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# Form **990**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	For th	ne 2013 calen	dar year, or tax year beginning $4/01$ , 2013, and ending	3/3			, 2014
В	Check	if applicable	C		D Employ	er Ident	ification Number
	Ac	ddress change	NATIONAL SHOOTING SPORTS FOUNDATION INC.		06-0	0860	132
	$\vdash$	ame change	11 MILE HILL ROAD	ŀ	E Telepho		
	$\vdash$	itial return	NEWTOWN, CT 06470				26-1320
	$\vdash$		,	ŀ	(20.	3) 4	26-1320
	$\mathbf{H}$	erminated		1	_		<b>A</b>
		mended return		لـــــــــــــــــــــــــــــــــــــ	G Gross re	•	
	L Ap	oplication pending	The state of the s		a group retur		ш ш
			Same As C Above	(b) Are all : If 'No.' a	subordinates attach a list	include (see ins	d? Yes No
ī	Tax-	exempt status	501(c)(3) X 501(c) (6 )    (insert no.) 4947(a)(1) or 527			<b>,</b>	<b>-</b>
J	We	bsite: ► NS	SSF.ORG H	(c) Group e	exemption nu	ımber 🎙	•
ĸ	Form	n of organization:		: 1969	) Ms	tate of	legal domicile: CT
Pa	art I	Summai					<del></del>
	1	Briefly descr	be the organization's mission or most significant activities: NSSF'S PU	RPOSE	OT 2T	PRO	MOTE THE
	'	SHOOTING	S SPORTS & FOSTER A BETTER UNDERSTANDING OF REC	REATT	ONAT. S	2HUU,	TING. NSSF
Governance			OR THE GENERAL WELFARE OF HUNTING, TARGET SHOOTI				
ם	1		ANDING OF PROPER & CORRECT SPORTING FIREARMS HAN			<u> </u>	<u> </u>
Ver	2		ox I if the organization discontinued its operations or disposed of more			net as	
Ĝ	3		oting members of the governing body (Part VI, line 1a)			3	72
∘ಶ	4		ndependent voting members of the governing body (Part VI, line 1b)			4	72
ies	5		r of individuals employed in calendar year 2013 (Part V, line 2a)			5	56
Activities &	6	Total numbe	r of volunteers (estimate if necessary)			6	0
Ş	7 a	Total unrelat	ed business revenue from Part VIII, column (C), line 12			7 a	41,295.
	b	Net unrelate	d business taxable income from Form 990-T, line 34			7 b	9,945.
				Р	rior Year		Current Year
	8	Contribution	s and grants (Part VIII, line 1h)		105,6	33.	
Revenue	9		vice revenue (Part VIII line 2g)	27	, 336, 6		29,523,003.
e e	10	Investment i	ncome (Part VIII A Mine) (A), lines 3, 4, and 7d).		784,5		4,734,865.
£ 2	11	Other reveni	ue (Part VIII, column, (A), lines 6, 6d, 8c, 9c, 10c, and 11e)		63,0		87,933.
5	12	Total revenu	e – adt lines 8 through 11 (nius lequal Part VIII, column (A), line 12)	28	3,289,9		34,345,801.
<u>}_</u>	13		similar amounts paid (Rart IX, column (A), lines 1-3)		,456,2		1,320,500.
-	14	Renefits na	d to or for members (Part IX, column (A), line 4)		.,, .		2,020,000.
	15	Salarias at	er compensation, employee benefits (Part IX, column (A), lines 5-10)	-	, 823, 6	65	6,918,356.
တ္	15			<u></u>	, 023,	,05.	0, 910, 330.
Š	16a	Professional	fundralsing fees (Part X, column (A), line 11e)	77	F 2 8 . C		
Expenses	. b	Total fundra	Ising expenses (Partix, column (D), line 25)	<b>能</b> * * * *	4430	كُورُونَاكُ إِنَّا مُعَالِّونَاكُ إِنَّالِيَّةِ	1 20 Total
ú	17	Other expen	ses (Part IX, column (A), lines 11a-11d, 11f-24e)	22	,946,3	356.	28,264,691.
	18		ses. Add lines 13-17 (must equal Part IX, column (A), line 25)		,226,3		36,503,547.
	19	•	s expenses. Subtract line 18 from line 12		, 936, 4		-2,157,746.
õ				+	ng of Currer		
g i	20	Total assets	(Part X, line 16)		3,122,0		44,835,173.
Not Assets	21		es (Part X, line 26)		1,595,5		12,037,101.
ž.							
			or fund balances. Subtract line 21 from line 20	38	3,526,4	162.	32,798,072.
	art II		re Block				
Unc	der pena	alties of perjury, I	declare that I have examined this return, including accompanying schedules and statements, and to the parer (other than officer) is based on all information of which preparer has any knowledge.	e best of m	ny knowledge	and be	lief, it is true, correct, and
COII	ipiete L	Declaration of prep	parer (outer than uniter) is based on an information of which preparer has any knowledge.				-nf
		<b>.</b>	1347 TWK		<u> 10-</u>	17.	<u> 14                                    </u>
Si	gn	l' Signa	ture of office	Da	ste		•
He	ere		in smìth	VP,C	FO,Ass	t Tr	:e
_			or print name and title				
		Print/Type	preparer's name Preparer's synchus Date	1.	Check	ıf	PTIN
p.	aid	Scott	S. Mitchell Scotts. M. Ene M. C. 9/23	3/14	self-employ	ed .	P00187126
	repar			<del>/</del>			
U	se O	nly Firm's add		·	Firm's EIN	<b>►</b> 06	5-1089881
-	,		Bethel, CT 06801		Phone no	(20	
NA-	ny the	IDS discuss	this return with the preparer shown above? (see instructions)		·	•	<del></del>
_	-			A0113L 11		1	X Yes No Form 990 (2013)
~ ~ ~	44 PC	ir eacierwork	REQUERON ACTIVOUCE, SEE THE SEDAFATE INSTRUCTIONS. TELA	AULIAL II	100/13	- /	FORM 23U (ZU13)

	990 (2013) NATIONAL SHOOTING SPORTS FOUNDATION INC.	06-0860132	Page 2
Par	tilli Statement of Program Service Accomplishments	·	
	Check if Schedule O contains a response or note to any line in this Part III		[]
1	Briefly describe the organization's mission:		
	NSSF'S PURPOSE IS TO PROMOTE, PROTECT AND PRESERVE HUNTING AND	THE SHOOTING S	PORTS.
			<b>-</b>
2	Did the organization undertake any significant program services during the year which were not listed on the		
	Form 990 or 990-EZ?	Ye	s X No
•	If 'Yes,' describe these new services on Schedule O.	_	_
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	services? Ye	s X No
4	If 'Yes,' describe these changes on Schedule O.  Describe the organization's program service accomplishments for each of its three largest program service.	ervices as measured h	v eynenses
·	Describe the organization's program service accomplishments for each of its three largest program services Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount others, the total expenses, and revenue, if any, for each program service reported.	t of grants and allocation	s to
4 a		(Revenue \$	)
	Safety & Education: The Foundation published and distributed va		
	pamphlets and publications to its members and the general publi	c to educate t	hem on
	the safe use of sporting firearms, various sport shooting event	s, and to prom	ote
	wildlife conservation programs related to the shooting Sports.	The Foundation	n also
	promotes gun safety by distributing gun locks and other gun saf	ety materials.	
		<b></b>	
	<b></b>		
		<del></del>	
Δŀ	(Code: ) (Expenses \$ including grants of \$	(Revenue \$	)
4 5		(Revenue \$	on with
46	Government Relations: NSSF protects the firearms industry thro	ough coordinati	
46	Government Relations: NSSF protects the firearms industry thropolitical, regulatory, and membership organizations. Not only	ough coordinati does NSSF prot	ect the
46	Government Relations: NSSF protects the firearms industry thropolitical, regulatory, and membership organizations. Not only industry's best interests in Washington, D.C. but it also aggre	ough coordinati does NSSF prot	ect the
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	Government Relations: NSSF protects the firearms industry throughout tracks in state capitals throughout the country.  Store Short Show - NSSF held its annual trade show during the year.  Second Short Show - Store Short Show of the shooting, hunting and outdoor trade to showcase	ough coordinati does NSSF protessively guards  (Revenue \$ This event allothers	ect the sagainst
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40	Government Relations: NSSF protects the firearms industry through the political, regulatory, and membership organizations. Not only industry's best interests in Washington, D.C. but it also aggreattacks in state capitals throughout the country.  C(Code: )(Expenses \$ including grants of \$ SHOT Show - NSSF held its annual trade show during the year. The members of the shooting, hunting and outdoor trade to showcase services and share information about the latest developments in the shooting of the shooting of the latest developments in the latest developmen	ough coordinati does NSSF protessively guards  (Revenue \$ This event allothers	ect the sagainst
40	Government Relations: NSSF protects the firearms industry throughout tracks in state capitals throughout the country.  Store Short Show - NSSF held its annual trade show during the year.  Second Short Show - Store Short Show of the shooting, hunting and outdoor trade to showcase	Ough coordination does NSSF protessively guards  O (Revenue \$ This event allowed their products the industry	ect the sagainst

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3	Х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II.	7_		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		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, VII, VIII, IX, or X as applicable.			
i	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
1	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.	11 b		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	11 c		х
(	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	11 d	<b></b>	х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	X	
1	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	11 f	Х	
12:	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete  Schedule D, Parts XI, and XII	12a	Х	
-	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	Х
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		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		Х
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		Х
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		х
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		х
	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
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 t		

Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II ..... Х 21 Х Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Х 23 Х 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .......... 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?....... 24d 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a 25a disqualified person during the year? If 'Yes,' complete Schedule L, Part I...... b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I 25b X 26 Х 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? 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 X 28b Schedule L, Part IV. . . . X 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M. . . . . . X Х 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part L..... 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Х Schedule N, Part II..... 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections X 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1 ....... 34 Х 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?..... 35a X 35b 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI...... 37 37 Х

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38 X Form 990 (2013)

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197

Note. All Form 990 filers are required to complete Schedule O.

Form 990 (2013) NATIONAL SHOOTING SPORTS FOUNDATION INC.	06-0860132	F	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			<u>. L</u>
	1	Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	<u> </u>	3 3 3 3 4	
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		,
c Did the organization comply with backup withholding rules for reportable payments to vendors and reporta (gambling) winnings to prize winners?	able gaming 1	c X	
2 a 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 2 a	56		
b If at least one is reported on line 2a, did the organization file all required federal employment tax	returns? 2	b X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruct	tions)	4	= 5
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3	a X	
b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule 0	3	ьΧ	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other auth financial account in a foreign country (such as a bank account, securities account, or other financial	cial account)? 4		х
b If 'Yes,' enter the name of the foreign country: ►	( = 1, = 1, = 1, = 1, = 1, = 1, = 1, = 1		\$7.0
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Finance			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year	<b> </b>	_	X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra			X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5	С	ļ
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and dissolicit any contributions that were not tax deductible as charitable contributions?	d the organization	a	х
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions on not tax deductible?	or gifts were	b	
7 Organizations that may receive deductible contributions under section 170(c).		3 (A.F.)	
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly services provided to the payor?	for goods and	a	7 12
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		b	1
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was re			1
Form 8282?			
d If 'Yes,' indicate the number of Forms 8282 filed during the year	2929		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal bene			
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit of	1	f	
g If the organization received a contribution of qualified intellectual property, did the organization file Form as required?	8899 7	g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization 1098-C?		h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring organization, have holdings at any time during the year?	rganizations. Did the excess business 8		146
9 Sponsoring organizations maintaining donor advised funds.	2157	<b>影素源</b>	1 12 J 16
a Did the organization make any taxable distributions under section 4966?			
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?	9	b	1
10 Section 501(c)(7) organizations. Enter:	TE STATE OF THE ST	麗洛島	1123
a Initiation fees and capital contributions included on Part VIII, line 12			<u>ال</u> . ک
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10th			# 1
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders			ile :
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>一</b>		
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	rm 1041? 12	2 a	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year . 12t			2 F. C
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> 163</u>		
${f a}$ is the organization licensed to issue qualified health plans in more than one state?			
Note. See the instructions for additional information the organization must report on Schedule O.	14.55 14.55	Part 122.	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.		
c Enter the amount of reserves on hand	c X	#	12:5

14a Did the organization receive any payments for indoor tanning services during the tax year?

