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Form **990-EZ** 

# Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-1150 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

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

Α	For the	2013 calend	dar year, or tax year beginning $10/01/13$ , and ending $09/30/14$				
В	Check if a	applicable	D Employer identification number				
	Address o	change					
	Name cha	ange	AREA VII AGEHR AMERICAN GUILD OF EN		<u> 36-</u>	3555511	
	Initial retu	ırn	Number and street (or P O box, if mail is not delivered to street address)  Room/suit	₽ E	•	one number	
	Terminate	ed	612 REDWOOD ST #B		952	<u>-461-3685</u>	
	Amended	l return	City or town, state or province, country, and ZIP or foreign postal code	F	Group	Exemption	
	Application	on pending	Marshall MN 56258	<u> </u>	Number <b>•</b>		
G		nting Method	X Cash	Check I	► X ıf	the organization is <b>not</b>	
ı		te: ▶ <u>N/A</u>		required	l to attac	ch Schedule B	
<u>J</u>	Tax-exe	empt status (cl	neck only one) — X 501(c)(3) 501(c)( ) (insert no ) 4947(a)(1) or 527	(Form 9	90, 990	EZ, or 990-PF)	
K	Form o	f organization	n: X Corporation Trust Association Other				
L			b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets			00 015	
_			are \$500,000 or more, file Form 990 instead of Form 990-EZ		<u>▶ \$</u>	98,015	
P	art I		ue, Expenses, and Changes in Net Assets or Fund Balances (see the	instructio	ns for F	Part I) -	
			If the organization used Schedule O to respond to any question in this Part I		<del></del>	1,686	
	1		gifts, grants, and similar amounts received rivice revenue including government fees and contracts		2	95,991	
	2	_		3	93,991		
	3	•	dues and assessments		4	83	
	4	Investment			-		
	5a		Int from sale of assets other than inventory 5a 5b		1 1		
	b	Gain or (loss)		5c			
	C	, ,		~			
	6	•	l fundraising events ne from gaming (attach Schedule G if greater than				
o.	a	\$15,000)	6a				
Revenue		•	ne from fundraising events (not including \$ of contributions		1 1		
eve	b		sing events reported on line 1) (attach Schedule G if the		1		
œ			gross income and contributions exceeds \$15,000)	255			
	c		expenses from gaming and fundraising events  6c	120			
	d		or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract		1		
	"	line 6c)	or (1000) from gaming and fortallosing overlap (and angeles and obtained	6d	135		
	7a	•	of inventory, less returns and allowances				
	b		f goods sold 7b		1		
	C	Gross profit	or (loss) from sales of inventory (Subtract line 76 from line 7a)		7c		
	8	Other reven	ue (describe in Schedule O)		8		
	9		ue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	•	9	97,895	
	10	Grants and	similar amounts paid (list in Schedule O)		10		
	11	Benefits par	d to or for members		11		
s	12	Salaries, oth	ner compensation, and employee benefits		12		
Jse	13	Professiona	I fees and other payments to independent contractors		13	460	
Expenses	14	Occupancy,	rent, utilities, and maintenance		14	<u> </u>	
ŭ	15	Printing, pul	plications, postage, and shipping		15	664	
	16	Other exper	nses (describe in Schedule O)		16	116,276	
	17	Total exper	nses. Add lines 10 through 16	17	117,400		
	18	Excess or (	deficit) for the year (Subtract line 17 from line 9)		18	19,505	
Net Assets	19	Net assets	or fund balances at beginning of year (from line 27, column (A)) (must agree with				
Ass		end-of-year	figure reported on prior year's return)		19	89,004	
let.	20	Other chang	ges in net assets or fund balances (explain in Schedule O)		20	<del></del>	
2	21	Net assets	or fund balances at end of year Combine lines 18 through 20	<u> </u>	21	69,499	

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2013)

