.
4	Reduction in limitation. Sub	otract line 3 from	line 2. If zero or less	s, enter -0			4	
5 [	Dollar limitation for tax year	. Subtract line 4	from line 1 If zero o	r less, enter -0	lf married.			
f	filing separately, see instruc	tions		. <b></b>			5	
6	(a) Description of pro			iness use only)	(c) Elec	ted cost		
								Ì
								}
7 l	Listed property. Enter the a	amount from line	29		7			
	Total elected cost of section						8	
9 7	Tentative deduction Enter	the <b>smaller</b> of li	ne 5 or line 8				9	
10 (	Carryover of disallowed dec	duction from line	13 of your 2012 Form	n <b>4562</b>			10	
11 E	Business income limitation En	nter the smaller of	business income (not le	ss than zero) or	line 5 (see inst	ructions)	11	
12 3	Section 179 expense deduc	ction. Add lines	9 and 10, but do not e	enter more tha	n line 11		12	
	Carryover of disallowed deduct				3			
	e: Do not use Part II or Pa							
	<del></del>		Other Depreciation (D			·	uctio	ns)
	Special depreciation allowa	•			•			
	during the tax year (see inst	•				,	14	· · · · · · · · · · · · · · · · · · ·
	Property subject to section						15	
	Other depreciation (includin						16	
Pai	rt III MACRS Deprec	iation (Do not	include listed prop	<del></del>	structions.)			
			Section				· · · · ·	
	MACRS deductions for asse		-		013		17	3,251.
18 I	f you are electing to group	any assets place	ed in service during th		013		17	3,251.
18 I	f you are electing to group and one or more general as	any assets place set accounts, ch	ed in service during the	e tax year		▶ 🗆		
18 I	f you are electing to group and one or more general as	any assets place set accounts, ch ts Placed in Se	ed in service during the eck here rvice During 2013 Ta	e tax year	the General	▶ 🗆		n System
18 I	f you are electing to group and one or more general as	any assets place set accounts, ch	ed in service during the	e tax year		▶ 🗆	atio	
18 l	f you are electing to group nto one or more general as Section B-Asset	any assets place set accounts, ch ts Placed in Ser (b) Month and year placed in	ed in service during the leck here  vice During 2013 Ta  (c) Basis for depr (business/investment use	ax Year Using	the General	▶ ☐ Deprecia	atio	n System (g) Depreciation
18 l	f you are electing to group anto one or more general as  Section B-Asset  Classification of property  3-year property	any assets place set accounts, ch ts Placed in Ser (b) Month and year placed in	ed in service during the leck here  vice During 2013 Ta  (c) Basis for depr (business/investment use	ax Year Using	the General	▶ ☐ Deprecia	atio	n System (g) Depreciation
18 l i (a	f you are electing to group anto one or more general as  Section B-Asset  Classification of property  3-year property  5-year property	any assets place set accounts, ch ts Placed in Ser (b) Month and year placed in	ed in service during the leck here  vice During 2013 Ta  (c) Basis for depr (business/investment use	ax Year Using	the General	▶ ☐ Deprecia	atio	n System (g) Depreciation
18 I (a) 19 a	If you are electing to group anto one or more general as  Section B-Asset  Classification of property  3-year property  5-year property  7-year property  10-year property	any assets place set accounts, ch ts Placed in Ser (b) Month and year placed in	ed in service during the leck here  vice During 2013 Ta  (c) Basis for depr (business/investment use	ax Year Using	the General	▶ ☐ Deprecia	atio	n System (g) Depreciation
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18 I	If you are electing to group anto one or more general as  Section B-Asset  Classification of property  3-year property  5-year property  7-year property  10-year property	any assets place set accounts, ch ts Placed in Ser (b) Month and year placed in	ed in service during the leck here  vice During 2013 Ta  (c) Basis for depr (business/investment use	ax Year Using	the General	▶ ☐ Deprecia	atio	n System (g) Depreciation
18 I (a 19 a b c d e f	If you are electing to group anto one or more general as Section B-Asset  Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property  20-year property  25-year property	any assets place set accounts, ch ts Placed in Ser (b) Month and year placed in	ed in service during the leck here  vice During 2013 Ta  (c) Basis for depr (business/investment use	ax Year Using	the General	▶ ☐ Deprecia	atio	n System (g) Depreciation
18 I (a 19 a b c d e f	If you are electing to group anto one or more general as  Section B-Asset  Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property  20-year property	any assets place set accounts, ch ts Placed in Ser (b) Month and year placed in	ed in service during the leck here  vice During 2013 Ta  (c) Basis for depr (business/investment use	x Year Using (d) Recovery	the General	Deprecia (f) Metho	atio	n System (g) Depreciation