14a

14b

Par	Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b bel			or
	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chan Schedule O. See instructions.	ges in	•	
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
		re vita	Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			時間
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2 ·	35.7	学事 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?See.Schedule 0	6	Х	
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? See Schedule 0	7 a	Х	
ŧ	Are any governance decisions of the organization reserved to (or subject to approval by) members,			v
_	stockholders, or other persons other than the governing body?	7 b	in E tag	X <sup>四黑</sup> ·劇
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  See Schedule 0	8 a	X	
	a The governing body?	8 b	^	<u>X</u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
<u></u>	organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		X .
<u> </u>	tion B. Policies (This Section B requests information about policies not required by the internal A		Yes	No
10:	a Did the organization have local chapters, branches, or affiliates?	10 a		X
	o If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b		
11 :	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a		X
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O	經識	强通	[整題]
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Х	
ı	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х	
•	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done. See Schedule O	12 c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	a The organization's CEO, Executive Director, or top management official. See. Schedule . 0	15 a	X	<u> </u>
l	b Other officers of key employees of the organization	15 b	X	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16:	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X X
١	b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Sec	ction C. Disclosure	<u>, , - =  </u>		
17	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) a inspection. Indicate how you make these available. Check all that apply.	vailabl	e for	public
	Own website  Another's website  X Upon request  Other (explain in Schedule 0)	labla ti		
19	the public during the tax year. See Schedule O			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization JOHN SMITH 11 MILE HILL ROAD NEWTOWN CT 06470 (203), 426-1320			

Form <b>990</b> (2013)						_	06-08		Page
Part VIII Com	pensation of Opendent Contra	Officers, D	irectors,	Trustees, Key	Employees,	Highest	Compensated	Employ	ees, and
•			onse or no	te to any line in t	nis Part VII				[

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(c)	Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.												
(A) Name and Title Name and Title  Average hours per week (list  Online to the compensation from the organization was compensation from the organization to the organi	eted of other												
any hours for related organizations below dotted line)  In the structure of the structure o	the ation lated												
(1) BRETT FLAUGHER 3 3													
GOVERNOR 0 X 0. 0.	0.												
(2) MARK KRESSER 3													
GOVERNOR 0 X 0.	0.												
(3) JOE BARTOZZI 3 3	_												
Treasurer 0 X 0. 0.	0.												
GOVERNOR 0 X 0. 0.	0.												
(5) MICHAEL HALLERON 3	_												
GOVERNOR 0 X 0. 0.	0.												
	_												
GOVERNOR 0 X 0. 0.	0.												
O JOSHUA W. DORSEY IV 3 _	_												
Secretary 0 X 0. 0.	0.												
	0												
GOVERNOR 0 X 0. 0. (9) JAY TIBBETS 3	0.												
GOVERNOR 0. 0.	0												
(10) KEVIN TREPA 3	0.												
GOVERNOR 0.	0.												
(11) STEPHEN HORNADY 3	<u> </u>												
CO VICE CHAIR 0. 0.	0.												
(12) JEFF REH 3													
CO VICE CHAIR 0. 0.	0.												
(13) ROBERT L. SCOTT 3													
Chairman 0   X       0.   0.	0.												
(14) SANDY CHISHOLM 3													

**GOVERNOR** 

0.

Par	t VII   Section A. Officers, Directors, Trus	tees, I	<u>۱</u>	Em	1 <u>010</u>		es,	and	Hignest Com	ipensated Emp	loyees (continued)
	(A) Name and title	Average hours per week	box	, unle cer ar	Pos check ess pe nd a c	sition more erson direct	e than is bot or/trus	h an itee)	(D)  Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
		(list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)	TRAVIS HALL GOVERNOR	3	х						0.	0.	0.
(16)	BILL KEMPFFER GOVERNOR	- <u>3</u> -	x					-	0.	0.	0.
(17)	WALTER MCLALLEN GOVERNOR	- <u>3</u> -	X						0.	0.	0.
(18)	RUSS THURMAN	3_					ļ	-			
(19)	GOVERNOR  JOHN SMITH	40	Х		_				0.	0.	0.
(20)	VP,CFO,Asst Tre LAWRENCE KEANE	40			Х		-		39,204.	0.	183.
(21)	SVP, GEN COUNS, STEVE SANETTI	40	-		X	-			469,602.	0.	60,833.
(22)	President & CEO NANCY COBURN	40	-		X	-	<u> </u>		550,652.	0.	29,520.
(23)	CFO CHRIS DOLNACK	40	}-	-	X	_			265,977.	0.	53,438.
	SENIOR VP DEBORAH KENNEY	0 40	-		_	X	-		348,540.	0.	51,427.
	VICE PRESIDENT, HR RANDALL CLARK	0 40	-	<u> </u>	$\vdash$	Х	_	$\vdash$	198,577.	0.	36,166.
	MANAGING DIRECTOR	0	1		<u> </u>		Х		146,175. 2,018,727.	0. 0.	18,539. 250,106.
C	Total from continuation sheets to Part VII, Section							<b>&gt;</b>	511,958.	0.	105,922.
	Total (add lines 1b and 1c)						<u> </u>		2,530,685.	0.	356,028.
	Total number of individuals (including but not limited to from the organization ► 18	o triose i	istea	abo	ve)	wno	rece	ivea	more than \$100,00	or reportable com	· 
3	Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such	or, or tru <i>ındividu</i>	ıstee <i>ıal</i>						highest compensa		Yes No 3 X
4	For any individual listed on line 1a, is the sum of rethe organization and related organizations greater such individual	than \$1	le co 150,0	mp: 100?	ensa If "	atior <i>Yes</i>	and con	d oth nple	ner compensation te Schedule J for	from	4 X
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'	comper comple	nsatio	on fi che	rom <i>dule</i>	any J fo	unre or su	elate ch p	ed organization or person	individual	5 X
Sec 1	tion B. Independent Contractors  Complete this table for your five highest compensation from the organization. Report compensation	ated ind	leper	nder	nt co	ntra	actor:	s tha	at received more t	than \$100,000 of	ar.
compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  Description of services										(C) Compensation	
REE	D EXHIBITIONS 383 MAIN AVENUE NORWALK, C	T 0685	1						TRADE SHOW MA	ANAGEMEN	2,191,992.
								1,942,541.			
	CONVEXX 6865 S. EASTERN AVENUE, SUITE 101 LAS VEGAS, NV 89119 TRADE SHOW MANAGEMEN 1,658,949.										
	ONE FOUR 19 FAIRVIEW DRIVE SOUTHBORO, MA 01772  ADVERTISING 1,323,893.										
	APCO WORLDWIDE INC. 700 12TH STREET NW, SUITE 800 WASHINGTON, DC 200 CONSULTING  2 Total number of independent contractors (including but not limited to those listed above) who received more than										

\$100,000 of compensation from the organization ► 46

# Form 990

# **Continuation Sheet for Form 990**

OMB No. 1545-0047

**20**13

Department of the Treasury Internal Revenue Service

Name of the Organization
NATIONAL SHOOTING SPORTS FOUNDATION INC.

Employler Identification number

06-0860132

Rart VIII Continuation: Officers, Directors, Trustees, Key Employees, and

(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average hours per week		_	officer of the contract of the		hat app emplo		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the
	Average hours per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	er			organization and related organizations
PATRICK ROTHWELL SENIOR DIRECTOR	$-\frac{40}{0}$					Х		133,351.	0.	28,260
WILLIAM DUNN MANAGING DIRECTOR	<u> </u>					х		129,107.	0.	32,590
WILLIAM BRASSARD JR. SENIOR DIRECTOR	$-\frac{40}{0}$					х		125,784.	0.	30,409
DIEDRA CAULEY SENIOR DIRECTOR	$-\frac{40}{0}$					х		123,716.	0.	14,663
										-
	<u> </u>	<u> </u>	ļ							
		ļ 							·	
	<del> </del>				ļ					
				_						
		<u> </u>								
		-	_	_						
				_	_					
		. }								

		Check if Schedule O	contains a	a resp	onse or note to any	/ line in this Part \	/III		
× +1		Control of the contro		- 4		(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
			·		· .··		function revenue	revenue	under sections 512-514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS		Federated campaigns		1 a					
E S		Membership dues	,	1 b					
S, G		Fundraising events	1	1 c			(		
FB		Related organizations		1 d					
NS,	е	Government grants (contribution	ons)	1 e					25
문입	f	All other contributions, gifts, g similar amounts not included	rants, and						
흞림				1f		*			1 1 1
동	_	Noncash contributions included <b>Total.</b> Add lines 1a-1f		•					
<u>э</u>	<u> </u>	Total, Add lines Ta-II		· · · · · · · ·	Business Code	· · · · · · · · · · · · · · · · · · ·			1 2 1
	2 a	SHOT SHOW		}	Dusiness Code	24,011,620.			24,011,620.
뎵		MEMBER SERVICES				4,871,910.		41,295.	24,011,020.
끙		SAFETY AND EDUC				354,536.		41,233.	
8		COMMUNICATIONS	SWI TOW			125,066.			
S		GOVERNMENT RELA	ATTONS			82,520.			
GRA		All other program service			WKS	77,351.			
ջ		Total. Add lines 2a-2f .				29,523,003.			The Artist House Comment of the
	3	Investment income (inc	luding div	ıdend	s, interest and		2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	1, p	5 4 KM 7 G W
		other similar amounts).				1,255,770.			1,255,770.
	4	Income from investmen	t of tax-e	xempt	bond proceeds. >				
	5	Royalties		• • • • •	· · · · · · · · · · · · · · · · ·	64,542.	\$ \$ \$\\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		64,542.
	_		(i) R		(ii) Personal	大 #李载\$ 华 \$ 11 17 1			स्वितिस्य म्यास
		Gross rents	13,	, 233	•	在"全"的"大"。 在"是"。 "是"。 "是"。 "是"。 "是"。 "是"。 "是"。 "是"。	· · · · · · · · · · · · · · · · · · ·		
		Less: rental expenses Rental income or (loss)	1.0	000		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)			1 考生医疗工程
		Net rental income or (loss)		, 233		12 222		THE SECOND SECTION	12 222
		_	(i) Secu	ırıtıes	(II) Other	13,233.	i. Ridagon, potagonio il mose	Children 12 1945	13,233. 除述的证据定义:
	7 a	Gross amount from sales of assets other than inventory.	3138				<b>建产业等证券</b>		<b>特要的</b>
		Less: cost or other basis	3130.	3310	•				
	D	and sales expenses	2790	6215					
	c		3,479			的影響的話息			<b>"神经"</b>
	d	Net gain or (loss)				3,479,095			3,479,095.
(e)	8 a	Gross income from fun	draising e	vents		<b>罗维亚达斯尼</b> 。至		C ARELIES	
Ī.		(not including . \$	_				12. 建装置 第		
EVE		of contributions reporte							
OTHER REVENU	_	See Part IV, line 18		•	a				Prince of the second
OTH		Less: direct expenses		•	b[				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
_		: Net income or (loss) fro		_		-	ENERGY WELL TO THE		
	9 a	Gross income from gar See Part IV, line 19	nıng actıv	ities.		3			
		Less: direct expenses			6				
		: Net income or (loss) from			~		4	E.S.	
		• •	-	-			1.47 17.75	11, 23, 1	1 2 4
	102	Gross sales of inventor and allowances	y, 1633 16	, tuiris	а	1 - '		7.77	
		Less: cost of goods sol			b				[3]
	c	: Net income or (loss) from	om sales	of inve	entory ►	1	1		
		Miscellaneous Reven	iue		Business Code			ـ شنگ ـ آسانا	
	11 a	OTHER_INCOME_			900099	10,158			10,158.
	k	)					ļ	<u>                                     </u>	
	(	; ; <del>,,, ,, , , , , , , , , , , , , , , , </del>						<del></del>	<del> </del>
	_	All other revenue .		• • • •	<u>_</u>		-	<u> </u>	
		Total. Add lines 11a-11		•		10,158		<del>                                     </del>	00 001
BA		Total revenue. See ins	tructions.	••		34,345,801	. 5,470,088.	41,295.	28,834,418.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Do n 6b, 7	ot include amounts reported on lines 'b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	1,320,500.		goriera exponent	
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				1,7,7,7
•	Compensation of current officers, directors, trustees, and key employees	1,405,137.		2) 40 4 7 10 4 2 2 20 20 20 20 20 20 20 20 20 20 20 20	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	4,088,946.			
	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	376,642.			
9	Other employee benefits.	681,388.			
	Payroll taxes	366,243.			·
	Fees for services (non-employees):	300/210.			
	Management				
	Legal				
	Accounting	42,500.			
	Lobbying	12/300.			
	Professional fundraising services. See Part IV, line 17.				
	Investment management fees		AND THE PROPERTY OF THE PROPER	a He Ca Li Handania China an	
	Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion	511,631.			
13	Office expenses	41,557.			
14	Information technology	201,014.			
15	Royalties				
16	Occupancy	341,661.			
17	Travel	61,597.			
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	93,061.			
23	Insurance	91,902.			
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.)			The state of the s	
	SHOT_SHOW	10,159,607.			
	O GOVT. RELATIONS	7,724,989.			
	SAFETY AND EDUCATION	3,662,095.			
	COMMUNICATIONS	2,061,059.		<del> </del>	
	All other expenses	3,272,018.			<del></del>
25	Total functional expenses. Add lines 1 through 24e	36,503,547.		-	<del> </del>
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).				