Parl	t II	Balance Sheets (see the instructions for	r Part II)				
_		Check if the organization used Schedule C	to respond to any	question in this Part I	II.		X
					ginning of year		(B) End of year
<b>22</b> Ca	sh, savır	ngs, and investments			89,004	22	69,499
<b>23</b> Lar	nd and b	uildings			0	23	
24 Oth	her asse	ts (describe in Schedule O)			0	24	
25 To	tal asse	ts			89,004	25	69,499
26 To	tal liabil	ities (describe in Schedule O)			0	26	,, C
		or fund balances (line 27 of column (B) must a	agree with line 21)		89,004	27	69,499
Pari		Statement of Program Service Acco		e the instructions for			Expenses
	-	Check if the organization used Schedule C	•		′ —	(Re	guired for section
—– What is	s the ora	anization's primary exempt purpose?		4.000.00.00.00.00.00.00.00.00.00.00.00.0		,	(c)(3) and 501(c)(4)
	•	OF MUSIC WITH HANDBELLS					anizations and section
		ganization's program service accomplishments for	or each of its three la	roest program services		_	7(a)(1) trusts; optional
		y expenses. In a clear and concise manner, desc		• . •			others)
		ed, and other relevant information for each progr	•	rided, the flamber of		101 0	outers )
		L FESTIVAL TO EDUCATE YOUTHS AND ADU		UCIC CDEAMED NIMI			<del></del>
	HANDBEI		DLIS ABOUT THE M	OSIC CREATED WITH			
	UWNDDEI	TI2					
(C	rants \$	). If this amount include	os foreign grants, abo	ok horo	<b>~</b> [	200	103,512
			es foreign grants, che			28a	103,312
		CAMPS TO EDUCATE YOUTHS ABOUT THE MUS	SIC CREATED WITH		-		
I	HANDBEI	LLS					
					, ,		0 104
	rants \$	) If this amount include				29a	2,134
		ED RINGING CAMPS FOR ADULTS TO EDUCAT	IE THEM ABOUT TH	E MUSIC			
(	CREATEI	WITH HANDBELLS					
					( <del></del> -)		
	rants \$	) If this amount include	es foreign grants, che	ck here	<b>•</b>	30a	3,738
		am services (describe in Schedule O)					
	rants \$	) If this amount include		ck here	<b></b>	31a	
		ram service expenses (add lines 28a through 3			<u> </u>	32	109,384
Parl	t IV	List of Officers, Directors, Trustees, and Key Check if the organization used Schedule O to re	remployees (list each	n one even if not compe in in this Part IV	nsated — see the	e instruc	ctions for Part IV)
			(b) Average	(c) Reportable	(d) Heath ben	efits,	<del></del>
		(a) Name and title	hours per week	compensation (Forms W-2/1099-MISC)	contributions to e benefit plans,		(e) Estimated amount of other compensation
			devoted to position	(If not paid, enter -0-)	deferred compe	nsation	other compensation
SAN	DY M	JLLANEY					
_CHP			1.00	0		0	
LOF	RI PO	TTER					
	ST CH		1.00	0		0	
DAF	RCY RI	EICH					
CHA	AIR E	LECT	1.00	0		0	
JEF	AN SCI	HUELLER					
TRE	EASURI	ER	2.00	0		0	<u> </u>
JUI	OI MOI	RTON					
SEC	CRETAL	RY	1.00	0		0	)
			<u> </u>				
							<u> </u>
			<u> </u>			•	<del>                                     </del>
			1				1
DAA			<u> </u>	L	<u> </u>		5 000 E7 (2042

So Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a deliated description of each activity in Schedule O (see institutions) and the provided in the	Pa	other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part	V		
detailed description or such activity in Schedule O  Were any spinificant changes made to the organization of sovering documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)  35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?  If "Yes," to mis 55a, has the urganization filed a Form \$90-If for the year? If "No," provide an explanation in Schedule O (see in 1955, high the urganization filed a Form \$90-If for the year? If "No," provide an explanation in Schedule O (see in 1955, high the urganization filed a Form \$90-If for the year? If "No," provide an explanation in Schedule O (see in 1955, high the urganization filed a Form \$90-If for the year? If "No," provide an explanation in Schedule O (see in 1955, high the urganization filed in 19		mondono los factos de enganazaron dece concesso e la responsa la enganazaron de e		Yes	No
34 Were any significant changes made to the organizance or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)  35 Dot the organization have unreflected bisiness gross income of \$1,000 or more during the year from business archites (such as those reported on lines 2, 6a, and 7a, among others)?  35 If "Yes," to line 35a, bus the organization field a Form 990£" for the year? If "Yes," browde an explanation in Schedule O (Was the organization a section 501(k/4), 501(k/6), or 901(k/6), or 901(k/6	33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a			
scopy of the amended documents of they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)  33a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others?)  b (I*Yes,* to line 35a, has the organization filed a Form 900-T for the year? If No.* growde an explanation in Schedule O (with the part of		· · · · · · · · · · · · · · · · · · ·	33		X
change on Schedule O (see instructions) 3a Dd the organization have uncleated bisuness gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)  b "Yes," to line 55a, has the organization field a Form 890-T for the year? II "No," provide an explanation in Schedule O  Was the organization a section 501(x4), 301(x)5), or 501(x)6(s) organization subject to section 603(e) hotice, reporting, and proxy fair requirements during the year? II "Yes," complete Schedule C, Part III  3b Dd the organization indepto seleptacible parts of Schedule N  3a Enter amount of political expenditures, direct or indexed, as described in the instructions    3b Dd the organization brown from, or make any location, a translation or syndificial disposation of net assets during the year? II "Yes," complete Schedule N  3b Dd the organization file Form 1120-PCL for this year?  3b Dd the organization brown from, or make any location, or make any location, or make any location, or make any location and still outstanding at the end of the tax year covered by this return?  3b II "Yes," complete Schedule P, Part II and enter the total amount involved  3c Section 501(x)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911    3c Section 501(x)(3) and 501(x)(4) organizations. Enter amount of tax imposed on the organization during the year under section 4911    3c Section 501(x)(3) and 501(x)(4) organizations. Enter amount of tax imposed on the organization during the year under section 3911    3c Section 501(x)(3) and 501(x)(4) organizations. Enter amount of tax imposed on the organization during the year of the translation of the organization and the section 4912    3c Section 501(x)(3) and 501(x)(4) organizations. Enter amount of tax imposed on the organization during the year or the tax section 4911    3c Section 501(x)(3) and 501(x)(4) organizations. Enter amount of tax imposed on the organization and the provide tax of the	34				
33a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (cut has those reported on lines 2, 6a, and 7a, among others?)  b If "Yes," to line 35a, has the organization fled a Form \$90.1 for the year? If No.1 provide an explanation in Schedule 0  Was the organization a section \$01 (o/4), \$01 (o/5), \$01 (o/5), or \$01 (o/5) or \$01 (					
activities (such as those reported on lines 2, 6a, and 7a, among others)?  bit "Yes": for ine 35a, has the organization filed of form 990-15 for the year? If "No," provide an explanation in Schedule O  Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and prior by a requirements during the year? If "Yes," complete Schedule C, Part III  35b  Did the organization undergo a liquidation, dissolution, trimmation, or significiant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N  36c  Tenter amount of political expenditures, direct or indiecd, as described in the instructions    Did the organization file Form 1120-PCL for this year?  37a  37b  Did the organization file Form 1120-PCL for this year?  37b  Did the organization file Form 1120-PCL for this year?  37b  Did the organization file Form 1120-PCL for this year?  37c  37d  Did the organization file Form 1120-PCL for this year?  37d  Did the organization file Form 1120-PCL for this year?  37d  Did the organization file Form 1120-PCL for this year?  37d  Did the organization file Form 1120-PCL for this year?  37d  Did the organization file Form 1120-PCL for this year?  37d  Did the organization file Form 1120-PCL for this year?  37d  Did the organization file Form 1120-PCL for this year?  37d  Did the organization file Form 1120-PCL for this year?  37d  Did the organization file Form 1120-PCL for this year?  37d  Did the organization file Form 1120-PCL for this year?  37d  Did the organization file Form 1120-PCL for this year?  37d  Did the organization file Form 120-PCL for this year?  1 If Yes, Year year year year year year of the organization of the year?  1 If Yes, Year year year year year year year year y			34		X
b   If Yes, **Io line 35a, has the organization filed a Form 890.** for the year? If If No.** provide an explanation in Schedule O  Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If If Yes, **Complete Schedule C, Part III 35c   during the year? If If Yes, **Complete Schedule C, Part III 35c   during the year? If If Yes, **Complete Schedule C, Part III 35c   during the year? If Yes, **Complete schedule C, Part III 35c   during the year? If Yes, **Complete schedule C, Part III 35c   during the year? If Yes, **Complete Schedule C, Part III 35c   during the year? If Yes, **Complete Schedule C, Part III 35c   during the year of Schedule C, Part III 35c   during the year over dearning the year over de	35a		25-	,	х
c Was the organization a socian 501(c)4, 501(c)5, or 501(c)6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 356  36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete parts of Schedule N 36  37a Enter amount of political expenditures, direct or indirect, as described in the instructions	<b>h</b>				
reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 35.    Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 37a    Their amount of political expenditures, direct or indirect, as described in the instructions    13b   10d the organization file Form 1120-PDL for this year?    33b   3d   3d   3d   3d   3d   3d			335	-	<b></b> -
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N  37a Enter amount of political expenditures, direct or indirect, as described in the instructions    37b Did the organization form from, or make any loans to, any officer, director, frustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38a Did the organization form from, or make any loans to, any officer, director, frustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38b User of the form 1120-PDL for this year?  38ction 501(c)(2) organizations. Enter amount of tax imposed on the organization during the year under section 4911  38ction 501(c)(2) organizations included on line 9  38ction 501(c)(2) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction during the year, or did it engage in an excess benefit transaction during the year, or did it engage in an excess benefit transaction during the year, or did it engage in an excess benefit transaction during the year, or did it engage in an excess benefit transaction during the year, or did it engage in an excess benefit transaction during the year, or did it engage in an excess benefit transaction organization among the year under sections 4912, 4955, and 4958  39ction 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization or site organization and party to a prohibited tax shelter transaction of the year and still tax on line 40c reimbursed by the organization or served by the organization or served by the organization and the year and the year. The organization flore organization free than the trans	·	-	35c	,	х
during the year? If "Yes," complete applicable parts of Schedule N  27a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a   37b	36		1000		