18 I i (a 19a b c d e f g h	If you are electing to group anto one or more general as  Section B-Asset  Classification of property  3-year property  5-year property  10-year property  15-year property  20-year property  Residential rental property	any assets place set accounts, ch ts Placed in Ser (b) Month and year placed in	ed in service during the leck here  vice During 2013 Ta  (c) Basis for depr (business/investment use	x Year Using (d) Recovery penod	the General (e) Convention	Deprecia (f) Metho	atio	n System (g) Depreciation
18 I i (a 19a b c d e f g h	If you are electing to group anto one or more general as  Section B-Asset  Classification of property  3-year property  5-year property  10-year property  15-year property  20-year property  25-year property  Residential rental	any assets place set accounts, ch ts Placed in Ser (b) Month and year placed in	ed in service during the leck here  vice During 2013 Ta  (c) Basis for depr (business/investment use	te tax year  ix Year Using  (d) Recovery penod  25 yrs  27 5 yrs.	the General (e) Convention	Deprecia (f) Method  S/L  S/L	atio	n System (g) Depreciation
18 I i (a 19a b c d e f g h	If you are electing to group anto one or more general as Section B-Asset  Classification of property  3-year property  5-year property  10-year property  15-year property  20-year property  25-year property  Residential rental property  Nonresidential real property	any assets place set accounts, ch ts Placed in Ser (b) Month and year placed in service	ed in service during the seck here revice During 2013 Tage (c) Basis for depr (business/investment use only - see instructions)	25 yrs 27 5 yrs 27 5 yrs 39 yrs	the General (e) Convention  MM MM MM MM	Deprecia (f) Method  S/L  S/L  S/L  S/L  S/L	atio	n System  (g) Depreciation deduction
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18 I i i (a 19a b c c d d e f g h c c c c d b c c c c c c c c c c c c c c	If you are electing to group into one or more general as Section B-Asset  Classification of property  3-year property  5-year property  10-year property  15-year property  20-year property  25-year property  Residential rental property  Nonresidential real property  Section C-Assets  Class life  12-year  40-year  TIV Summary (See	any assets place set accounts, che set accounts,	ed in service during the seck here rvice During 2013 Ta  (c) Basis for depr (business/investment use only - see instructions)	25 yrs 27 5 yrs 27 5 yrs 39 yrs  Year Using to	the General (e) Convention  MM MM MM MM MM MM MM MM MM MM MM MM M	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	atio	n System  (g) Depreciation deduction
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18 I i i (a 19 a b c d e f g h c c Par 21	If you are electing to group into one or more general as Section B-Asset  Classification of property  3-year property  5-year property  10-year property  20-year property  25-year property Residential rental property  Nonresidential real property  Section C-Assets  Class life  12-year  40-year  Total. Add amounts from Enter here and on the approperty	any assets place set accounts, che ts Placed in Set (b) Month and year placed in service  Placed in Service  instructions.)  nount from line 2 line 12, lines 14 priate lines of your	ed in service during the seck here  rvice During 2013 Ta  (c) Basis for depr (business/investment use only - see instructions)  rice During 2013 Tax  8	25 yrs 27 5 yrs 27 5 yrs 39 yrs 40 yrs and 20 in colur d S corporations	the General (e) Convention  MM MM MM MM MM MM MM MM MM MM MM MM M	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	atio od	n System  (g) Depreciation deduction
18 I i i (a 19 a b c d e f g h c c Par 21	If you are electing to group into one or more general as Section B-Asset  Classification of property  3-year property  5-year property  10-year property  20-year property  25-year property Residential rental property  Nonresidential real property  Section C-Assets  Class life  12-year  40-year  Total. Add amounts from	any assets place set accounts, che ts Placed in Set (b) Month and year placed in service  Placed in Service  instructions.)  nount from line 2 line 12, lines 14 priate lines of your and placed in se	ed in service during the neck here  rvice During 2013 Ta  (c) Basis for depr (business/investment use only - see instructions)  rice During 2013 Tax  through 17, lines 19 areturn. Partnerships an rvice during the curre	25 yrs 27 5 yrs 27 5 yrs 39 yrs 40 yrs and 20 in colur d S corporations	the General (e) Convention  MM MM MM MM MM MM MM MM MM MM MM MM M	S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L	atio	n System  (g) Depreciation deduction

Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization** (Including Information on Listed Property)

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

OMB No 1545-0172

Attachment

179 Sequence No

Business or activity to which this form relates Name(s) shown on return

Identifying number

ΡI	ONEERS INC		WALK IN	FREEZER				61-0909387	
P	art I Election To Exp	ense Certain l	Property Under Se	ection 179					
	Note: If you hav	e any listed pro	operty, complete Pa	art V before y	ou complete	e Part I.			
1	Maximum amount (see instr	uctions)					1	500,000.	
2	Total cost of section 179 pro	perty placed in	service (see instruction	ons)			2		
3	Threshold cost of section 17	9 property befor	e reduction in limitati	on (see instruc	tions)		3	2,000,000.	
4	Reduction in limitation. Sub	tract 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 o	r less, enter -0	If marned .				
	filing separately, see instruc	tions			<u></u>		5		
6	(a) Description of pro	perty	(b) Cost (busi	ness use only)	(c) Elec	ted cost			
								1	
								į t	
7	Listed property. Enter the a	mount from line	29		7				
8	Total elected cost of section	179 property. A	Add amounts in colun	nn (c), lines 6 a	and 7		8		
	Tentative deduction. Enter t						9		
10	Carryover of disallowed ded	uction from line	13 of your 2012 Forn	า 4562			10		
	Business income limitation En						11		
	Section 179 expense deduc						12		
	Carryover of disallowed deducti		<del></del>		3				
	te: Do not use Part II or Pa	<del></del>	<del></del>	<del></del>					
		<del></del>	Other Depreciation (D				uctio	ons )	
14	Special depreciation allowar	•			•				
	during the tax year (see inst						14		
	Property subject to section 1						15		
16	6 Other depreciation (including ACRS)								
P	Part III MACRS Depreciation (Do not include listed property.) (See instructions.)								
	····		Section	<del> </del>			·		
	MACRS deductions for asse	-		•	013		17	938.	
18	If you are electing to group a					. $\Box$		ı	
	into one or more general ass						<u> </u>		
	Section B-Asset	(b) Month and	vice During 2013 Ta		the General	Deprecia	atio		
	(a) Classification of property	year placed in service	(c) Basis for depr (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Metho	od	(g) Depreciation deduction	
<u> 19</u>	a 3-year property	_							
	b 5-year property	<u> </u>	···						
	c 7-year property	_							
	d 10-year property	_							
	e 15-year property	_							
	f 20-year property	-{							
	g 25-year property	ļ. <b>-</b>	-	25 yrs		S/L			
1	h Residential rental			27 5 yrs	MM	S/L			
	property	ļ		27 5 yrs.	ММ	S/L			
	i Nonresidential real			39 yrs	MM	S/L			
	property			<u> </u>	MM	S/L			
		Placed in Serv	ice During 2013 Tax	Year Using th	ne Alternativ		ciat	ion System	
_	a Class life					S/L			
	b 12-year			12 yrs.		S/L			
	c 40-year	inetrusticae \		40 yrs	MM	S/L			
	art IV Summary (See								
21	Listed property Enter am						21		
22	Total. Add amounts from I							020	
22	Enter here and on the approp			•	- see instructi	ons	22	938.	
23	For assets shown above a the portion of the basis att	*	•	nt year, enter					
		iivuladie to sect	IUII ZOJA COSTS		23			ļ	

Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization** (Including Information on Listed Property)

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

OMB No 1545-0172

Attachment

179 Sequence No

Name(s) shown on return

Business or activity to which this form relates

Identifying number

PΙ	ONEERS INC		CATERING	;				61-0909387
P	art I Election To Expe	ense Certain	Property Under Se	ection 179				
	Note: If you have	e any listed pre	operty, complete Pa	art V before yo	ou complete	e Part I.		
1	Maximum amount (see instru	ctions)					1	500,000.
2	Total cost of section 179 proj	perty placed in:	service (see instruction	ons)		[	2	
3	Threshold cost of section 179	property before	re reduction in limitati	on (see instruc	tions)	[	3	2,000,000.
4	Reduction in limitation Subt	ract line 3 from	line 2. If zero or less	s, enter -0		[	4	
5	Dollar limitation for tax year.	Subtract line 4	from line 1. If zero o	r less, enter -0-	. If married .	[		
	filing separately, see instructi	ions					5	
6	(a) Description of proj			iness use only)		ted cost		
7	Listed property. Enter the an	nount from line	29		7	<del> </del>		1
8	Total elected cost of section	179 property. /	Add amounts in colun	nn (c), lines 6 a	nd 7		8	
9	Tentative deduction Enter the	ne <b>smaller</b> of li	ne 5 or line 8			[	9	
10	Carryover of disallowed dedu	action from line	13 of your 2012 Form	n <b>4562</b>		[	10	
11	Business income limitation Enter	er the smaller of I	business income (not le	ss than zero) or l	ine 5 (see inst	ructions)	11	
12	Section 179 expense deduct	ion. Add lines	9 and 10, but do not e	enter more than	line 11		12	
13	Carryover of disallowed deduction	on to 2014 Add I	ines 9 and 10, less line	12 ▶ 1	3			
	te: Do not use Part II or Par	t III below for li	sted property. Instea	d, use Part V.				
Pa	art II Special Depreciation	Allowance and	Other Depreciation (D	o not include lis	ted property)	(See instru	ectic	ons )
14	Special depreciation allowan	-			•	rvice		
	during the tax year (see instr	uctions)				[	14	
	Property subject to section 1					[	15	
	Other depreciation (including					]	16	
Pa	art III MACRS Deprecia	tion (Do not	include listed prop	erty.) (See ins	tructions.)			
	· · · · · · · · · · · · · · · · · · ·		Section					
17	7 MACRS deductions for assets placed in service in tax years beginning before 2013							
18	If you are electing to group a	•	_	-		_		
	into one or more general ass							
	Section B-Assets		rvice During 2013 Ta	x Year Using	the General	Deprecia	atio	n System
(	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Metho	d	(g) Depreciation deduction
19	a 3-year property	]						
1	b 5-year property							
	c 7-year property		<del></del>					
	d 10-year property							
	e 15-year property							
	f 20-year property	]	· - · · · · · · · · - <del>- · · · · · · · ·</del>					
9	g 25-year property			25 yrs		S/L		
1	h Residential rental			27 5 yrs	ММ	S/L		
	property			27.5 yrs	MM	S/L		
	i Nonresidential real			39 yrs	MM	S/L		
	property	<u>l </u>		<u></u>	MM	S/L		
_		Placed in Serv	ice During 2013 Tax	Year Using th	e Alternativ		iat	ion System
	a Class life	]				S/L		
$\overline{}$	b 12-year			12 yrs		S/L		
	c 40-year	<u> </u>		40 yrs	MM	S/L		
	art IV Summary (See in	<del></del>						
21							21	
22								
	Enter here and on the appropr	iate lines of your	return Partnerships ar	d S corporations	- see instructi	ons	22	5,626.
23	For assets shown above an the portion of the basis attri		_					1

Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization** (Including Information on Listed Property)

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

OMB No 1545-0172

Attachment

179 Sequence No

Business or activity to which this form relates Identifying number Name(s) shown on return PIONEERS INC FURNITURE AND FIXTURES 61-0909387 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 500,000. 1 Maximum amount (see instructions) 

2 Total cost of section 179 property placed in service (see instructions) 2 2,000,000. 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . . . 3 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 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property. Enter the amount from line 29 . . . 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7. . . . 10 Carryover of disallowed deduction from line 13 of your 2012 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.......

13 Carryover of disallowed deduction to 2014 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

MACRS Depreciation (Do not include listed property.) (See instructions.)

### Section A

3,036. 17 MACRS deductions for assets placed in service in tax years beginning before 2013 . . .

18 If you are electing to group any assets placed in service during the tax year

	Section B-Ass	ets Placed in Se	rvice During 2013 Ta	ax Year Using	the General	Depreciation	System
(a)	Classification of property	(b) Month and year placed in service	(c) Basis for depr (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a	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-year property			25 yrs		S/L	
h	Residential rental			27 5 yrs	MM	S/L	
	property			27.5 yrs	MM	S/L	
i	Nonresidential real			39 yrs	MM	S/L	
	property				MM	S/L	
	Section C-Asse	ts Placed in Serv	ice During 2013 Tax	Year Using t	he Alternativ	e Depreciation	on System
20 a	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	3,036.
22	For assets shown above and placed in service during the current year, enter		

the portion of the basis attributable to section 263A costs

Description	Date Acqd	Cost	Bus. 179+ Use Spec	• 1	Basis	Basis Method	Rec. Per.	C C	Rec. Prior Per. Cv Depr.	Current Depr.	Next Year	Prior AMT	Next Prior Current Gain/ Year AMT AMT Price	Gain/ Price	Sales	Date Sold
Form: 2002 FORD VAN Rental Property: N/A Depreciation Class: N/A In Service Year: 2002 2002 FORD VA 10/02 1900 STATE INFO: 1900	NED VAN SETY: N, OR Class V Year: 10/02 INFO:	/A s: N/A 2002 19000 19000	100		19000 SL 19000 SL	SL	5.0 HY 5.0 HY	НУ	13300			19000				
Form Totals:		19000			19000				13300			19000				
	,															

Form: 902 N MAIN
Rental Property: N/A
Depreciation Class: N/A
In Service Year: 1997

54750 54750 1 1 1 10.0 HY 54750 SL 54750 1 65000 100 65000 In Service Year: 1997 902 N MAIN S 01/97 6500 Form Totals:

38319

38319

orm locals: 65000 5475

Form: 904 IMPROVEMENTS PAVING

Rental Property: N/A Depreciation Class: Land improvements

3251 3251 9917 9917 15.0 HY 55000 MACRS 55000 55000 100 55000 11111 In Service Year: 2005 904A N MAIN 06/05 5500 Form Totals:

2235 ----2235

7647 ----7647

3245 ----3245

Form: CATERING

Date Sold

REPORT	
DETAIL	
ASSET	
2013	

	Date		Bus.	Bus. 179+			Rec.		Prior	Current	Next	Prior	Current	Gain/	Sales
Description	Acqd	Acqd Cost	Use	Use Spec.	Basis	Method	Per.	C	Depr.	Basis Method Per. Cv Depr. Depr.		AMT	AMT	Price	Price
1 1 1 1 1 1 1	! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !	1 1 1	1 1 1	1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1	1	1	! ! !		 	1 1 1	; ; ; ;	           
•															
Rental Property: N/A	erty: N	4/A													
Depreciation Class: Machinery and equipment other	on Clas	s: Mach	inery	and eq	uipment	other									
In Service Year: 2009	Year:	2009													

7718

29239

5620

5626

34317

7.0 HY

63000 MACRS

65000 100

CATERING EQU 01/09

63000

65000

Form Totals:

7718

29239

5620

5626

34317

11111

1111

1111

1 1

1

4165

4165

1111

FORM: FURNITURE AND FIXTURES

Rental Property: N/A

Depreciation Class: Furniture and fixtures nonrental

Form: PIONEERS COMPLEX

Rental Property: N/A

Depreciation Class: Real property nonresidential

10002 6666 | | | | 129992 30.0 HY 300000 SL 350000 100 In Service Year: 2000 COMPLEX 904A 01/00

300000

350000

Form Totals:

6666

109992

6666

109992

10002

6666

129992

Form: PIONEERS INC 908 N MAIN ST

Rental Property: N/A

Depreciation Class: N/A

REPORT	
DETAIL	
ASSET	
2013	

Next Prior Current Gain/ Sales Date Year AMT AMT Price Price Sold	1667 15003 1667  1667 15003 1667	937 4873 1286
Current Depr.	1667  1667	938
Prior (Depr.	15003	5718
Rec. Per. Cv	27.0 HY	7.0 HY
Method	MACRS	<b>other</b> MACRS
Basis	45000 MACRS  45000	quipment other
Bus. 179+ Use Spec.		y and e
1	52000 100  52000 52000	Machinery 009
Date Acqd Cost	52000 52000  52000	ZER 4/A 38: Ma 2009
Date Acqd	<b>e Year:</b> 06/03	N FREEZ erty: N on Clas e Year:
Description	In Service Year: 2003 908 N MAIN S 06/03 5200 Form Totals: 5200	Form: WALK IN FREEZER  Rental Property: N/A  Depreciation Class: Machinery and equipment othe  In Service Year: 2009  WALK IN FREE 12/09 10500 100

Form 8868 (	Rev 1-2014)					Page 2
<ul><li>If you ar</li></ul>	e filing for an Additional (Not Automatic) 3-Mont	h Extension	, complete only Part II and che	ck this box		▶ [X
Note. Only	complete Part II if you have already been granted	an automatic	3-month extension on a previou	isly filed Form 886	8.	
<ul><li>If you ar</li></ul>	e filing for an Automatic 3-Month Extension, cor	nplete only	Part I (on page 1).			
Part II	Additional (Not Automatic) 3-Month	Extension	of Time. Only file the	original (no cop	ies needed	<u>)</u> .
			Enter f	ler's identifying r	umber, see ii	nstructions
Type or print	Name of exempt organization or other filer, see PIONEERS INC	instructions.		Employer identi		r (EIN) or
File by the due date for	Number, street, and room or suite no If a P O. 904A NORTH MAIN ST PO BO		ructions	Social security r	number (SSN)	
filing your return See instructions	City, town or post office, state, and ZIP code FHOPKINSVILLE KY 42241-08		address, see instructions	•		
Enter the Be	eturn code for the return that this application is for	(file a capara	to application for each return)			
Litter the IXe	eturn code for the return that this application is for	(ille a separa	te application for each return) .			·····
Application	1	Return	Application			Return
Is For		Code	is For			Code
Form 990 or	Form 990-EZ	01				
Form 990-B	L	02	Form 1041-A			08
Form 4720 (	(individual)	03	Form 4720 (other than individ	ual)		09
Form 990-P	F	04	Form 5227			10
Form 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069			11
	(trust other than above)	06	Form 8870	·		12
	not complete Part II if you were not already gra		matic 3-month extension on a	previously filed	Form 8868.	
	oks are in the care of WENDELL LYNCH					
•		ax No ▶ _		<del></del>		F
	ganization does not have an office or place of busi					▶ ∐
	for a Group Return, enter the organization's four of		· · · · · · · · · · · · · · · · · · ·	<del></del>	s is for the who	• • •
	ox ▶ . If it is for part of the group, check this b	ox 🕨 📗 a	nd attach a list with the names a		bers the exter	nsion is for
	at an additional 3-month extension of time until		<del> </del>	15 ,20 <u>14</u>		
	endar year $2013$ , or other tax year beginning		, 20, and end		, 20	)
_	x year entered in line 5 is for less than 12 months, inge in accounting period			inal return		
	detail why you need the extension COMPUTE THIS TIME	ER ERRC	RS WITH THE SOFT	WARE UNA	BLE TO R	ESOLVE
8a If this a	pplication is for Form 990-BL, 990-PF, 990-T, 4720	0, or 6069, er	nter the tentative tax, less any no	onrefundable		
	See instructions.		•		8a \$	
b If this a	oplication is for Form 990-PF, 990-T, 4720, or 606	9, enter any i	refundable credits and estimated	tax payments		
made I	nclude any prior year overpayment allowed as a cr	redit and any	amount paid previously with Foi	m 8868	8b \$	
c Balance	e due. Subtract line 8b from line 8a Include your	payment with	this form, if required,			
by using	EFTPS (Electronic Federal Tax Payment System	) See instru	ctions		8c \$	
			st be completed for Part	Il only.	<del></del>	
•	Ities of perjury, I declare that I have examined this t is true, correct, and complete, and that I am auth	form, includi	ng accompanying schedules and	•	to the best of n	ny knowledge
and Dellei, I	t is trac, context, and complete, and that I am auth	Siesa to pie	pare une tenti.			
Signature ▶		Title	• ▶PRESIDENT	Date	▶08/15/	2014
BCA				F	om <b>8868</b> (R	ev 1-2014)