		Check if Schedule O contains a response or note to a	any lir	ne in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			10,110,253.	2	4,176,251.
	3	Pledges and grants receivable, net			<u> </u>	3	<del></del>
	4	Accounts receivable, net				4	1,141,489.
	5	Loans and other receivables from current and former of trustees, key employees, and highest compensated em Part II of Schedule L	fficers	s, directors, es. Complete		5	
	6	Loans and other receivables from other disqualified per section 4958(f)(1)), persons described in section 4958(c)(3) employers and sponsoring organizations of section 501(c)(5) beneficiary organizations (see instructions). Complete F		6			
A	7	Notes and loans receivable, net				7	
SETS	8	Inventories for sale or use				8	99,820.
Ţ	9	Prepaid expenses and deferred charges				9	515,768.
	10 a	Land, buildings, and equipment; cost or other basis.	-			砂み性	
			10a 10b	2,733,162.		7.76.7	
				1,227,437.	1,521,030.	10 c	1,505,725.
	11	Investments – publicly traded securities			31,240,887.	11	37,262,388.
	12	Investments — other securities. See Part IV, line 11 Investments — program-related. See Part IV, line 11		12	<u> </u>		
ľ	13	Intangible assets		14			
i	14	Other assets. See Part IV, line 11	240 020	15	122 722		
	15	,			249,832. 43,122,002.	16	133,732.
$\dashv$	16 17	Total assets. Add lines 1 through 15 (must equal line 3 Accounts payable and accrued expenses			43,122,002.	17	44,835,173. 2,626,313.
	18	Grants payable				18	2,020,313.
	19	Deferred revenue		19	7,950,652.		
٠. ا	20	Tax-exempt bond liabilities		20	173007002.		
ايّا	21	Escrow or custodial account liability. Complete Part IV			21		
A	22				では、これでは、これでは、これでは、これでは、これでは、これでは、これでは、これ	TATE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO THE PERSON NAMED IN	<b>福尼亚州市工会市</b>
Ļ		Loans and other payables to current and former officer key employees, highest compensated employees, and Complete Part II of Schedule L	disqu	alified persons.		22	<b>企业的证实工程</b>
F	23	Secured mortgages and notes payable to unrelated this	rd par	ties		23	
Š	24	Unsecured notes and loans payable to unrelated third p				24	
	25	Other liabilities (including federal income tax, payables and other liabilities not included on lines 17-24). Comp	to re lete F	lated third parties, Part X of Schedule D	4,595,540.	25	1,460,136.
	26	Total liabilities. Add lines 17 through 25			4,595,540.	26	12,037,101.
TEZ		Organizations that follow SFAS 117 (ASC 958), check here lines 27 through 29, and lines 33 and 34.	e ►	X and complete			
くいいにてい	27	Unrestricted net assets			38,420,829.	27	32,798,072.
Ĕ	28	Temporarily restricted net assets			105,633.		
	29	Permanently restricted net assets				29	
OR L		Organizations that do not follow SFAS 117 (ASC 958), che and complete lines 30 through 34.	eck he	re ►			
הסבס	30	•			Ett Make Miles & Bridge	30	
	31	Paid-in or capital surplus, or land, building, or equipme				31	<del></del>
Ä	32	Retained earnings, endowment, accumulated income,		<del></del>	32	<del> </del>	
<b>B女し女ZCEの</b>	33	Total net assets or fund balances		38,526,462.	+	32,798,072.	
Ę	34			43,122,002.	34	44,835,173.	
<u> </u>	<del>بىر</del> ا	Total habilities and not assets/fully balances		· · · · · · · · · · · · · · · · · · ·	1 43,122,002.	1 37	1 44,033,113.

BAA

		-0860	132		raç	ge 12
Par	t'XI Reconciliation of Net Assets				-	
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	34	, 34	5,8	01.
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	36	, 50	3,5	47.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2	, 15	7,7	46.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	38	, 52	5,4	62.
5	Net unrealized gains (losses) on investments		-2	, 19	2,7	10.
6	Donated services and use of facilities					
7	Investment expenses					
8	Prior period adjustments	. 8				
9	Other changes in net assets or fund balances (explain in Schedule O). See Schedule O	. 9	-1	., 37	7,9	<u>34.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	32	,79	8,0	72.
Par	tXII Financial Statements and Reporting	1				
	Check if Schedule O contains a response or note to any line in this Part XII					. X
	PAN 1111-1	-			es	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other See Sch.	0	<u></u>			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.					
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewseparate basis, consolidated basis, or both:	wed on a	a 電			
	Separate basis Consolidated basis Both consolidated and separate basis			uin:		
ŀ	Were the organization's financial statements audited by an independent accountant?			2 b	X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep	arate	1	輕量	顯	整
	basis, consolidated basis, or both:    X   Separate basis					
			7			四連目
C	: If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the au review, or compilation of its financial statements and selection of an independent accountant?	dıt, ••••••		2 c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		<b>建</b> 联之			
3 a	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Singl Audit Act and OMB Circular A-133?	; 	[	3 a		Х
ŀ	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 b		
BAA			F	orm 9	90 (	(2013)

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

# **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

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

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

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name	lame of organization Employer identification number									
	TIONAL SHOOTING SPO			06-0860132						
Par	tl-A Complete if the or	ganization is exempt under section	on 501(c) or is a s	ection 527 organiz	ation.					
1	Provide a description of the o	organization's direct and indirect political c	ampaign activities in	Part IV.						
2	Political expenditures			\$1	<b>&gt;</b>					
3	Volunteer hours									
Pai	한문B Complete if the or	ganization is exempt under section is exempt under section is etax incurred by the organization under	on 501(c)(3).							
				-						
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955.	►\$ <sub>.</sub>						
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No					
4 a	4 a Was a correction made?									
	If 'Yes,' describe in Part IV.									
		ganization is exempt under section								
1	Enter the amount directly exp	pended by the filing organization for section	n 527 exempt functio	n activities 🟲 💲						
2	2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities									
3	3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b									
4										
5										
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0					
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										

Schedule C (Form 990 or 990-EZ) 201	3 NATIONAL SH	OOTING SPORTS FO	UNDATION INC.	06-086	0132 Page 2
Pärt II A Complete if section 501(	the organizatior	is exempt under se	ction 501(c)(3) ar	nd filed Form 5768 (e	
A Check ► If the filing	g organization belong	s to an affiliated group (and	list in Part IV each aff	iliated group member's nam	e,
address,	EIN, expenses, and	I share of excess lobbying	expenditures).		
B Check ► I if the filing	ng organization ched	cked box A and 'limited co	ntrol' provisions appl	y.	
(The term	Limits on Lobby 'expenditures' mea	ing Expenditures ns amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	ures to influence pul	blic opinion (grass roots le	obbying)		· · · · · · · · · · · · · · · · · · ·
<b>b</b> Total lobbying expenditi	ures to influence a l	egislative body (direct lob	bying)		
c Total lobbying expenditi	ures (add lines 1a a	nd 1b)			
d Other exempt purpose e	expenditures				
e Total exempt purpose e	expenditures (add lin	nes 1c and 1d)			
f Lobbying nontaxable an both columns	nount. Enter the am	ount from the following ta	ble ın		
If the amount on line 1e, col	umn (a) or (b) is:	The lobbying nontaxable	amount is:	中的性質學素質可能	· · · · · · · · · · · · · · · · · · ·
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess	over \$500,000.		经过数键的设计
Over \$1,000,000 but not over \$	\$1,500,000	\$175,000 plus 10% of the excess	s over \$1,000,000.		
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the excess	over \$1,500,000.		
Over \$17,000,000			Hills To the second		
		of line 1f)			
_		s, enter -0			
i Subtract line 1f from lin	ne 1c. If zero or less	, enter -0			
j If there is an amount othe section 4911 tax for this	er than zero on either s year?	line 1h or line 1i, did the or	ganızatıon file Form 47	20 reporting	Yes No
(Som	ne organizations tha	4-Year Averaging Period at made a section 501(h) e as below. See the instruct	lection do not have t	o complete all of the five	1 3333
	Lobb	ying Expenditures During	g 4-Year Averaging P	eriod	
Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) Total
2 a Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					_
c Total lobbying expenditures				-	
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					
BAA				Schedule C (For	rm 990 or 990-EZ) 2013

Part II	(Form 990 or 990-EZ) 2013 NATIONAL SHOOTING SPORTS FOUNDATION INC.  Bill Complete if the organization is exempt under section 501(c)(3) and has NOT	file	For	m 5768		
<u> </u>	(election under section 501(h)).	(2	a)		(b)	
	n 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description bbying activity.	Yes	No	A	mount	
1 Du leg thr	ring the year, did the filing organization attempt to influence foreign, national, state or local pislation, including any attempt to influence public opinion on a legislative matter or referendum, ough the use of:	· 是 " " 。	ار میلوللاون ما از میلوللاون			
	lunteers?					F
	id staff or management (include compensation in expenses reported on lines 1c through 1i)?		<u> </u>			
	edia advertisements?					
	allings to members, legislators, or the public?		<u> </u>			
	iblications, or published or broadcast statements?					
	ants to other organizations for lobbying purposes?					
	rect contact with legislators, their staffs, government officials, or a legislative body?	Ĺ				
h Ra	illies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		l			
i Ot	her activities?				_	
j To	tal. Add lines 1c through 1	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	d the activities in line 1 cause the organization to be not described in section 501(c)(3)?			Wat Li	ير د ع ي	- (1)
b lf	'Yes,' enter the amount of any tax incurred under section 4912	7,774 150 G	¥ 34,			
c If	'Yes,' enter the amount of any tax incurred by organization managers under section 4912	اُ رَبِي لِينَا مُنْ الْمُ				
d If	the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			5.45	はっている。	滑法
	ere substantially all (90% or more) dues received nondeductible by members?					X X
	d the organization agree to carry over lobbying and political expenditures from the prior year?				3	Х
	(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'	Part I	), or : II-A,	line 3, i	s 	
	300, 30000011101110111111111111111111111		55.60 SH	4	<u>,503,</u>	780.
ex	ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
	urrent year	• • • • •	2 a		<u>,779,</u>	434.
	arryover from last year		2 b			
	otal			3	<u>,779,</u>	434.
	ggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		<del></del>	
de	notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess best the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?					0.
5 Ta	axable amount of lobbying and political expenditures (see instructions)		. 5	3	,779,	434.
Part I	Supplemental Information					
Provide Part II-	the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground B, line 1. Also, complete this part for any additional information.					