The comparization file Form 1120-POL for this year?  37b Did the organization file Form 1120-POL for this year?  38b Did the organization brown from, or make any loans to, any officer, director, frustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38b Did the organization brown from, or make any loans to, any officer, director, frustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38c United the property of the end of the tax year covered by this return?  38c United the property of the end of the tax year covered by this return?  38c United the end of the tax year covered by this return?  38c United the end of the tax year covered by this return?  38c United the end of the tax year covered by this return?  38c United the end of the tax year covered by this return?  38c United the end of the tax year covered by this return?  38c United the end of the tax year covered by this return?  38c United the end of the tax year covered by this return?  38c United the end of the tax year covered by this return?  38c United the end of the tax year covered by this return and the end of the tax year covered by this return and the end of the tax year covered by the end of the tax year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I the end of tax properties of the end of the end organization and the tax on the end organization and the end organization ended to the end organization or the end organization and the end organization ended the end organization and the end organization ended the end organization and the end organization ended the end of the end organization ended the end of the end of the end organization ended the end organization ended the end organization ended the end of the end of the end organization ended the end organization ended the end organization ended the end organizat	••		36		х
any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38a  39 Section 501(c)(7) organizations. Enter  39 Initiation fees and capital contributions included on line 9  39 Section 501(c)(3) organizations included on line 9  39 Section 501(c)(3) organizations included on line 9  39 Section 501(c)(3) organizations. Enter  39 Section 501(c)(3) organizations included on line 9  39 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶  5 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 excess benefit transaction during the year of did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Form 990 or 990-E27 If Yes,* complete Schedule L, Part I  6 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  6 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reminused by the organization. All organizations are in care of by JEAN SCHUELLER  6 All organizations All and the during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8886-T  40 II List the states with which a copy of this return is filed by MIN  21 The organizations All and the during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8886-T  40 II Located at by Massittat.  40 A any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country by Located and prior the foreign country by Located and pri	37a				
any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  If 'Yes,' complete Schedule L, Part II and enter the total amount involved  Section 501(c)(7) organizations. Enter  Initiation (ses and capital contributions included on line 9  Section 501(c)(3) arganizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 ▶  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 ▶  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction during the year, or did it engage in an excess benefit transaction any of its pine forms 990 or 900-E27 if 'Yes,' complete Schedule L, Part I  Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912.  4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912.  4965, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c rembursed by the organization. All any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T  11. List the states with which a copy of this return is filed ▶  MN ZIP + 4 ▶ 56258  Located at ▶ MARSITAL  Any time during the calendar year, did the organization have an interest in or a signature or other authonity over a financial account in a foregen country >	b	, , , , , , , , , , , , , , , , , , , ,	37b		X
b If "Yes," complete Schedule L, Part II and enter the total amount involved  38 Section 501(c)(7) organizations. Enter  a Initiation fees and capital contributions included on line 9  50 Gross recepts, included on line 9, for public use of club facilities  Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911    Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955    Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4956    Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I organization anagers or disqualified persons during the year under sections 4912, 4955, and 4958  Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization or an interest or a significant organization or all organizations of the organizations or a significant organization organizations books are in care of > JEAN SCHUELLER	38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶		any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
a Intitation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 40 Section 501(c(x)) and surplations. First amount of tax imposed on the organization during the year under section 4911 ►	b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
b Gross receipts, included on line 9, for public use of club facilities  40a Section 501(c)(3) organizations Enter amount of fax imposed on the organization during the year under section 4911 ▶	39	Section 501(c)(7) organizations. Enter			
Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶	а	Initiation fees and capital contributions included on line 9			ĺ
section 4911 ▶ section 4912 ▶ section 4915 ▶ section 4915 ▶ section 4955 ▶  b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction of uring the year, or did it engage in an excess benefit transaction or year that has not been reported on any of its prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I  c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization  e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  1 telephone in Park Schulzer  1 the organization's books are in care of ▶ JEAN SCHULLER  1 the organization's books are in care of ▶ JEAN SCHULLER  1 the organization's books are in care of ▶ JEAN SCHULLER  1 the organization's books are in care of ▶ JEAN SCHULLER  1 the organization's books are in care of ▶ JEAN SCHULLER  1 the organization account in a foreign country (such as a bank account, securities account, or other financial account)?  1 if "Yes," enter the name of the foreign country ▶  2 see the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an entire to the foreign country ▶  3 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  c Did the organization receive a	b	Gross receipts, included on line 9, for public use of club facilities			
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Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Yes  Jid the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  Did the organization receive any payments for indoor tanning services during the year?  If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  Judge Torganization have a controlled entity within the meaning of section 512(b)(13)?  Judge Torganization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c	L	X
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Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  c Did the organization receive any payments for indoor tanning services during the year?  d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here			
Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  c Did the organization receive any payments for indoor tanning services during the year?  d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of		and enter the amount of tax-exempt interest received or accrued during the tax year			
completed instead of Form 990-EZ  b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  c Did the organization receive any payments for indoor tanning services during the year?  d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of				Yes	No
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ c Did the organization receive any payments for indoor tanning services during the year? d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		ĺ	
completed instead of Form 990-EZ c Did the organization receive any payments for indoor tanning services during the year? d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of		completed instead of Form 990-EZ	44a	<b> </b>	X
c Did the organization receive any payments for indoor tanning services during the year?  d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	b				
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of		·			X
explanation in Schedule O  44d  45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	С		44c		X
Did the organization have a controlled entity within the meaning of section 512(b)(13)?  45a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	d		44-3	ĺ	1
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of		·		<b> </b>	<del> </del>
meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	45a		45a	<u> </u>	X
	45b				
Form 990-EZ (see instructions)				1	
DAA Form <b>990-EZ</b> (2		Form 990-E∠ (see instructions)			X