## **SCHEDULE D** (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

<b>LA</b> N	TIONAL SHOOTING SPORTS FOUNDATION	ON INC.	06-0860132
Par	Organizations Maintaining Donor	Advised Funds or Other Similar F	unds or Accounts.
	Complete if the organization answer	ered 'Yes' to Form 990, Part IV, lin	ne 6.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor are the organization's property, subject to the or	r advisors in writing that the assets held in ganization's exclusive legal control?	donor advised funds
6	Did the organization inform all grantees, donors for charitable purposes and not for the benefit o impermissible private benefit?	, and donor advisors in writing that grant fifthe donor or donor advisor, or for any oth	unds can be used only her purpose conferring
Par	्रीङ्गि Conservation Easements.		
1	Complete If the organization answer Purpose(s) of conservation easements held by the conservation easement easements held by the conservation easements held		IC /.
•	Preservation of land for public use (e.g., red		n of an historically important land area
	Protection of natural habitat	· —	n of a certified historic structure
	Preservation of open space		of a certified flistofic structure
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contribution in the	form of a conservation easement on the
_	last day of the tax year.	d a qualified conservation contribution in the i	Torri or a conservation easement on the
			Held at the End of the Tax Year
	Total number of conservation easements		
ŀ	Total acreage restricted by conservation easeme	ents	. 2b
(	Number of conservation easements on a certifie	ed historic structure included in (a)	2c
c	Number of conservation easements included in	(c) acquired after 8/17/06, and not on a his	storic
_	structure listed in the National Register		
3	Number of conservation easements modified, transf	ferred, released, extinguished, or terminated b	by the organization during the
4	tax year ►  Number of states where property subject to conserv	ration encoment is located >	
5	Does the organization have a written policy rega		handling of wolations
9	and enforcement of the conservation easements	s it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, ins		
	<b>-</b>		
7	Amount of expenses incurred in monitoring, inspect >\$	ing, and enforcing conservation easements du	uring the year
_	'		
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports of include, if applicable, the text of the footnote to conservation easements.	conservation easements in its revenue and exp the organization's financial statements that	pense statement, and balance sheet, and at describes the organization's accounting for
?ai	Organizations Maintaining Collection Complete if the organization answ	tions of Art, Historical Treasures, ered 'Yes' to Form 990, Part IV, Ir	or Other Similar Assets. ne 8.
1 8	If the organization elected, as permitted under sart, historical treasures, or other similar assets held in Part XIII, the text of the footnote to its finance	l for public exhibition, education, or research i	evenue statement and balance sheet works of in furtherance of public service, provide,
ł	olf the organization elected, as permitted under shistorical treasures, or other similar assets held for following amounts relating to these items:	public exhibition, education, or research in fu	rtherance of public service, provide the
	(i) Revenues included in Form 990, Part VIII, I	ine 1	▶\$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, his amounts required to be reported under SFAS 1	storical treasures, or other similar assets for fil 16 (ASC 958) relating to these items:	nancial gain, provide the following
i	Revenues included in Form 990, Part VIII, line	1 ,	▶\$
1	Assets included in Form 990, Part X		►\$

Schedule D (Form 990) 2013 NATIO					06-0860		Page 2
<del></del>							<u>u)</u>
3 Using the organization's acquisition, items (check all that apply):	accession, an	nd other record	_	-	-	ollection	
a Public exhibition		d	<b>⊢</b>	exchange programs			
b Scholarly research	. 1	е	Other		<u> </u>		
c Preservation for future genera  4 Provide a description of the organiza Part XIII.		ons and expla	ın how they fu	rther the organization	's exempt purpose in		
5 During the year, did the organizal to be sold to raise funds rather th	tion solicit or i	receive dona	tions of art, h	nistorical treasures,	or other similar assets	Yes 🗍	No
Part IV Escrow and Custodial	Arrangem	ents. Com	nlete if the	organization ar	rswered 'Yes' to For		
line 9, or reported an a	amount on	Form 990,	Part X, In	ne 21.	13440104 105 10101	111 550, 1 411 1	٧,
1 a Is the organization an agent, trus on Form 990, Part X?	tee, custodiar	n, or other inf	termediary fo	r contributions or ot	her assets not included [	☐ Yes ☐	No
b If 'Yes,' explain the arrangement							NO
bit 103, explain the arrangement	iii i ait Xiii ai	na compicte	are ronowing	table.		Amount	
c Beginning balance						- Intodate	
d Additions during the year						_	
e Distributions during the year							
f Ending balance							
2 a Did the organization include an a					1 - 1	Yes	No
<b>b</b> If 'Yes,' explain the arrangement					L	┙∷	
2 ··· · · · · · · · · · · · · · · · · ·				200 <b>p</b>			
Part V Endowment Funds. Co	omplete if t	he organiz	ration ansv	vered 'Yes' to Fo	orm 990. Part IV. lin	e 10.	
	(a) Current		(b) Prior year	(c) Two years bac		(e) Four years t	back
1 a Beginning of year balance				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(4,7	
<b>b</b> Contributions							
c Net investment earnings, gains, and losses	-						
d Grants or scholarships	····					<del></del> -	
e Other expenditures for facilities and programs	<u>-</u> .						
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentage	e of the currer	nt year end b	alance (line	1g, column (a)) held	as:	·	
a Board designated or quasi-endowment	ent ►		%				
<b>b</b> Permanent endowment	%						
c Temporarily restricted endowmen	nt ►	%					
The percentages in lines 2a, 2b,	and 2c should	d equal 100%	ı.				
3 a Are there endowment funds not in the organization by:	he possession	of the organiz	ation that are	held and administere	d for the	Yes	No
(i) unrelated organizations						3a(i)	<del></del>
(ii) related organizations						3a(ii)	
b If 'Yes' to 3a(ıı), are the related of					• • • • • • • • • • • • • • • • • • • •	3b	
4 Describe in Part XIII the intended	_	-					
Part VI Land, Buildings, and							
Complete if the organi			to Form 9	990. Part IV. line	e 11a. See Form 990	). Part X. line	· 10
Description of property					<del></del>	<u> </u>	
Description of property		(a) Cost or ot investm	nent)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book valu	16
1 a Land				187,683.	- 1 - 1	187,	683 <i>.</i>
<b>b</b> Buildings				2,301,697.	1,054,398.	1,247,	
c Leasehold improvements							
d Equipment				,			
e Other				243,782.	173,039.	70.	743.
Total. Add lines 1a through 1e. (Column	n (d) must ed	ual Form 99	0, Part X, col			1,505,	
BAA					Schedu	le <b>D</b> (Form 990)	

Part VII Investments – Other Securities.	N/ 11 = 000	N/A
		, Part IV, line 11b. See Form 990, Part X, line 1
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) (B)		
(C)		
(D)		
(E)	· · · · · · · · · · · · · · · · · · ·	
(F)		
(G)		
(H)	·	
(I)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) .		只要完整不是被手中面的正确的原则的。 (2) 新兴城。
Part VIII Investments — Program Related.		N/A
(a) Description of investment type	(b) Book value	, Part IV, line 11c. See Form 990, Part X, line 1
	(b) Book value	(c) Method of valuation. Cost or end-of-year market valu
<u>(1)</u> (2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ▶	37 / 3	是到地區的影響的不是影響的"學問題"。
Complete if the organization answered	N/A Yes' to Form 990	, Part IV, line 11d. See Form 990, Part X, line 1
	scription	(b) Book value
(1)		
(2)	··	
(3)		
(4) (5)		
(6)		
(7)		
(8)		
(9)		
(10)	5. 1 15.	
Total. (Column (b) must equal Form 990, Part X, column (b)	B), line 15.)	· · · · · · · · · · · · · · · · ·
Other Liabilities. Complete if the organization answered 'Yes' to Fo	orm 990 Part IV line 11	Le or 11f See Form 990 Part Y line 25
(a) Description of liability	(b) Book value	
(1) Federal income taxes	1,7	
(2) MEDICAL FSA, DEPENDENT CARE, 457 (B)		
(3) POST RETIREMENT BENEFITS LIABILITY	<del></del>	<del></del>
(4) SALES TAX PAYABLE	1	
(5) (6)		The state of the s
(0)	į.	2 三 1500年 かくけかせんごう こうれ じゅうしゅう シンケスション・デ
(7)		and the state of t
(7) (8)		
(8)		
(8) (9) (10)		
(8)	1,460,13	

examination by taxing authorities. The Foundation has analyzed the tax positions

taken in its filing with the Internal Revenue Service and state jurisdictions where

Schedule **D** (Form 990) 2013

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Schedule D (Form 990) 2013 NATIONAL SHOOTING SPORTS FOUNDATION INC.  Part XIII: Supplemental Information (continued)	06-0860132	Page 5
Part X - FIN 48 Footnote (continued)		
it operates. The Foundation believes that its income tax filing	ng positions will	be
sustained_upon_examination_and_does_not_anticipate_any_adjustme	ents_that_would_re	sult
in a material adverse affect on the Foundation's financial cond	lition, results of	<u> </u>
activities or cash flows. Accordingly, the Foundation has not	recorded any	
reserves, or related accruals for interest and penalties for un	certain tax posit	ions
at_March_31, 2014.	·	
	·	
	·	<b></b>
	·	<b></b>
	·	<del>-</del>
	·	<b>-</b>
	·	
	·	<del></del>
		<b></b>
	<del>-</del>	

# SCHEDULE I

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22.

Attach to Form 990.

s, and Individuals in the United States suization answered 'Yes' to Form 990, Part IV, line 21 or 22.

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_
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S

OMB No 1545-0047

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

Employer identification number 06-0860132

2

X Yes

Pa	Part I General Information on Grants and Assistance	
-	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	stance, and
7	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	See Part IV

NATIONAL SHOOTING SPORTS FOUNDATION INC.

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

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, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ADAMS STATE UNIVERSITY	84-6000542		10,000.	0.	N/A	N/A	SHOOTING SPORTS DEVELOP.
(2) ASSOCIATION OF COLLEGE UNIONS 120 W SEVENTH STREET SUITE 20 BLOOMINGTON. IN 47404	35-1816510		10,000.	0.	N/A	N/A	SHOOTING SPORTS DEVELOP.
(3) BIRDIES FOR THE BRAVE 100 PGS TOUR BLVD PONTE VEDRA BEA, FL 32082	59-2774423		35,000.	0.	N/A	N/A	SHOOTING SPORTS DEVELOP.
(4) BOY SCOUTS OF AMERICA	22-1576300 501	501 (c) (4)	100,000	0.	N/A	N/A	SHOOTING SPORTS DEVELOP.
(5) CONCORDIA UNIVERSITY 800 NORTH COLUMBIA AVE. SEWARD, NE 68434	47-0378777		10,000	0.	N/A	N/A	SHOOTING SPORTS DEVELOP.
(6) CRIMSON TRACE	93-1134654		10,000.	0.	N/A	N/A	SHOOTING SPORTS DEVELOP.
(7) GAUCHO TACTICAL STUDENT SPORT 1320 ALTA VISTA ROAD SANTA BARBARA, CA 93103	46-4969333		10,000.	0.	N/A	N/A	SHOOTING SPORTS DEVELOP.
(8) GLENVILLE STATE COLLEGE	55-6000779		10,000.	0.	N/A	N/A	SHOOTING SPORTS DEVELOP.
2 Enter total number of section 501(c)(3) and government organization	3) and government or	ganizations listed	is listed in the line 1 table				4
2 Enter total number of other organizations listed in the line 1 table	ans listed in the line	1 table				•	38

3 Enter total number of other organizations listed in the line 1 table.
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

TEEA3901L 07/12/13

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Schedule I (Form 990) (2013)

Page 2

06-0860132

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Schedule 1 (Form 990) (2013)

 Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

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Continuation Page 1

Schedule I Cont (Form 990) 2013 SHOOTING SPORTS (h) Purpose of grant or assistance DEVELOP. DEVELOP. DEVELOP. DEVELOP DEVELOP Employer identification number DEVELOP DEVELOP DEVELOP DEVELOP DEVELOP Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II.) 06-0860132 (g) Description of non-cash assistance N/A N/A N/A N/A N/A N/A N/A (f) Method of valuation (book, FMV, appraisal, other) N/A N/A N/A N/A N/A (e) Amount of non-cash assistance (d) Amount of cash grant 10,000 15,000 10,000 10,000 10,000 20,000 10,000 10,000 10,000 6.500 TEEA4001L 07/12/13 (c) IRC section if applicable 62-0483210 46-0283336 36-6056575 75-6001909 01-0516668 03-0179298 NATIONAL SHOOTING SPORTS FOUNDATION INC 47-0376525 71-0246213 33-1208731 41-0906391 (b) EIN (a) Name and address of organization or government LOWA CENTRAL COMMUNITY COLLEG 1833 CENTRE POINT CIRCLE HASTINGS COLLEGE SHOOTING HONORED AMERICAN VETERANS MAINE PROFESSIONAL GUIDES MARTIN METHODIST COLLEGE \_ 433 WEST MADISON STREET \_710\_N.\_TURNER\_AVENUE\_ 1105 WEST SIH STREET LONGMEADOW, MA 01116 NAPERVILLE, IL 60563 BATESVILLE, AR 72503 MIDDLEBURY, VT 05753 MOUNT MARTY COLLEGE FORT DOGE, IA 50501 2300 HIGHLAND ROAD MIDDLEBURY COLLEGE 14 OLD CHAPEL ROAD HASTINGS, NE 68901 YANKTON, SD 57078 PULASKI, IN 38478 KILGORE COLLEGE \_ KILGORE, TX 75662 AUGUSTA, ME 04332 1\_TRITON\_CIRCLE 1100 BROADWAY TYON COLLEGE PO BOX 60727 PO BOX 336 \_ Name of the organization

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

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Schedule I Cont (Form 990) 2013 SHOOTING SPORTS RECRUITMENT AND SHOOTING SPORTS (h) Purpose of grant or assistance COOPERATIVE RETENTION DEVELOP. DEVELOP DEVELOP. DEVELOP. DEVELOP DEVELOP Employer identification number DEVELOP DEVELOP EFFORT Part'II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II.) 06-0860132 (g) Description of non-cash assistance N/A N/A N/A N/A N/A N/A N/A NA N/A (f) Method of valuation (book, FMV, appraisal, other) N/A N/A N/A N/A N/A N/A (e) Amount of non-cash assistance (d) Amount of cash 50,000. 13,000 10,000 100,000 8,000 10,000 10,000 40,000 10,000 17,000 (c) IRC section if applicable (3) 20-8484121|501 (c) 43-1792437 36-2862206 82-6000936 03-0197728 39-1088496 NATIONAL SHOOTING SPORTS FOUNDATION INC 75-0108632 25-1513539 37-0906582 13-3386737 (p) EIN (a) Name and address of organization or government SOUTHEASTERN ILLINOIS COLLEGE SM MISCONSIN TECH COLLEGE \_SLIPPERY\_ROCKS\_UNIVERSITY CRAFISBURY COMM, VI 05827 SHELBY TWNSHIP, MI 48315 NICS BREAKING CLAYS CLUB SLIPPERY ROCK, PA 16057 COEUR D'ALENE, ID 83814 100 WEST GARDEN AVENUE 1800 BRONSON AVENUE \_\_51863\_SCHOENHERR\_ROAD\_ SAN ANTONIO, TX 78253 CHEVY CHASE, MD 20815 SPRINGFIELD, MO 65804 SPRINGFIELD, MA 01102 HARRISBURG, IL 62946 FENNIMORE, WI 53809 2100 ROOSEVELT AVE \_5931ROFT\_ROAD\_\_\_\_ NAT'L FISH MUSEUM 3575 COLLEGE ROAD NATL SKEET ASSOC. STERLING COLLEGE\_ NATL 4H COUNCIL 7100 CONN AVE 500 W. SUNSHINE SMITH & WESSON S3 FOUNDATION 1 MORROW WAY Name of the organization PO BOX\_72\_

TEEA4001L 07/12/13

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

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Schedule I Cont (Form 990) 2013 SHOOTING SPORTS (h) Purpose of ت grant or assistance RECRUITMENT RANGE GRANT RETENTION DEVELOP Employer identification number DEVELOP EVELOP EVELOP DEVELOP DEVELOP DEVELOP DEVELOP Part II. Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) 06-0860132 (g) Description of non-cash assistance N/A N/A N/A N/A N/A M (f) Method of valuation (book, FMV, appraisal, other) N/A N/A N/A N/A N/A N/A NA (e) Amount of non-cash assistance (d) Amount of cash 10,000. 40,000 100,000 10,000 285,000 100,000 10,000 10,000 50,000 10,000 TEEA4001L 07/12/13 grant (c) IRC section if applicable NATIONAL SHOOTING SPORTS FOUNDATION INC. 20-2388389 31-0899414 46-4875110 87-0636433 87-0481456 84-0644739 31 - 094110346-4606623 46-3918184 (b) EIN (a) Name and address of organization or government \_298\_24th\_STREET,SUITE\_325\_ TRINIDAD STATE JR COLLEGE .. \_ U.S. SPORTSMEN'S ALLIANCE \_ \_ U.S. SPORTSMEN'S ALLIANCE TARLETON STATE UNIVERSITY COLORADO SPRING, CO 80909 RANCHO CUCAMONG, CA 91730 \_1140\_N. LILLIAN STREET\_ THE ALL IN ALL THE TIME 11738 SAN MARINO STREET UNIVERSITY OF COLORADO STEPHENVILLE, TX 76401 801 KINGSMILL PARKWAY 801 KINGSMILL PARKWAY 600 PROSPECT STREET TURNER'S OUTDOORSMAN TECH TRAP AND SKEET TREAD LIGHTLY! INC. TRUCKEE , CA 96161 TRINIDAD, CO 81082 COLUMBUS, OH 43223 COLUMBUS, OH 43223 13100 FILLY LANE 6705 85TH STREET LUBBOCK, TX 79424 BOULDER, CO 80302 1\_OLYMPIC\_PLAZA OGDEN, UT 84401 \_ USA\_ SHOOTING\_ Name of the organization \_908\_18IH\_\_

 Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

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SHOOTING SPORTS SHOOTING SPORTS (h) Purpose of grant or assistance Employer identification number DEVELOP DEVELOP Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) 06-0860132 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) N/A (e) Amount of non-cash assistance (d) Amount of cash grant 10,000. 10,000 (c) IRC section if applicable NATIONAL SHOOTING SPORTS FOUNDATION INC. 46-4439188 58-1130945 (p) EIN (a) Name and address of organization or government WILDLIFE CONSERVATION FUND -\_2070\_US\_HIGHWAY,\_278\_SE\_\_\_\_ MICHITA STATE UNIVERSITY ... SOCIAL CIRCLE, GA 30025 1845 FAIRMONT, BOX 56 WICHITA, KS 67260 Name of the organization

SHOOTING SPORTS

DEVELOP

N/A

16,000

53-0196629

WILDLIFE MANAGEMENT INSTITUTE

1\_MILL\_STREET\_#315\_

BURLINGTON, VT 05401 YOUTH SHOOTING SPORTS

NAGS HEAD, NC 27959

4125 BRANT CT W

SHOOTING SPORTS

DEVELOP

N/A

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20-5711649|501 (c) (3)

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Schedule I Cont (Form 990) 2013

TEEA4001L 07/12/13

## SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ► Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.
► Attach to Form 990. ► See separate instructions.

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

OMB No. 1545-0047

Open to Public Inspection 3

Schedule J (Form 990) 2013

Employer identification number

NATIONAL SHOOTING SPORTS FOUNDATION INC. 06-0860132 Part **Questions Regarding Compensation** Yes Nο 1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments X Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain.... Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?...... 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Written employment contract |X| Compensation committee Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? 4 a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . c Participate in, or receive payment from, an equity-based compensation arrangement? ..... If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: **b** Any related organization?.... 5 b If 'Yes' to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? 6 a **b** Any related organization?..... 6 b If 'Yes' to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III......... 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III............... If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

06-0860132

Page 2

Schedule J (Form 990) 2013 NATIONAL SHOOTING SPORTS FOUNDATION INC.

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	deferred compensation	Delicilis	לבן לואלבן פווווייסיס	deferred in prior Form 990
T.AWRENCE KEANE	ε	334,602.	135,000.	0.	40,000.	20, 833.	530,435.	
	€	   	0	0.	0.	0.	0.	0.
E SAN	Θ	360, 652.	190,000	0	13_750_	-15, 270.	580,172.	0   0
	€	 	0	0.	0.	0.	0.	0.
NANCY COBURN	Θ	203,977.	62,000.	0.	37,495.	15,943.	319,415.	  -  -  -  -
3 CFO	€	     	1 1	0.	1		- 1	0.
	Θ	243,540.	105,000.		40,000.	11, 427.	- 399,967.	0.
	€	 	0	0.	0.	0.	0.	0.
DEBORAH KENNEY	ε	152, 577.	46,000.	0	24_152_	12,014.	234,743.	
5 VICE PRESIDENT, HR	<u>E</u>		0	0.	0.	-		0.
RANDALL CLARK	Θ	123, 975.	22,200.	0		11, 448.	164,714.	0
6 MANAGING DIRECTOR	€		0	0.	0.		0.	0.
PATRICK ROTHWELL	Θ	117,601.	15,750.	0	1,038.	-27.222.	161,611.	  -  -  -  -  -
7 SENIOR DIRECTOR	<u>(ii)</u>		0	0	0.	0.	0.	0.
WILLIAM DUNN	Θ	107,507.	21_600		5,464.	274126	161,697.	
8 MANAGING DIRECTOR	(ii)		0	0.	0.	0.	0.	0.
WILLIAM BRASSARD JR.	()	108,884.	16,900.	0.	17_718.	-12,691.	156,193.	0-
9 SENIOR DIRECTOR	€		0.	0.	0.	0.	0.	0
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# SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

NATIONAL SHOOTING SPORTS FOUNDATION INC.	06-0860132	
Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder		
The Organization has both voting and non voting members.		
Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body		
NSSF board members make decisions regarding employees who may be appointed to the		
Board of Directors.		
Form 990, Part VI, Line 8 - Explanation of No Contemporaneously Documentation of Meetings		
The Organization does not prepare minutes of all committee meetings.		
Form 990, Part VI, Line 11b - Form 990 Review Process		
The 990 is reviewed in detail by the President & CEO,	Assistant Secretary/Sr. VP &	
General Counsel, and the Assistant Treasurer/VP & CFO. The final draft of the 990		
is provided to the Finance, Investment and Audit Comm	ittee prior to filing.	
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforce	ement of Conflicts	
Officers, members of the Board of Governors, key employees, and all staff members		
are requried to submit a written conflict of interest	statement annually.	
Form 990, Part VI, Line 15a - Compensation Review & Approval Proces	ss - CEO, Top Management	
Compensation of the Organization's President, Sr. Vic	e President/General Counsel,	
Vice President and CFO, Sr. Vice President and Vice P	resident of Human Resources and	
Administration_is_reviewed_by_independent_members_of_	the Governing Board, who are	
provided compensation data and surveys collected by t	he Vice President of Human	
Resources and Administration. Written records of discussions and decisions made at		
the meeting held annually in February are maintained	by the Chairman of the Board.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available		
The Organization's form 1024 application for recognition of exemption (including		
attachments and documents filed or received by the Organization in connection		
therewith) and the Organization's Form 990 annual information return (including		
schedules) for the previous three years are available for inspection upon request by		

06-0860132	
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ises in Newtown, CT	
during normal business hours or upon written request. Requests for copies of the	
Organization's Form 1024 (including attachments) and Form 990 are accepted upon	
prior payment of reasonable copying fees and, if applicable, actual mailing costs.	
If_such_request_is_made_in_person,_copies_will_be_provided_immediately_and,_if_made	
in writing, shall be provided within 30 days after payment clears. The Organization	
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of accounting to the accepted accounting rovide a more earned and expenses in comparability	

2013

# **Schedule O - Supplemental Information**

Page 1

**Client NSSF** 

NATIONAL SHOOTING SPORTS FOUNDATION INC.

06-0860132

09:55AM

9/23/14

Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances

Effects of change from cash to accrual .....  $\frac{$-1,377,934}{$-1,377,934}$ .

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 Attach to Form 990.

OMB No. 1545-0047

(f)
Direct controlling
entity Part II. Identification of Related Tax-Exempt Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Openitoleublic Employer identification number 06-0860132 (e) End-of-year assets Part In Identification of Disregarded Entities Complete if the organization answered 'Yes' on Form 990, Part IV, line 33. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. (d) Total income (c) Legal domicile (state or foreign country) (b) Primary activity NATIONAL SHOOTING SPORTS FOUNDATION INC (a) Name, address, and EIN (if applicable) of disregarded entity Name of the organization

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(g) Sec 512(b)(13) controlled entity? ŝ Schedule R (Form 990) 2013 × × Yes (f)
Direct controlling
entity N/A N/A Public charity status (if section 501(c)(3)) E (d) Exempt Code section ന ဖ (၁ 501 (C) 501 (c)
Legal domicile (state or foreign country)  $^{\rm CI}$ 덩 EDUCATE FAMILIES SUPPORT MEMBERS ON GUN SAFETY ON SPORTING FIREARMS & AMMUNITION EDUCATE & (b) Primary activity BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. SPORTING ARMS & AMMUNITION MANUFAC 11 MILE HILL ROAD NEWTOWN, CT 06470 (a) Name, address, and EIN of related organization (2) 20-4993541 - PROJECT CHILDSAFE - 11MILE HILL ROAD - 15 MILE HILL ROAD (3) 46-2147964 ₤

TEEA5001L 06/26/13

Schedule R (Form 990) 2013

(f) Sec 512(b)(13) controlled entity? (k) Percentage ownership Š Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, Inne 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Part III I Identification of Related Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. Yes General or managing partner? S (h) Percentage ownership Yes Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) (g) Share of end-ofyear assets (h)
Disproportonate
allocations? N Yes (f) Share of total income (g) Share of end-of-year assets (e)
Type of entity
(C corp, S corp,
or trust) (f) Share of total income (d)
Direct
controlling
entity (e)
Predominant income
(related, unrelated, excluded from tax under sections 512-514) (c)
Legal domicile
(state or foreign country) (d)
Direct
controlling
entity (b) Primary activity (c) Legal domicile (state or foreign country) (a) Name, address, and EIN of related organization (b) Primary activity (a)
Name, address, and EIN of related organization PartIV 듼  $\Xi_{l}^{l}$ ଚ୍ଚ¦ ପ୍ର¦