Form	990-EZ (2013) AREA VII AGEHR AMERI	ICAN GUILD	OF E	EN 36-35	55511			F	Page 4
								Yes	No
46	Did the organization engage, directly or indirectly, in political to send debte for subline office? If "You " complete School of		s on beha	alf of or in oppo	sition			6	x
Pa	to candidates for public office? If "Yes," complete Schedule rt VI Section 501(c)(3) organizations only		<del>.</del>			<u> </u>	1 4	0 ]	<u> </u>
, .	All section 501(c)(3) organizations must an	swer questions 47	7–49b an	nd 52, and cor	nplete the	tables for l	ines		
	50 and 51.								
	Check if the organization used Schedule O	to respond to any	questio	n in this Part \	<u> </u>				
47	Did the organization engage in lobbying activities or have a	section 501(h) elec	tion in eff	fect during the t	ax			Yes	No
	year? If "Yes," complete Schedule C, Part II	, ,		•			4	7	X_
48	Is the organization a school as described in section 170(b)	(1)(A)(II)? If "Yes," c	omplete S	Schedule E			4	8	X
49a	Did the organization make any transfers to an exempt non-	-charitable related oi	rganızatıo	n?			4	9a	X_
b	If "Yes," was the related organization a section 527 organization						_	9b	<u> </u>
50	Complete this table for the organization's five highest comp								
	employees) who each received more than \$100,000 of con								
	(a) Name and title of each employee	(b) Average hours per week	con	Reportable npensation		th benefits, is to employee		ated amo	
	(a) Name and the or each employee	devoted to position	(Forms V	N-2/1099-MISC)	benefit deferred c	benefit plans, and efferred compensation			lion
No	one			-		<u> </u>			
			ļ .						
			1		-				
	<del></del>		<del>                                     </del>		<u> </u>		1		
			ļ · · · · · ·						
f	Total number of other employees paid over \$100,000			<b>-</b>		_			
51	Complete this table for the organization's five highest comp \$100,000 of compensation from the organization. If there is			ctors who each	received m	ore than			
	(a) Name and business address of each independent or			(b) Tvo	e of service		(c) Con	npensation	
- No	ne			(5).)p	-	-	(0) 0011		<u> </u>
140	116		1						
					-				
			]						
			[						
		_							
			1						
d	Total number of other independent contractors each receive	ving over \$100,000	<u> </u>		<del></del>				
52	Did the organization complete Schedule A? Note. All section	on 501(c)(3) organiz	ations an	d 4947(a)(1)			·		
	nonexempt charitable trusts must attach a completed Sche	edule A					► X \	res 📗	No
	r penalties of perjury. I declare that I have examined this return, inc						ledge and b	oelief, it is	
true,	correct, and complete Declaration of prepare/(other than officer) is	s based on all informati	ion of whic	n preparer nas ar	<del></del>				
Sigr	Signature of officer	<u> </u>			<u> 12-9</u>	1-14			
Here				D.	o.c				
11614	Type or print name and litle								
-	Print/Type preparer's name	Preparer's signature			Date	Chec		TIN	
Paid	LISA ZMESKAL, CPA	ISA ZMESKAL, CE	PA.		12/	- 1	I	003511	15
Prep	parer Firm's name Hoffman & Brobst					Firm's EIN		09785	
Use	Only Firm's address > PO Box 548								
		258				Phone no	507-5	32-57	<u> 135</u>
May	the IRS discuss this return with the preparer shown above?	See instructions				-	<b>•</b>	Yes	No No
							Form 1	990-EZ	_ (2013)

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

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) 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

AREA VII AGEHR AMERICAN GUILD OF EN

Employer identification number 36-355511

Pa	rt 1	Reaso	on for Pub	olic Charity	Status (All organizations	s must co	mplete	this pa	art.) Se	e inst	ruction	s.		
The	orgar	nization is not	a private fou	ndation becaus	se it is (For lines 1 through 11,	check only	one box	.)						
1		A church, con	vention of cl	nurches, or ass	sociation of churches described	In section	170(b)(1	)(A)(i).						
2	П	A school desc	cribed in sec	tion 170(b)(1)	(A)(ii). (Attach Schedule E)									
3	$\sqcap$	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).												
4	H	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,												
•	ш	city, and state	_					•	<i>,</i> , , ,	•		•	·	
5		•		for the henefit	of a college or university owner	d or operat	ed by a go	overnme	ental uni	t descri	oed in			
•				(Complete Par		- o. opo.a.								
6	$\Box$				governmental unit described in	section 17	'0(b\/1\/A	<b>\</b> \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\						
	X	•	,	•					from the	genera	Loublic			
7	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)													
	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II )													
8	H	An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross												
9		_			npt functions—subject to certa							33		
					nd unrelated business taxable									
					30, 1975 See section 509(a)(2				() 110111 L	usilies	,es			
40	$\Box$		-		exclusively to test for public sa	-								
10	H	•	•	•	exclusively for the benefit of, to	-				out the				
11					ted organizations described in									
											30011011			
	509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h  a Type I b Type II c Type III—Functionally integrated d Type III—Non-functionally integrated													
_				Type II	c ∐ Type III–Functio ganization is not controlled dire			,	_ • •				ateu	
е	Ш	,		•		•					•			
	other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)													
				d a written det	ermination from the IRS that it	ıs a Tyna l	Type II (	or Type	III sunna	ortina				
t		organization,			emination from the tho that it	is a Type i	Type II, t	or Type	ш заррс	or unig				
_		•			ation accepted any gift or contri	hution from	any of th	10						
g		_	_	as the organiza	ation accepted any girt of contin	Dation non	rany Or u	ic						
		following per		or indirectly o	ontrols, either alone or togethe	r with norse	one decor	ibed in (	'u) and				Yes	No
			-	•	=	i willi persi	Jils desci	ibed iii (	ii) ailu			110(1)	163	110
		` '		•	e supported organization? ibed in (i) above?							11g(ı) 11g(ıı)	+-	_
				-	described in (i) or (ii) above?							11g(iii		<del>                                     </del>
		• •		•	the supported organization(s)							[1.19/	н	Ь
<u>_h</u>					(iii) Type of organization	(IV) Is the	organization	(v) Did y	you notify	(11/4)	s the	(vii) Amount	of monet	204
(1		e of supported janization	,,	i) EIN	(described on lines 1–9		(iv) is the organization in col (i) listed in your		nization in	organizat		sup		ary
					above or IRC section	governing	document?	, , ,	of your port?		zed in the			
					(see instructions))	Yes	No	Yes	No	Yes	No			
<u></u>				-		1.03	1	· • •					<u> </u>	
(A)														
 (B)												<del></del>	_	
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Tota	al			····										

Form 990 or 990-EZ.

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

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

Sec	tion A. Public Support						
Caler	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	575	1,435	6,959	966	1,93	1 11,866
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	575	1,435	6,959	966	1,93	1 11,866
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4				_		11,866
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	575	1,435	6,959	966	1,93	1 11,866
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4.42	77	189	93	8	3 884
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						12,750
12	Gross receipts from related activities, etc	(see instructions)				12	
13	First five years. If the Form 990 is for the	organization's first	t, second, third, for	urth, or fifth tax yea	ar as a section 501	(c)(3)	
	organization, check this box and stop her	e					▶ □
Sec	tion C. Computation of Public Su	ipport Percent	tage				
14	Public support percentage for 2013 (line 6	, column (f) divided	by line 11, colum	n (f))		14	93.07%
15	Public support percentage from 2012 Sch	edule A, Part II, lin	e 14			15	90.44%
16a	33 1/3% support test—2013. If the organ	ization did not che	ck the box on line	13, and line 14 is 3	33 1/3% or more, o	heck this	
	box and stop here. The organization qual	ifies as a publicly s	upported organiza	ition			<b>▶ X</b>
b	33 1/3% support test—2012. If the organ	ization did not che	ck a box on line 13	3 or 16a, and line 1	5 is 33 1/3% or mo	ore,	
	check this box and stop here. The organiz	zation qualifies as	a publicly supporte	ed organization			▶ □
17a	10%-facts-and-circumstances test—201	3. If the organizati	on did not check a	box on line 13, 16	ia, or 16b, and line	14 is	
	10% or more, and if the organization meet	ts the "facts-and-ci	rcumstances" test	, check this box an	d stop here. Expla	ain in	
	Part IV how the organization meets the "fa organization	ects-and-circumsta	nces" test. The org	ganization qualifies	as a publicly supp	ported	▶ []
b	10%-facts-and-circumstances test—201	12. If the organizati	on did not check a	box on line 13, 16	a, 16b, or 17a, and	d line	_
	15 is 10% or more, and if the organization	meets the "facts-a	ind-circumstances	" test, check this b	ox and stop here.		
	Explain in Part IV how the organization me	eets the "facts-and-	-cırcumstances" te	st The organization	n qualifies as a pu	iblicly	▶ □
40	supported organization	d not shoot a barr	on line 12 16a 16	h 17a ar 47h		_	
18	<b>Private foundation.</b> If the organization distributions	и пот спеск а вох (	эт ште тз, Тба, Тб	ม, เ/a, or 1/b, che	eck this dox and se	e	▶ []

### Schedule A (Form 990 or 990-EZ) 2013 AREA VII AGEHR AMERICAN GUILD OF EN 36-3555511

Page 3

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

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

Sec	tion A. Public Support	quality drider to	ic tests listed i	ociow, picase c	ompiete i art i	·· <i>)</i>		
	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) T	Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	-						
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b				-			
8	Public support (Subtract line 7c from							
	line 6)		<u> </u>		<u> </u>			
	tion B. Total Support			1==	Г			
	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) T	Total
9	Amounts from line 6			1			<u> </u>	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b							
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
13	Total support. (Add lines 9, 10c, 11, and 12)							
14	First five years. If the Form 990 is for the	organization's firs	t, second, third, fo	ourth, or fifth tax ve	ar as a section 50	1(c)(3)		
	organization, check this box and stop her	-	.,	, , -		.(0)(0)		▶ □
Sec	tion C. Computation of Public Su	ipport Percen	tage					
15	Public support percentage for 2013 (line 8	, column (f) divide	d by line 13, colun	nn (f))		15		%
16	Public support percentage from 2012 Sch	edule A, Part III, II	ne 15			16		%
Sec	tion D. Computation of Investme	nt Income Pe	rcentage					
17	Investment income percentage for 2013 (I	ine 10c, column (f	) divided by line 1:	3, column (f))		17		%_
18	Investment income percentage from 2012					18		%
19a	33 1/3% support tests—2013. If the orga							
	17 is not more than 33 1/3%, check this b							▶ [
b	33 1/3% support tests—2012. If the orga							, —
	line 18 is not more than 33 1/3%, check the	-	_	•		-		
20_	Private foundation. If the organization di	d not check a box	on line 14, 19a, or	19b, check this be	ox and see instruc	tions	<del></del>	<b>&gt;</b>

Schedule A (Form 990 or 990-EZ) 2013 AREA VII AGEHR AMERICAN GUILD OF EN 36-3555511

Page 4

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

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

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

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

116,276

Open to Public Inspection

Name of the organization

AREA VII AGEHR AMERICAN GUILD OF EN

Employer identification number 36-3555511

Form 990-EZ, Part I, Line 16 - Other Expenses								
Description Amount								
Expenses								
OFFICE SUPPLIES	\$	1,509						
FESTIVAL EXPENSES	\$	101,331						
MEETING EXPENSE	\$	5,036						
FINANCE CHARGE	\$	50						
YOUTH CAMPS	\$	2,134						
DIRECTORS SEMINAR	\$	1,025						
GIFTS	\$	1,453						
ADVANCED RINGING	\$	3,738						
Non-investment Depreciation	\$	0						

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

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

Total \$

Form **4562** 

Department of the Treasury

(99)

## **Depreciation and Amortization**

(Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

OMB No 1545-0172

achment quence No 179

Internal Revenue Service
Name(s) shown on return

AREA VII AGEHR AMERICAN GUILD OF EN

Identifying number 36-355511

	AREA VI	II AGEHR AF	MERICAN G	תדדה	OF EN			36-	<u> </u>	2211
	ss or activity to which this form relates	•								
	direct Depreciat				170					
Pa	rt! Election To Expen Note: If you have a	-	_			ompl	oto Bort			
1	Maximum amount (see instruction		, complete Fa	it v bei	ore you co	ompi	ele Pari	1. ————————————————————————————————————	1	500,000
2	Total cost of section 179 property	,	e instructions)						2	300,000
3	Threshold cost of section 179 property			instruction	nne)				3	2,000,000
4	Reduction in limitation Subtract lir				J113)				4	2,000,000
5	Dollar limitation for tax year Subtract lin		-		senarately s	ee insti	ructions		5	
6	(a) Description		1 1033, CIRCI -0- 11 III		(business use			Elected cost	-	
				,	•	- ,,			$\neg \neg$	
<del></del>			• • • • • • • • • • • • • • • • • • • •					-		
7	Listed property Enter the amount	from line 29	•			7				
8	Total elected cost of section 179 p		ts in column (c). lir	nes 6 and	i 7				8	
9	Tentative deduction Enter the sm		, ,						9	
10	Carryover of disallowed deduction	from line 13 of your	2012 Form 4562				_		10	
11	Business income limitation Enter	•		ss than z	ero) or line :	5 (see	instruction	ns)	11	
12	Section 179 expense deduction A		•		•	•		,	12	
13	Carryover of disallowed deduction	to 2014 Add lines 9	and 10, less line	12	•	13				
Note	Do not use Part II or Part III below									
Pa	rt II Special Depreciati	on Allowance a	nd Other Dep	reciatio	on (Do no	t inc	ude liste	d prope	rty.) (	See instructions.)
14	Special depreciation allowance for	qualified property (o	ther than listed pr	operty) pl	laced in ser	vice				<del>" -</del>
	during the tax year (see instruction	ns)							14	
15	Property subject to section 168(f)(	1) election							15	
16	Other depreciation (including ACR	S)							16	77
_Pa	rt III MACRS Depreciat	ion (Do not ınclu	ude listed prope	erty)(S	ee instru	ctions	s.)			
			Sect	ion A						
17	MACRS deductions for assets pla-	ced in service in tax	years beginning b	efore 201	3				17	258
18	If you are electing to group any assets placed							<b>▶</b>		<u></u>
	Section B—A	ssets Placed in Sei	I	r	ar Using the	Gen	eral Depre	ciation S	ystem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depre (business/investme only-see instruct	ent use	(d) Recovery period	(e) C	Convention	(f) Metho	od	(g) Depreciation deduction
19a	3-year property									
<u>b</u>	5-year property									
c	7-year property									
d_	10-year property									
<u>e</u>	15-year property	1								
<u>f</u>	20-year property									
g	25-year property				25 yrs	<b> </b>		S/L		· <del>-</del>
h	Residential rental				27 5 yrs.		MM	S/L		· · · · · · · · · · · · · · · · · · ·
	property				27 5 yrs		MM	S/L		<del></del>
i	Nonresidential real				39 yrs	<u> </u>	MM	S/L		
	property	L	<u> </u>				MM	S/L		
		sets Placed in Serv	ice During 2013	Tax Year	Using the	Altern	ative Dep	reciation	Syster	<u>n</u>
<u>20a</u>	Class life	1			<u>-</u>			S/L		
	12-year				12 yrs			S/L		<del></del>
	40-year	<u> </u>	<u> </u>		40 yrs		MM	S/L		
	rt IV Summary (See ins									
21	Listed property Enter amount from								21	_ <del></del>
22	Total. Add amounts from line 12,						iter here			<b>.</b>
	and on the appropriate lines of you				nstructions	S	<u> </u>		_22	335
23	For assets shown above and place		the current year, e	nter the		l .				
	portion of the basis attributable to	section 263A costs				23		_		