Schedule R (Form 990) 2013

TEEA5002L 06/27/13

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06-0860132

Schedule R (Form 990) 2013

Part VI: Unrelated Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Predominant income	(e) Are all partners	(f) Share of total income	(g) Share of end-of-year	(h) Dispropor- tionate	Code V-UBI	(j) General or managing	or Percentage
		country)	(related, unrelated, excluded from tax under	501(c)(3) organization		assets	allocations?	20 of Schedule K-1 Form (1065)	partner	
			section 512-514)	Yes No			Yes No	,	Yes	ν
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Schedule R (Form 990) 2013	NATIONAL	SHOOTING SPORTS	FOUNDATION INC.	06-0860132	Page 5
Part VII: Supplementa	I Information	tion for responses t	o questions on Schedule	P (see instructions)	
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#### Form **3115**

#### **Application for Change in Accounting Method**

(Rev December 2009)
Department of the Treasury

OMB No. 1545-0152

Internal Revenue Service				
Name of filer (name of parent corporation if a consolic	dated group) (see instructions)	Identification number (see instructions)		
		06-0860132		
		Principal business activity code number (see instructions)		
NATIONAL SHOOTING SPORTS		Tay was of about ANN/DD MACO		_
Number, street, and room or suite no. If a P.O. box, s	ee the instructions.	Tax year of change begins (MM/DD/YYYY) 4/01/2013 Tax year of change ends (MM/DD/YYYY) 3/31/2014		
11 MILE HILL ROAD  City or town, state, and ZIP Code		Tax year of change ends (MM/DD/YYYY) 3/31/2014  Name of contact person (see instructions)		
NEWTOWN, CT 06470  Name of applicant(s) (if different than filer) and identifier	feation number(s) (see instructions)	JOHN SMITH   Contact person's telephone number	<del></del>	
Name of applicant(s) (if otherent than mer) and items	incation flumber(s) (see instructions)			
		(203) 426-1320		
If the applicant is a member of a consol	idated group, check this box .	tached (see instructions for when Form 2848 is required),	<u> </u>	
check this box		tached (see instructions for when Form 2846 is required),	<b>▶</b> □	
Check the box to indicate		Check the appropriate box to indicate the type of account	ing	
the applicant.	Cooperative (Section 1381)	method change being requested. (see instructions)		
Individual	Partnership			
Corporation	S corporation	Depreciation or Amortization		
Controlled foreign corporation (Section 957)	Insurance company (Section 816(a))	Financial Products and/or Financial Activities of		
10/50 corporation (Section 904(d)(2)(E))	Insurance company (Section 831)	Financial Institutions		
Qualified personal service	Other (specify)►	X Other (specify) ►		
corporation (Section 448(d)(2))		SWITCH TO ACCRUAL BASIS OF ACCOUN	TING	}
X Exempt organization. Enter Code section ► 501 (C) (6)				
		ounting, the taxpayer must provide all information that is relevant ounting This includes all information requested on this Form pecifically requested. ested throughout this form.		_
<b>温Parti</b> 問 Information For Autor			Yes	
one designated automatic account requested change has no designated description of the change and cita  (a) Change No. 34  Do any of the scope limitations descriptions descriptions descriptions described has been described by the scope limitations described by the scope limitations described by the scope limitations described by the scope limitation of the scope limitations described by the scope limitation described by the scope limitation of the scope limitation described by the scope limitation of the scope limitation of the scope limitation described by the scope limitation of	ting method change number, excited automatic accounting methocition of the IRS guidance providin  (b) Other Descriptscribed in section 4.02 of Rev Pr	roc 2008-52 cause automatic consent to be unavailable for		
Note: Complete Part II below and then		prough E of this form (if applicable)	42.43.18	
		Tough E of this form (if applicable).	Yes	
		to which the requested change relates, or terminate its		
	ge (see instructions)?			X
	nt or former consolidated group in	which the applicant was a member during the applicable		X
h is the method of accounting the a	hich the applicant was a membe	an issue (with respect to either the applicant or any present r during the applicable tax year(s)) either (i) under		一位の
	Signature (s	ee instructions)		
Under penalties of perjury, I declare that I have exami contains all the relevant facts relating to the applica has any knowledge.	ned this application, including accompanying ation, and it is true, correct, and complete.	schedules and statements, and, to the best of my knowledge and belief, the applic Declaration of preparer (other than applicant) is based on all information of wh	:ation nich pre	parer
Filer	Jul 10-12-14	Preparer (other than filer/applicant)  Preparer (other than filer/applicant)	4	
Signatule and	date CO	Scott S. Mitchell		
Name and title (prin	t or type)	Name of Individual preparing the application (print or type)	. – – .	<del>-</del> -
		Melillo & Mitchell, LLC		
		6 Berkshire Boulevard, #301		
		Bethel, CT 06801		
		Name of firm preparing the application		

Form	3115 (Rev12-2009) NA	TI	ONAL SHOOTING	SPORTS	FOUNDATION	Ι	NC. 06-0860132	F	age 2
Part	Information Fo	r A	II Requests (contin	nued)				Yes	No
4 c	Is the method of account present or former consolunder examination (see	ıdăt	ed aroup in which the	applicant i	was a member du	ırin	ing (with respect to either the applicant or any ig the applicable tax year(s)) for any tax year		1
d	Is the request to change director consent to the fi	the ling	method of accounting of the request (see in	j being file structions)	d under the proce	du	res requiring that the operating division	: <u></u>	لتحت
	If 'Yes,' attach the conse								<u> </u>
е							or 120-day window period?		<u></u>
	If 'Yes,' check the box for	the a	applicable window perio	d and attac	h the required state	eme	ent (see instructions).		n
	90 day	l	120 day: Date ex					13 m	
f	If you answered 'Yes' to line 4a	, ent	er the name and telephone r			he			
	Name -			Telephone			Tax year(s) ►	احسطنة	12.4
_	·						n line 4f?		<b>↓</b>
5 a	tax year(s)) have any Fe	der	al income tax return(s	<u>)</u> before Ap	opeals and/or a Fe	app			X
	If 'Yes,' enter the name			Appea	ls officer and/or	L	counsel for the government, and the tax	1.5	12-
	year(s) before Appeals a	and/	or a Federal court.				T ()	10.19	
	Name •			Telephone			Tax year(s) ►	1 TO 1	
	• •		•				el for the government identified on line 5a?	1 1 2	175.55
C	Is the method of account court (for either the app year(s) the applicant wa	tıng lıcar s a	the applicant is requent of or any present or fo member) (see instruc	esting to charmer consolitions)?	nange an issue un olidated group in v	de wh:	r consideration by Appeals and/or a Federal ich the applicant was a member for the tax	\$1.51 <sub>01.0</sub> 2	4250
	If 'Yes', attach an expla							4:足	
6	statement that provides	eac	h narent corporation's	(a) name.	(b) identification i	nu	or former consolidated group, attach a mber, <b>(c)</b> address, and <b>(d)</b> tax year(s) during s office, and/or before a Federal court		
7	narthership or an S corr	ora re A	tion, is it requesting a ppeals, or before a Fe	change fro deral cour	om a method of a t, with respect to	ccc	limited liability company) treated as a punting that is an issue under consideration Federal income tax return of a partner,		
	If 'Yes,' the applicant is		-					<b>金数</b>	[2]
8 8	Does the applicable rever	ue p	orocedure (advance con change (see instruct	sent or auto	omatic consent) sta	te	that the applicant does not receive audit		X
	If 'Yes,' attach an expla			,				37.75	<b>建</b> 图
	Has the annlicant lits ni	ede ance	cessor, or a related page of consent) a change of	n method o	of accounting with	er in	either an automatic change procedure or a the past 5 years (including the year of the		X
l	If 'Yes,' for each trade of time (including the tax year of	or bu	usiness, attach a desc nange) and state whet	ription of e her the app	ach requested cha	ang	ge in method of accounting sent.		
•	If any application was w taxpayer but was not sign change, attach an expla	ed a	and returned to the IRS,	or denied, o or if the ch	or if a Consent Ag ange was not made	re e o	ement granting a change was sent to the r not made in the requested year of		
10	Does the applicant, its prequest) for a private le	ored tter	ecessor, or a related ruling, change in met	party curre	ntly have pending ounting, or technic	ar cal	ny request (including any concurrently filed advice?	- 建建	· X
I	olf 'Yes,' for each reques request (private letter ruli	t ati	tach a statement prov change in method of ac	iding the n counting, or	ame(s) of the taxp technical advice),	pay an	yer, identification number(s), the type of d the specific issue(s) in the request(s).	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
11								X	
	If 'Yes,' check the appropromplete Schedule A o	riate n pa	e boxes below to indicat	e the applic	ant's present and p	oro	posed methods of accounting. Also,	15 (A)	
	Present method:	X	· ·	Accru	al [		Hybrid (attach description)	[	
	Proposed method:	F	Cash	X Accru	al		Hybrid (attach description)		12.5

	13115 (Rev 12-2009) NATIONAL SHOOTING SPORTS FOUNDATION INC. 06-0860132	۲	age 3
, Pa	art I Information For All Requests (continued)	Yes	No
	If the applicant is either (i) <b>not</b> changing its overall method of accounting, or (ii) is changing its overall method of accounting and also changing to a special method of accounting for one or more items, attach a detailed and complete description for each of the following:  The item(s) being changed.		
		A4 44 4	77
	The applicant's present method for the item(s) being changed.	1	, ¥1
	The applicant's proposed method for the item(s) being changed.		7 -
	d The applicant's present overall method of accounting (cash, accrual, or hybrid).	は後い	
13	Attach a detailed and complete description of the applicant's trade(s) or business(es), and the principal business activity code for each. If the applicant has more than one trade or business as defined in Regulations section 1.446-1(d), describe, whether each trade or business is accounted for separately; the goods and services provided by each trade or business and any other types of activities engaged in that generate gross income; the overall method of accounting for each trade or business; and which trade or business is requesting to change its accounting method as part of this application or a separate application.  See Attachment 1	14. 14. 14. 14.	有源地位
14		X	
		- 7.4	
	a Has the applicant engaged, or will it engage, in a transaction to which section 381(a) applies (e.g., a reorganization, merger, or liquidation) during the proposed tax year of change determined without regard to any potential closing of the year under section 381(b)(1)?		X
ŀ	b If 'Yes,' for the items of income and expense that are the subject of this application, attach a statement identifying the methods of accounting used by the parties to the section 381(a) transaction immediately before the date of distribution or transfer and the method(s) that would be required by section 381(c)(4) or (c)(5) absent consent to the change(s) requested in this application.		1000年
16	Does the applicant request a conference with the IRS National Office if the IRS proposes an adverse response?		X
17	If the applicant is changing to either the overall cash method, an overall accrual method, or is changing its method of accounting for any property subject to section 263A, any long-term contract subject to section 460, or inventories subject to section 474, enter the applicant's gross receipts for the 3 tax years preceding the tax year of change.		
	1st preceding year ended: mo yr 2nd preceding year ended. mo yr 3rd preceding year ended: mo yr		
~ D	\$  \$  \$	法統	TELES P
+ at radio to	artille Information For Advance Consent Request	Yes	No
18	Is the applicant's requested change described in any revenue procedure, revenue ruling, notice, regulation, or other published guidance as an automatic change request?	建建	1
	If 'Yes,' attach an explanation describing why the applicant is submitting its request under advance consent request procedures.		
	Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists.		
	Attach a copy of all documents related to the proposed change (see instructions).		
21	Attach a statement of the applicant's reasons for the proposed change.	脚	1000
22	use the proposed method of accounting for the item being changed?	學好	<b>学题</b>
^-	If 'No', attach an explanation.		25.21
	a Enter the amount of user fee attached to this application (see instructions)   \$\black{\figs.}\$\$		
	b If the applicant qualifies for a reduced user fee, attach the required information or certification (see instructions).	Yes	T-C St.
, F <sub>1</sub> ,			No
	artily: Section 481(a) Adjustment	750 mm	12 - 12 1
24	Does the applicable revenue procedure, revenue ruling, notice, regulation, or other published guidance require the applicant to implement the requested change in method of accounting on a cut-off basis rather than a section 481(a) adjustment?	Œ.	X X
	Does the applicable revenue procedure, revenue ruling, notice, regulation, or other published guidance require the applicant to implement the requested change in method of accounting on a cut-off basis rather than a section 481(a) adjustment? If 'Yes,' do not complete lines 25, 26, and 27 below.		X
24 25	Does the applicable revenue procedure, revenue ruling, notice, regulation, or other published guidance require the applicant to implement the requested change in method of accounting on a cut-off basis rather than a section 481(a) adjustment? If 'Yes,' do not complete lines 25, 26, and 27 below.  Enter the section 481(a) adjustment. Indicate whether the adjustment is an increase (+) or a decrease (-) in	Œ.	X 3-7-7-1
	Does the applicable revenue procedure, revenue ruling, notice, regulation, or other published guidance require the applicant to implement the requested change in method of accounting on a cut-off basis rather than a section 481(a) adjustment? If 'Yes,' do not complete lines 25, 26, and 27 below.		X

		0860132		Page 4
Pai	रं।।४३, Section 481(a) Adjustment		Yes	No
26	If the section 481(a) adjustment is an increase to income of less than \$25,000, does the applicant elect to take amount of the adjustment into account in the year of change?	the entire		X
27	Is any part of the section 481(a) adjustment attributable to transactions between members of an affiliated group, a conso group, a controlled group, or other related parties?	lidated		X
Sch	nedule A - Change in Overall Method of Accounting (If Schedule A applies, Part I below must be co	mpleted.)	_1 - ~	<u> </u>
Pai	社際 Change in Overall Method (see instructions)			
1	Enter the following amounts as of the close of the tax year preceding the year of change. If none, state 'None.' Also, atta providing a breakdown of the amounts entered on lines 1a through 1g.	ich a statemer	nt -	
	See Attachment 2		ount	
i	a Income accrued but not received	\$	829,	914.
	Income received or reported before it was earned (such as advanced payments). Attach a description of the			
	income and the legal basis for the proposed method			None
	Expenses accrued but not paid (such as accounts payable)		701, 704,	
	d Prepaid expenses previously deducted			None
	Inventory on hand previously deducted and/or not previously reported		157,	
	9 Other amounts (specify). Attach a description of the item and the legal basis for its inclusion in the calculation of		131,	220.
•	the section 481(a) adjustment .		367,	477.
١	h Net section 481(a) adjustment (Combine lines 1a - 1g.) Indicate whether the adjustment is an increase (+) or decrease (-) in income. Also enter the net amount of this section 481(a) adjustment amount on Part IV, line 25		377,	
2	Is the applicant also requesting the recurring item exception under section 461(h)(3)?	pplicable, as aring the balar	n or oth	lose
Pā	Change to the Cash Method For Advance Consent Request (see instructions)			
	licants requesting a change to the cash method must attach the following information:			
	A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials used in carrying out the business.			
	An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regular	ations.		
Sch	hedule B – Change in Reporting Advance Payments (see instructions)			
1	If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 of Rev Pi 2004-1 CB 991, attach the following information:	roc 2004-34,		
	a A statement explaining how the advance payments meet the definition in section 4.01 of Rev Proc 2004-34.			
	b If the applicant is filing under the automatic change procedures of Rev Proc 2008-52, the information required by section Rev Proc 2004-34.	8.02(3)(a)-(c)	) of	
	c If the applicant is filing under the advance consent provisions of Rev Proc 97-27, the information required by section 8.0 Proc 2004-34.	3(2)(a)-(f) of F	Rev	
	If the applicant is requesting to change to the deferral method for advance payments described in Regulations section 1, attach the following.	451-5(b)(1)(ıı)	,	
	a A statement explaining how the advance payments meet the definition in Regulations section 1 451-5(a)(1).			
	b A statement explaining what portions of the advance payments, if any, are attributable to services, whether suc the provisions of goods or items, and whether any portions of the advance payments that are attributable to non-integral than five percent of the total contract prices. See Regulations sections 1.451-5(a)(2)(i) and (3).	h services are l	e integr less	al to
	c A statement explaining that the advance payments will be included in income no later than when included in gross receing the applicant's financial reports. See Regulations section 1.451-5(b)(1)(ii).	pts for purpose	es	

d A statement explaining whether the inventoriable goods exception of Regulations section 1.451-5(c) applies and if so, when substantial advance payments will be received under the contracts, and how the exception will limit the deferral of income

Form 3115 (Rev 12-2009)

#### Schedule C - Changes Within the LIFO Inventory Method (see instructions)

#### Part: General LIFO Information

Complete this section if the requested change involves changes within the LIFO inventory method. Also, attach a copy of all Forms 970, Application To Use LIFO inventory Method, filed to adopt or expand the use of the LIFO method.

- 1 Attach a description of the applicant's present and proposed LIFO methods and submethods for each of the following items:
- a Valuing inventory (e.g., unit method or dollar-value method).
- **b** Pooling (e.g., by line or type or class of goods, natural business unit, multiple pools, raw material content, simplified dollar-value method, inventory price index computation (IPIC) pools, vehicle-pool method, etc).
- c Pricing dollar-value pools (e.g., double-extension, index, link-chain, link-chain index, IPIC method, etc).
- d Determining the current-year cost of goods in the ending inventory (i.e., most recent acquisitions, earliest acquisitions during the current year, average cost of current-year acquisitions, or other permitted method).
- 2 If any present method or submethod used by the applicant is not the same as indicated on Form(s) 970 filed to adopt or expand the use of the method, attach an explanation.
- 3 If the proposed change is not requested for all the LIFO inventory, attach a statement specifying the inventory to which the change is and is not applicable.
- 4 If the proposed change is not requested for all of the LIFO pools, attach a statement specifying the LIFO pool(s) to which the change is applicable.
- 5 Attach a statement addressing whether the applicant values any of its LIFO inventory on a method other than cost. For example, if the applicant values some of its LIFO inventory at retail and the remainder at cost, identify which inventory items are valued under each method.
- 6 If changing to the IPIC method, attach a completed Form 970.

#### <u>Part II Change</u> in Pooling Inventories

- 1 If the applicant is proposing to change its pooling method or the number of pools, attach a description of the contents of, and state the base year for, each dollar-value pool the applicant presently uses and proposes to use.
- 2 If the applicant is proposing to use natural business unit (NBU) pools or requesting to change the number of NBU pools, attach the following information (to the extent not already provided) in sufficient detail to show that each proposed NBU was determined under Regulations section 1.472-8(b)(1) and (2):
- a A description of the types of products produced by the applicant. If possible, attach a brochure.
- b A description of the types of processes and raw materials used to produce the products in each proposed pool.
- c If all of the products to be included in the proposed NBU pool(s) are not produced at one facility, state the reasons for the separate facilities, the location of each facility, and a description of the products each facility produces.
- **d** A description of the natural business divisions adopted by the taxpayer. State whether separate cost centers are maintained and if separate profit and loss statements are prepared.
- e A statement addressing whether the applicant has inventories of items purchased and held for resale that are not further processed by the applicant, including whether such items, if any, will be included in any proposed NBU pool.
- f A statement addressing whether all items including raw materials, goods-in-process, and finished goods entering into the entire inventory investment for each proposed NBU pool are presently valued under the LIFO method. Describe any items that are not presently valued under the LIFO method that are to be included in each proposed pool.
- g A statement addressing whether, within the proposed NBU pool(s), there are items both sold to unrelated parties and transferred to a different unit of the applicant to be used as a component part of another product prior to final processing.
- 3 If the applicant is engaged in manufacturing and is proposing to use the multiple pooling method or raw material content pools, attach information to show that each proposed pool will consist of a group of items that are substantially similar. See Regulations section 1.472-8(b)(3).
- 4 If the applicant is engaged in the wholesaling or retailing of goods and is requesting to change the number of pools used, attach information to show that each of the proposed pools is based on customary business classifications of the applicant's trade or business. See Regulations section 1.472-8(c).

BAA

### Form 3115 (Rev 12-2009) NATIONAL SHOOTING SPORTS FOUNDATION INC. 06-0860132 Page 6 Schedule D - Change in the Treatment of Long-Term Contracts Under Section 460, Inventories, or Other Section 263A Assets (see Instructions)

Partil: Change in Reporting Income From Long-Term Contracts (Also con	nplete Part III on	pages 7 and 8.)	
1 To the extent not already provided, attach a description of the applicant's present and p reporting income and expenses from long-term contracts. Also, attach a representative actual deletion) for the requested change. If the applicant is a construction contractor, attach a construction activities.	roposed methods	for	
2 a Are the applicant's contracts long-term contracts as defined in section 460(f)(1) (see ins			
<b>b</b> If 'Yes,' do all the contracts qualify for the exception under section 460(e) (see instruction of line 2b is 'No,' attach an explanation.	ons)?	[	_YesNo
<sup>c</sup> If line 2b is 'Yes,' is the applicant requesting to use the percentage-of-completion method Regulations section 1.460-4(b)?	od using cost-to-c	ost under	Yes No
d If line 2c is 'No,' is the applicant requesting to use the exempt-contract percentage-of-contract percentage-of-		[	Yes No
completion factor.		illiacis	
If line 2d is 'No,' attach an explanation of what method the applicant is using and the authority		Г	٦., ٦.,
<ul> <li>3 a Does the applicant have long-term manufacturing contracts as defined in section 460(f).</li> <li>b If 'Yes,' attach an explanation of the applicant's present and proposed method(s) of accounting manufacturing contracts.</li> </ul>	for long-term	_	
<ul> <li>c Attach a description of the applicant's manufacturing activities, including any required in</li> <li>To determine a contract's completion factor using the percentage-of-completion method</li> </ul>		ufactured goods	•
a Will the applicant use the cost-to-cost method in Regulations section 1.460-4(b)?		[	Yes No
<b>b</b> If line 4a is 'No,' is the applicant electing the simplified cost-to-cost method (see section section 1.460-5(c))?	n 460(b)(3) and R	egulations _	
5 Attach a statement indicating whether any of the applicant's contracts are either cost-plus long-term contracts.		_	
Rantill Change in Valuing Inventories Including Cost Allocation Change	S (Also complete	e Part III on pag	es 7 and 8.)
	Attachment	3	
2 Attach a description of the inventory goods (if any) NOT being changed.		-	
2 Attach a description of the inventory goods (if any) NOT being changed.  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a	see instructions)		
<ul><li>2 Attach a description of the inventory goods (if any) NOT being changed.</li><li>3 a Is the applicant subject to section 263A? If 'No,' go to line 4a</li></ul>	see instructions):	[ [	Yes No
2 Attach a description of the inventory goods (if any) NOT being changed.  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a  b Is the applicant's present inventory valuation method in compliance with section 263A (     If 'No,' attach a detailed explanation	see instructions):		
2 Attach a description of the inventory goods (if any) NOT being changed.  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a	see instructions):	[ [	Yes No Inventory Not
<ul> <li>2 Attach a description of the inventory goods (if any) NOT being changed.</li> <li>3 a Is the applicant subject to section 263A? If 'No,' go to line 4a</li></ul>	see instructions):  Inve	ntory Changed	Yes No Inventory Not Being Changed Present
2 Attach a description of the inventory goods (if any) NOT being changed.  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a	see instructions):  Inve	ntory Changed	Yes No Inventory Not Being Changed Present
2 Attach a description of the inventory goods (if any) NOT being changed.  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a	Inverse Present method	ntory Changed	Yes No Inventory Not Being Changed Present
2 Attach a description of the inventory goods (if any) NOT being changed.  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a	Inve	ntory Changed	Yes No Inventory Not Being Changed Present
2 Attach a description of the inventory goods (if any) NOT being changed.  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a	Inve	ntory Changed	Yes No Inventory Not Being Changed Present
2 Attach a description of the inventory goods (if any) NOT being changed.  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a	Inve	ntory Changed	Yes No Inventory Not Being Changed Present
2 Attach a description of the inventory goods (if any) NOT being changed.  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a	Inverse Present method	ntory Changed	Yes No Inventory Not Being Changed Present
2 Attach a description of the inventory goods (if any) NOT being changed.  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a	Inverse Present method	ntory Changed	Yes No Inventory Not Being Changed Present
2 Attach a description of the inventory goods (if any) NOT being changed.  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a	Inverse Being C	ntory Changed	Yes No Inventory Not Being Changed Present
2 Attach a description of the inventory goods (if any) NOT being changed.  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a	Inverse Being C	ntory Changed	Yes No Inventory Not Being Changed Present
2 Attach a description of the inventory goods (if any) NOT being changed.  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a	Inverse Being C	ntory Changed  Proposed method	Yes No Inventory Not Being Changed  Present method
2 Attach a description of the inventory goods (if any) NOT being changed.  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a	Inverse Being C	ntory Changed  Proposed method	Yes No Inventory Not Being Changed  Present method
2 Attach a description of the inventory goods (if any) NOT being changed.  3 a Is the applicant subject to section 263A? If 'No,' go to line 4a	Present method  following information to the	ntory Changed Proposed method  on. (see instruction	Yes No Inventory Not Being Changed  Present method  ns).

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Page 7

| Method of Cost Allocation (Complete this part if the requested change involves either property subject to section 263A or long-term contracts as described in section 460 ( see the instructions).)

Section A - Allocation and Capitalization Methods

Attach a description (including sample computations) of the present and proposed method(s) the applicant uses to capitalize direct and indirect costs properly allocable to real or tangible personal property produced and property acquired for resale, or to allocate and, where appropriate, capitalize direct and indirect costs properly allocable to long-term contracts. Include a description of the method(s) used for allocating indirect costs to intermediate cost objectives such as departments or activities prior to the allocation of such costs to long-term contracts, real or tangible personal property produced, and property acquired for resale. The description must include the following. See Attachment 4

- 1 The method of allocating direct and indirect costs (i.e., specific identification, burden rate, standard cost, or other reasonable allocation method).
- 2 The method of allocating mixed service costs (i.e., direct reallocation, step-allocation, simplified service cost using the labor-based allocation ratio, simplified service cost using the production cost allocation ratio, or other reasonable allocation method).
- The method of capitalizing additional section 263A costs (i.e., simplified production with or without the historic absorption ratio election, simplified resale with or without the historic absorption ratio election including permissible variations, the U.S. ratio, or other reasonable allocation method).

#### Section B — Direct and Indirect Costs Required To Be Allocated

Check the appropriate boxes showing the costs that are or will be fully included, to the extent required, in the cost of real or tangible personal property produced or property acquired for resale under section 263A or allocated to long-term contracts under section 460. Mark 'N/A' in a box if those costs are not incurred by the applicant. If a box is not checked, it is assumed that those costs are not fully included to the extent required. Attach an explanation for boxes that are not checked.

		Present method	Proposed method
1	Direct material		
2	Direct labor		
3	Indirect labor		
4	Officers' compensation (not including selling activities)		
5	Pension and other related costs		
6	Employee benefits		
7	Indirect materials and supplies		
8	Purchasing costs		
9	Handling, processing, assembly, and repackaging costs		
10	Offsite storage and warehousing costs		
11	Depreciation, amortization, and cost recovery allowance for equipment and facilities placed in service and not temporarily idle.		
12	Depletion		
13	Rent		
14	Taxes other than state, local, and foreign income taxes		
15	Insurance		
16	Utilities		
17	Maintenance and repairs that relate to a production, resale, or long-term contract activity		
18	Engineering and design costs (not including section 174 research and		
	experimental expenses)		
19	Rework labor, scrap, and spoilage		
20	Tools and equipment		
21	Quality control and inspection		
22	Bidding expenses incurred in the solicitation of contracts awarded to the applicant		
23	Licensing and franchise costs		
24	Capitalizable service costs (including mixed service costs)	<u> </u>	
25	Administrative costs (not including any costs of selling or any return on capital)		
26	Research and experimental expenses attributable to long-term contracts		
27	Interest	_	
28	Other costs (Attach a list of these costs.)		

BAA

Page 8

Partilli Method of Cost Allocation (see instructions) (continued)

Section C - Other Costs Not Required To Be Allocated (Complete Section C only if the applicant is requesting to change its method for these costs.)

_		Present method	Proposed method
1	Marketing, selling, advertising, and distribution expenses		
2	Research and experimental expenses not included in Section B, line 26	-	
3	Bidding expenses not included in Section B, line 22		
4	General and administrative costs not included in Section B		
5	Income taxes		<u></u>
6	Cost of strikes		
7	Warranty and product liability costs		
8	Section 179 costs		
9	On-site storage		
10	Depreciation, amortization, and cost recovery allowance not included in Section B, line 11.		
	Other costs (Attach a list of these costs.)		
Sch	redule E - Change in Depreciation or Amortization (see instructions)		

Applicants requesting approval to change their method of accounting for depreciation or amortization complete this section. Applicants must provide this information for each item or class of property for which a change is requested.

Note: See the List of Automatic Accounting Method Changes in the instructions for information regarding automatic changes under sections 56, 167, 168, 197, 14001, 1400L, or former section 168. Do not file Form 3115 with respect to certain late elections and election revocations (see instructions).

	Is depreciation for the property determined under Regulations section 1.167(a)-11 (CLADR)?	
2	Is any of the depreciation or amortization required to be capitalized under any Code section (e.g., section 263A)? Yes If 'Yes,' enter the applicable section.	∐No
3	Has a depreciation, amortization, or expense election been made for the property (e.g., the election under section 168(f)(1), 179, or 179C)?	N
	a To the extent not already provided, attach a statement describing the property being changed. Include in the description the type of property, the year the property was placed in service, and the property's use in the applicant's trade or business or income-producing activity.	<b>-</b> 1
!	b If the property is residential rental property, did the applicant live in the property before renting it? Yes c is the property public utility property?	No
5	To the extent not already provided in the applicant's description of its present method, attach a statement explaining how the property is treated under the applicant's present method (e.g., depreciable property, inventory property, supplies under Regulations section 1.162-3, nondepreciable section 263(a) property, property deductible as a current expense, etc).	

- If the property is not currently treated as depreciable or amortizable property, attach a statement of the facts supporting the proposed change to depreciate or amortize the property.
- If the property is currently treated and/or will be treated as depreciable or amortizable property, the following information for both the present (if applicable) and proposed methods:
- a The Code section under which the property is or will be depreciated or amortized (e.g., section 168(g)).
- b The applicable asset class from Rev Proc 87-56, 1987-2 CB 674, for each asset depreciated under section 168 (MACRS) or under section 1400L; the applicable asset class from Rev Proc 83-35, 1983-1 CB 745, for each asset depreciated under former section 168 (ACRS); an explanation why no asset class is identified for each asset for which an asset class has not been identified by the applicant.
- c The facts to support the asset class for the proposed method.
- d The depreciation or amortization method of the property, including the applicable Code section (e.g., 200% declining balance method under section 168(b)(1)).
- e The useful life, recovery period, or amortization period of the property.
- f The applicable convention of the property.
- g A statement of whether or not the additional first-year special depreciation allowance (for example, as provided by section 168(k), 168(l), 168(m), 168(n), 1400L(b), or 1400N(d)) was or will be claimed for the property. If not, also provide an explanation as to why no special depreciation allowance was or will be claimed.

#### 2013

#### Form 3115 Attachments

Page 1

**Client NSSF** 

#### NATIONAL SHOOTING SPORTS FOUNDATION INC.

06-0860132

9/23/14

09:55AM

Attachment 1 Form 3115, Part II, Line 13 Description of Trade or Business

THE NATIONAL SHOOTING SPORTS FOUNDATION IS A NON PROFIT ORGANIZATION WHICH PROMOTES THE SHOOTING SPORTS AND FOSTERS A BETTER UNDERSTANDING OF RECREATIONAL SHOOTING.

#### Attachment 2 Form 3115, Schedule A, Part I Breakdown of Lines 1a - 1g

Line 1a Accounts Receivable	\$ 829,914. \$ 829,914.
Line 1c Accounts Payable Accrued Expenses Proxy Tax accrual Total	\$ -356,273. -1,019,878. -325,794. \$ -1,701,945.
<u>Line 1d</u> Prepaid Expenses	\$ 704,348. \$ 704,348.
Line 1f Inventory Total	\$ 157,226. \$ 157,226.
Line 1g Post Retirement Benefits Accrual	\$ -1,367,477. \$ -1,367,477.

Attachment 3
Form 3115, Schedule D, Part II, Line 1
Inventory Goods Being Changed

N/A

Attachment 4
Form 3115, Schedule D, Part III, Section A
Present and Proposed Methods to Capitalize Direct and Indirect Costs

N/A

#### NATIONAL SHOOTING SPORTS FOUNDATION Statement of Assets, Liabilities and Net Assets - Modified Cash Bas As of March 31,

		2013
ASSETS		
CURRENT ASSETS		
Cash and Cash Equivalents	\$	10,110,253
Investments		31,240,887
Total Current Assets		41,351,140
PROPERTY AND EQUIPMENT		
Land		187,683
Building and Improvements		2,245,647
Furniture, Fixtures and Equipment		223,776
Total Property and Equipment		2,657,106
Less: Accumulated Depreciation		1,136,076
Net Property and Equipment		1,521,030
OTHER ASSETS		
Cash Restricted for Retirement Benefits		240,889
Deposits and Advances		8,943
Total Other Assets		249,832
		\
TOTAL ASSETS	\$	43,122,002
LIABILITIES AND NET ASSETS		
LIABILITIES		
Shooting Range Workshop Deposits	\$	-
SHOT Show Deposits		4,521,440
Other Liabilities		74,100
Total Liabilities		4,595,540
UNRESTRICTED NET ASSETS		
Unrestricted Net Assets		38,420,829
Total Unrestricted Net Assets		38,420,829
	<del></del>	
TEMPORARILY RESTRICTED NET ASSETS		
Temporarily Restricted Net Assets		105,633
Total Temporarily Restricted Net Assets	<del></del>	105,633
TOTAL NET ASSETS		38,526,462
TOTAL LIABILITIES AND NET ASSETS	<del></del>	42 122 002
TOTAL DIADILITES AND HET ASSETS	\$	43,122,002

# NATIONAL SHOOTING SPORTS FOUNDATION Statement of Revenues, Expenses and Other Changes in Unrestricted Net Assets - Modified Cash Basis For the Year Ended March 31,

		2013
SUPPORT AND REVENUE		
SHOT Show Revenue	\$	22,238,604
Membership Dues	Ψ	3,572,184
Project Childsafe		726,508
Other Program Revenue (see schedule)		799,331
Total Support and Revenue		27,336,627
The state of the s	,	21,330,021
PROGRAM EXPENSES		
SHOT Show Expenses		7,753,437
Project Childsafe		968,539
Other Program Expenses (see schedule)		14,080,537
Total Program Expenses		22,802,513
OPERATING EXPENSES		-
Salaries		4,552,226
Payroll Taxes		329,694
Employee Benefits		941,745
Insurance		52,108
Occupancy Costs		360,322
Professional Services		508,899
Board and Committee Expenses		144,151
Temporary Personnel		64,603
Training and Development		37,323
Travel		56,777
T'elephone		36,027
Information Technology		171,947
Postage		22,717
Depreciation		93,342
Miscellaneous		51,915
Total Operating Expenses	\$	7,423,796

## NATIONAL SHOOTING SPORTS FOUNDATION Statement of Revenues, Expenses and Other Changes in Unrestricted Net Assets - Modified Cash Basis For the Year Ended March 31,

		2013
EXCESS/(DEFICIENCY) OF SUPPORT AND REVENUE OVER OPERATING EXPENSES		(2,889,682)
OTHER CHANGES IN UNRESTRICTED NET ASSETS		
Rental Income/(Loss)		8,926
Royalty Income		54,164
Interest and Dividends		888,454
Unrealized Gain/(Loss) on Investments		978,984
Realized Gain/(Loss) on Investments		(103,903)
Other Income		-
Total Other Changes in Unrestricted Net Assets		1,826,625
EXCESS OF SUPPORT AND REVENUE OVER EXPENSES	\$	(1,063,057)

### NATIONAL SHOOTING SPORTS FOUNDATION Statement of Revenue, Expenses and Other Changes in

Temporarily Restricted Net Assets - Cash Basis
For the Year Ended March 31,

	 2013	 2012	
SUPPORT AND REVENUE			
Contributions Total Support and Revenue	 105,633 105,633	\$ 	-
EXCESS OF SUPPORT AND REVENUE OVER EXPENSES	\$ 105,633	\$ _	-

#### NATIONAL SHOOTING SPORTS FOUNDATION Statement of Changes in Net Assets - Modified Cash Basis For the Year Ended March 31,

	 2013
UNRESTRICTED NET ASSETS, BEGINNING	\$ 39,483,886
Excess of Support and Revenue over Expenses UNRESTRICTED NET ASSETS, ENDING	\$ (1,063,057) 38,420,829
TEMOPRARILY RESTRICTED NET ASSETS, BEGINNING	\$ -
Excess of Support and Revenue over Expenses TEMPORARILY RESTRICTED NET ASSETS, ENDING	\$ 105,633 105,633

### NATIONAL SHOOTING SPORTS FOUNDATION, INC. NOTES TO THE FINANCIAL STATEMENTS MARCH 31, 2013 AND 2012

#### NOTE 1: NATURE OF ORGANIZATON

The Foundation is a not-for-profit organization that was formed for the purpose of developing an interest in, conducting research and accumulating information for a better understanding of shooting sports.

#### NOTE 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

#### **Basis of Accounting**

The Foundation prepares its financial statements on the modified cash basis of accounting, which is a comprehensive basis of accounting other than generally accepted accounting principles. Accordingly, revenue is recorded when received rather than when earned and expenses are recorded when paid rather than when the obligation is incurred.

Unrestricted net assets represent expendable funds available for operations which are not otherwise limited by donor restrictions. Temporarily restricted net assets consist of contributed funds subject to specific donor-imposed restrictions contingent upon specific occurrence of a future event or a specific passage of time before the Foundation may spend the funds. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets.