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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

OMB No 1545-0047 2014 Open to Public Inspection

<u>A</u> _	For the	2014 calendar year, or tax year beginning , and ending			<del></del>
В	Check if appl	c Name of organization E'VILLE IRON STREET RODS LIMITED		D Employer	identification number
	Address char	nge INC.			
	Name chang	Doing business as	Deem/outs	= =	813892
$\equiv$	Initial return	Number and street (or P O box if mail is not delivered to street address)  P.O. BOX 3011	Room/suite	E Telephone 812 -	568-7962
吕	Final return/	City or town, state or province, country, and ZIP or foreign postal code			
$\sqsubseteq$	terminated	EVANSVILLE IN 47730		<b>G</b> Gross rece	ents \$ 458,409
Ш	Amended ref				
	Application p	pending	H(a) Is this a gro	oup return for su	bordinates? Yes X No
			H(b) Are all sub-	ordinates includ	ded? Yes No
			If "No,"	attach a list (	see instructions)
1	Tax-exempt	t status 501(c)(3) <b>X</b> 501(c) ( <b>4</b> ) <b>4</b> (insert no ) 4947(a)(1) or 527			
J	Website	www.frogfollies.org	H(c) Group exe	mption number	<u> </u>
ĸ	Form of orga	anization X Corporation Trust Association Other ▶ L	Year of formation $ {f 1} $	974	M State of legal domicile IN
F	art I	Summary			
		refly describe the organization's mission or most significant activities			
		EXHIBITS VINTAGE CARS TO THE PUBLIC TO PROMOTE INTEREST	IN VINTAG	3E	
鍋		AUTOMOBILES AND TRUCKS. PROMOTES AUTOMOBILE SAFETY.			
Revenue	1				
€§.	2 CH	neck this box $lacktriangle$ if the organization discontinued its operations or disposed of more than 25%	of its net assets	s	
. 60	3 Nt	umber of voting members of the governing body (Part VI, line 1a)		3	46
ΞŔ,	4 Nu	umber of independent voting members of the governing body (Part VI, line 1b)		4	46
Ē	<b>5</b> To	otal number of individuals employed in calendar year 2014 (Part V, line 2a)		5	0
	i 6 τα	otal number of volunteers (estimate if necessary)		6	200
2	7a To	otal unrelated business revenue from Part VIII, column (C), line 12		7a	0
C.	b Ne	et unrelated business taxable income from Form 990-T, line 34		7b	0
-		ontributions and grants (Part VIII, line 1h)	Prior Yea		Current Year
<u>a</u>	6 8 Cd			3,380	371
nue	<b>9</b> Pr	ogram service revenue (Part VIII, line 2g)			0
ě	10 In	vestment income (Part VIII, column (A), lines 3, 4,,and 7d		133	151
Œ	11 Ot	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		9,175	153,197
	12 To	otal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,688	153,719
	13 Gr	rants and similar amounts paid (Part IX, column (A), lines 1–3)		6,490	51,440
	14 Be	enefits paid to or for members (Part IX, column (A), line 4)	1	8,746	21,883
Ś	15 Sa	alaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<del> </del>		0
Expenses	<b>16a</b> Pr	ofessional fundraising fees (Part IX, column (A), line 11e)			
ĝ	. <b>b</b> To	otal fundraising expenses (Part IX, column (D), line 25) ▶ 0			
ш	17 Ot	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		9,076	18,559
	18 To	otal expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		4,312	91,882
	19 Re	evenue less expenses. Subtract line 18 from line 12		1,624	61,837
ō	S		Beginning of Cu		End of Year
sset	e 20 To	otal assets (Part X, line 16)		5,092	186,929
Net Assets or	<b>21</b> To	otal liabilities (Part X, line 26)	10	5 000	106 000
		et assets or fund balances Subtract line 21 from line 20	12	5,092	186,929
	Part II	Signature Block			
		itties of perjury, I declare that I have examined this return, including accompanying schedules and stateme t, and complete. Declaration of preparer (other than officer) is based on all information of which preparer h			wledge and belief, it is
	de, correc	t, and complete Declaration of preparer (differ than officer) is based of all minormation of which preparer in			8-2013
٥:		Signature of officer		Date	0-2013
	gn		T TO KITT	Date	
Ho	re	RODNEY WYATT PRESI	DENI		
		Type or print name and title  Print/Type preparer's name  Preparer's signature	Date	10:	f PTIN
Pa	:			Check	LJ"
_	anaror F	MISTY L. MASSEY, CPA MISTY L. MASSEY, CPA		/15 self-em	
	e Only	Firm's name BROWN, SMITH & SETTLE, LLC CPA'S		rm's EIN	35-1471726
JS	- 1	777 OAK HILL ROAD			812-424-3388
_		Firm's address	<u>  F</u>	Phone no	<del></del>
_	<del></del>	discuss this return with the preparer shown above? (see instructions)			Yes No
\r0I	r Paperwo	rk Reduction Act Notice, see the separate instructions			Form 990 (2014)

orm	990 (2014) E'VILLE IRON STREET RODS LIMITED 35-1813892	Page 2
Pa	rt III Statement of Program Service Accomplishments	( <del>T</del> )
	Check if Schedule O contains a response or note to any line in this Part III	X
	Briefly describe the organization's mission STATE PUBLIC TO PROMOTE INTEREST IN VINTAGE CUTOMOBILES AND TRUCKS. PROMOTES AUTOMOBILE SAFETY.	
	<del></del>	<del></del>
2	Did the organization undertake any significant program services during the year which were not listed on the	Yes X No
	prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O	i les vi iao
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
•	services?	Yes X No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported	
E	(Code ) (Expenses \$ 64,583 including grants of \$ 42,500 ) (Revenue \$ XHIBITS VINTAGE CARS TO THE PUBLIC TO PROMOTE INTEREST IN VINTAGE CUTOMOBILES AND TRUCKS. PROMOTES AUTOMOBILE SAFETY.	)
4b	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$	
4c	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$	)
4d	Other program services (Describe in Schedule O )	
	(Expenses \$ 16,890 including grants of \$ 8,940 ) (Revenue \$	)
4e	Total program service expenses ▶ 81,473	

Pa	art IV Checklist of Required Schedules			
:. <u>×</u>			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		ľ	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	I		
	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,	1		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		1	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	ì		
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted		İ	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u> </u>
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets		:	
	reported in Part X, line 16° If "Yes," complete Schedule D, Part IX	11d		<u> </u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	1 <u>2a</u>		_ <u>X</u> _
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	12b		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
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		<u> </u>
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		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	if "Yes," complete Schedule G, Part III	19	<b> </b>	_ <u>X</u> _
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<b></b> -	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	L	

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

Form	990 (2014) E'VILLE IRON STREET RODS LIMITED 35-1813892		P	age <b>4</b>
Pa	rt IV Checklist of Required Schedules (continued)		гт	
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			7.7
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			v
	employees? If "Yes," complete Schedule J	23	<del>  </del>	<u> </u>
24a	· · · · · · · · · · · · · · · · · · ·			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	<b>1</b>		v
	through 24d and complete Schedule K. If "No," go to line 25a	24a	<del>-</del>	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		1	
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a		25-	1	х
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	$\vdash$	<u> </u>
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?	25b		X
	If "Yes," complete Schedule L, Part I	230	$\vdash$	- 41
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or	26		x
	disqualified persons? If "Yes," complete Schedule L, Part II	20_		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	-		
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
-	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	] ]	х
a b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
•	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
•	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31	ļ	_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32	ļ	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	ļ	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			۱
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	├	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	+	<del>                                     </del>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36_	<del> </del>	<del>  -</del>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	37		x
20	Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	31	<del> </del>	<del>  *</del> -
38	Dig the organization complete ochequie o and provide explanations in ochequie o for Part VI, lines i to and	1	1	ı

14a 14b X

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

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Pε	art VI Go	vernance, Management, and Disclosure For each "Yes" response to lines 2 through	7b b	elow, an	d for a "N	0"	
		ponse to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in S	ched	ule O S	ee instruc	tions	(F)
500		ck if Schedule O contains a response or note to any line in this Part VI					X
Sec	LIIOII A. GOVE	erning Body and Management				Yes	No
1a	Enter the numb	per of voting members of the governing body at the end of the tax year	1a	46			
		terial differences in voting rights among members of the governing body, or					1
		body delegated broad authority to an executive committee or similar					1
		olain in Schedule O					•
b	Enter the number	per of voting members included in line 1a, above, who are independent	1b	46			1
2		director, trustee, or key employee have a family relationship or a business relationship with					1
	*	er, director, trustee, or key employee?			2		Х
3	Did the organiz	ation 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		X
4	Did the organiz	ation make any significant changes to its governing documents since the prior Form 990 was filed?			4		X
5		ation become aware during the year of a significant diversion of the organization's assets?			5		X
6		ation have members or stockholders?			6		X
7a	Did the organiz	ation have members, stockholders, or other persons who had the power to elect or appoint					
	one or more m	embers of the governing body?			7a		X
b	Are any govern	ance decisions of the organization reserved to (or subject to approval by) members,					
	stockholders, o	r persons other than the governing body?			7b	Ĺ	X
8	Did the organiz	ation contemporaneously document the meetings held or written actions undertaken during the year by	the fo	llowing			
а	The governing	body?			8a	X	<u> </u>
b	Each committe	e with authority to act on behalf of the governing body?			8b	X	ļ
9	Is there any off	icer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					ľ
	the organizatio	n's mailing address? If "Yes," provide the names and addresses in Schedule O			9	L	X
Sec	tion B. Polic	ies (This Section B requests information about policies not required by the Interna	ıl Re	evenue (	Code)		т
						Yes	No
10a	-	ation have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the	organization have written policies and procedures governing the activities of such chapters,					1
	affiliates, and b	ranches to ensure their operations are consistent with the organization's exempt purposes?			10b		<del> </del>
11a	Has the organi	zation provided a complete copy of this Form 990 to all members of its governing body before filing the f	orm?		11a		X
b		nedule O the process, if any, used by the organization to review this Form 990					ļ
12a	Did the organiz	ation have a written conflict of interest policy? If "No," go to line 13			12a		X
b		directors, or trustees, and key employees required to disclose annually interests that could give rise to c	onflic	ts?	12b		<del> </del>
С		ation regularly and consistently monitor and enforce compliance with the policy? If "Yes,"				l	
	describe in Sch	nedule O how this was done			12c		<del> </del>
13	_	ation have a written whistleblower policy?			13	<u> </u>	X
14	-	ation have a written document retention and destruction policy?			14		X
15		s for determining compensation of the following persons include a review and approval by					
_		ersons, comparability data, and contemporaneous substantiation of the deliberation and decision?				;	<b>∮</b> •
a	_	on's CEO, Executive Director, or top management official			15a	<del> </del>	X
b		or key employees of the organization			15b		<u> </u>
46-	_	15a or 15b, describe the process in Schedule O (see instructions)					
16a	=	ation invest in, contribute assets to, or participate in a joint venture or similar arrangement			40-		x
<b>.</b>		entity during the year?			16a	-	<u> </u>
þ		organization follow a written policy or procedure requiring the organization to evaluate its					I
		joint venture arrangements under applicable federal tax law, and take steps to safeguard the			16h	1	İ
Sec	tion C. Disc	exempt status with respect to such arrangements?			_   16b	<b></b>	Ь
<u> 17</u>		with which a copy of this Form 990 is required to be filed  IN					
18		equires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(	3)s 01	ntv)			
· <del>-</del>		blic inspection. Indicate how you made these available. Check all that apply	.,5 01	·· <i>11</i>			
	Own webs						
19		nedule O whether (and if so, how) the organization made its governing documents, conflict of interest po	licv :	and			
		needed of whether (and it so, now) the organization made its governing documents, connict of interest potents available to the public during the tax year.	y, c				
20		, address, and telephone number of the person who possesses the organization's books and records.	•				
	AREN HARRI						
	AUBSTADT	IN 47639	,	8	12-56	8 - 1	480

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

(A) Name and Title	(B) Average hours per week (list any hours for	bo of	(C) Positi (do not check m box, unless pers officer and a din			s both r/truste	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(1, 2, 100 mee)	organization and related organizations
(1) DON BURCH										
	1.00									
MEMBER AT LARGE	0.00	X	<u> </u>					0	0	0
(2) STACY WAGNER										
}	1.00			İ						
ROD RUN CHAIRMAN	0.00	X						0	0	0
(3) ROBERT HILL										
	1.00				1					
ACTIVITIES	0.00	X						0	0	0
(4) JIM REED									•	
	1.00									
CHARITIES	0.00	X	<u>L</u>	L				0	0	0
(5) CARL HALL										
	1.00									
MEMBERSHIP	0.00	X			l			0	0	0
(6) RODNEY WYATT										
}	1.00	1	1	l	ł	1				
PRESIDENT	0.00			X				0	0	0
(7) MAURICE BERENDES										
	1.00								,	
SECRETARY	0.00			X				0	0	0
(8) BILL HARRIS		1				] ]		]		
	1.00									
TREASURER	0.00			X	l			0	0	0
(9) BOB BRUNING										
<b>,</b>	1.00			}						
VICE PRESIDENT	0.00			X				0	0	0
(10)										
(11)			-		-	$\vdash$				
DAA				—	Щ-			1		- 990

Pa	rt VII Section A. Officers	, Directors, Tru	stees	s, Ke	у Ег	nplo	yees	, an	nd Highest Compensated I	Employees (continued)	
	(A) Name and title	(B) (C)  Average Position  hours per (do not check more than one box, unless person is both ai officer and a director/trustee hours for					s both	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(12)											
(13)							-				
(14)											
(15)											
(16)											
(17)							:				
(18)											
(19)											
1b c	Sub-total Total from continuation shee	ets to Part VII, S	ection	on A	1	<u>!</u>	Į.	<b>&gt;</b>			
<u>d</u> 2	Total (add lines 1b and 1c)  Total number of individuals (increportable compensation from			to th	iose	liste	d abo	ve)	who received more than \$10	00,000 of	LV-2 I N-
3	Did the organization list any <b>fo</b> employee on line 1a? If "Yes,"	complete Schedu	ıle J	for s	uch i	ndıv	idual	-	-		yes No
4	For any individual listed on line organization and related organ individual	izations greater t	han S	150	,000	? If "	Yes,'	' cor	mplete Schedule J for such		4 X
5	Did any person listed on line 1a for services rendered to the or	ganization? If "Ye								······	5 X
Secti 1	ion B. Independent Contracto Complete this table for your fiv compensation from the organiz	e highest compe									
		(A) I business address	npei	isau	טו ווכ	i ine	Cale	lluai		(B) tion of services	(C) Compensation
			_								
	<del></del>		-					-	<del></del>		
2	Total number of independent or received more than \$100,000 (								listed above) who	0	
DAA									<u> </u>		Form 990 (2014

35-1813892 Page 9 Form 990 (2014) E'VILLE IRON STREET RODS LIMITED Part VIII Statement of Revenue Oheck if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax (C) (A) Unrelated Total revenue exempt function business under sections 512-514 revenue revenue 1a Contributions, Gifts, Grants and Other Similar Amounts 1a Federated campaigns 235 1b **b** Membership dues 1c c Fundraising events d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 136 1f \$ g Noncash contributions included in lines 1a-1f 371 h Total. Add lines 1a-1f Program Service Revenue Busn Code 2a b f All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, 151 151 and other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (ii) Personal 6a Gross rents Less rental exps Rental inc or (loss) Net rental income or (loss) Gross amount from (i) Secunties (ii) Other sales of assets other than inventor Less cost or other basis & sales exps c Gain or (loss) Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) 457,887 See Part IV, line 18 304,690 b Less direct expenses c Net income or (loss) from fundraising events 153,197 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses h c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b

153,719

151

0

0

C

All other revenue Total. Add lines 11a-11d

Total revenue. See instructions

	rt IX Statement of Functional Ex				
Secti	on 501(c)(3) and 501(c)(4) organizations must co			ete column (A)	
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21	51,440	51,440		<del></del>
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22			,	<del></del>
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
4	Individuals See Part IV, lines 15 and 16 Benefits paid to or for members	21,883	21,883		
5	Compensation of current officers, directors,	21,003	22/003		
•	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				<del> </del>
9	Other employee benefits				
10	Payroll taxes				
11 a	Fees for services (non-employees)  Management				
b	Legal				<del></del>
c	Accounting	732		732	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	0.073		9,073	<del> </del>
13	Office expenses	9,073		9,073	
14 15	Information technology				
16	Royalties Occupancy				
17	Travel		-		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,374	2,374	•	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,741	1,741	· · · · · · · · · · · · · · · · · · ·	
23	Insurance Other expenses, Itemize expenses not covered	3,835	3,835		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	Bank Charges	604		604	
b	Appreciation-Gifts-Sympat	200	200		
С					
d					
е	All other expenses				
25	Total functional expenses Add lines 1 through 24e	91,882	81,473	10,409	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2014)

35-1813892

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 48,006 60,142 Cash-non-interest bearing 136,310 60,596 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 14,528 other basis Complete Part VI of Schedule D 10a 4,354 10c 2,613 11,915 10b b Less accumulated depreciation 11 Investments—publicly traded securities 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments-program-related See Part IV, line 11 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 186,929 125,092 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 of Schedule D 0 0 26 Total liabilities. Add lines 17 through 25 X and Organizations that follow SFAS 117 (ASC 958), check here ▶ **Net Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 186,929 125,092 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 125,092 186,929 33 33 Total net assets or fund balances 186,929 125,092 Total liabilities and net assets/fund balances

orn	1990 (2014) E'VILLE IRON STREET RODS LIMITED 35-1813892			Pag	<u>e 12</u>
Pa	Reconciliation of Net Assets				
	C'heck if Schedule O contains a response or note to any line in this Part XI				$\prod$
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1!	53,7	<u> 19</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		91,8	
3	Revenue less expenses Subtract line 2 from line 1	3		51,8	337
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12	25,0	92
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	18	36,9	29
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			1	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			1	
	Schedule O		1 1	1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>x</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		,,,,,,	1	
	reviewed on a separate basis, consolidated basis, or both			1	
	Separate basis Consolidated basis Both consolidated and separate basis			Ī	
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis			Ţ.	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	n 990	(2014)

### **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

▶ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ 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

► Complete if the organization is described below.

· 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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• 5	Section 501(c)(4), (5), or (6) organizations Complete Part III							
	e of organization E'VILLE IRON STREET	RODS LIMITED		Employer ident	ification number			
	INC.			35-18138				
Pa	rt I-A Complete if the organization is exem	pt under section 501(c)	or is a section	527 organizatio	n			
1	Provide a description of the organization's direct and indirect	political campaign activities in I	Part IV					
2	Political expenditures			▶ \$				
3	Volunteer hours							
Pa	rt I-B Complete if the organization is exem	pt under section 501(c)	(3).					
1	Enter the amount of any excise tax incurred by the organizat	ion under section 4955		<b>&gt;</b> \$				
2	Enter the amount of any excise tax incurred by organization	managers under section 4955		▶ \$				
3	If the organization incurred a section 4955 tax, did it file Form	n 4720 for this year?			Yes No			
	Was a correction made?				Yes No			
	If "Yes," describe in Part IV	-tdaytion 504(a)	event anti-	= F01/a\/2\				
	rt I-C Complete if the organization is exem			n 501(c)(s).				
1	Enter the amount directly expended by the filing organization	for section 527 exempt function	ו	▶ .				
_	activities			▶ \$				
2	Enter the amount of the filing organization's funds contribute	d to other organizations for sect	ion	<b>▶</b> \$				
,	527 exempt function activities	<b>5</b>						
3	Total exempt function expenditures Add lines 1 and 2 Enter	nere and on Form 1120-POL,		<b>▶</b> \$				
4	line 17b			Ψ Ψ	☐ Yes ☐ No			
5	<ul> <li>Did the filing organization file Form 1120-POL for this year?</li> <li>Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing</li> </ul>							
3	organization made payments. For each organization listed, e		_					
	the amount of political contributions received that were prom							
	as a separate segregated fund or a political action committee	•						
		(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political			
	(a) Name	(b) Address	(0) 2114	filing organization's	contributions received and			
				funds If none, enter -0-	promptly and directly			
					delivered to a separate political organization. If			
					none, enter -0-			
1)								
•								
2)		_						
3)								
4)								
5)								
6)					İ			
			<u> </u>					
n	and a control of the control of the Anna Anna Anna Anna Anna Anna Anna Ann	100 au 000 E7						

che	edule C (Form 990 or 990-EZ) 2014	LLE IRON ST	REET RODS	LIMITED	35-1813	892 Page 2
_	rt II-A Complete if the organ				filed Form 5768	(election under
	<u>'section 501(h)).</u>	<del> </del>		<del></del>	1 1) / l	d arasin manchada
, (	Check ▶ ☐ if the filing organiza					group members
. ,	name, address, EIN					
	Check ▶ ☐ If the filing organiza			troi provisior		(h) Affiliated
	Limits on Lo The term "expenditures"	obbying Expendit " means amounts p			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence p	public opinion (grass roc	ots lobbying)			
b	Total lobbying expenditures to influence a	legislative body (direct	lobbying)			
С	Total lobbying expenditures (add lines 1a	and 1b)				
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add	lines 1c and 1d)				
f	f Lobbying nontaxable amount Enter the a	mount from the followin	g table in both			+
	columns			l		
ſ	If the amount on line 1e, column (a) or (b) i	is: The lobbying nor	ntaxable amount is:			
	Not over \$500,000	20% of the amour	it on line 1e			1
Ī	Over \$500,000 but not over \$1,000,000	\$100,000 plus 159	% of the excess over \$50	00,000		•
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 109	% of the excess over \$1,	000,000		1
Γ	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5%	of the excess over \$1,5	00,000		1
Γ	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25	% of line 1f)				
	Subtract line 1g from line 1a If zero or les					
i	i Subtract line 1f from line 1c If zero or les	s, enter -0-				
j	j If there is an amount other than zero on e	either line 1h or line 1i, d	lid the organization file	Form 4720		
	reporting section 4911 tax for this year?					Yes No
		4-Year Averag	ing Period Under s	section 501(h)	)	
	(Some organizations that m					olumns below.
	(001110 01 921112200110 11121 111		nstructions for lin			
		Lobbying Expendit	ures During 4-Yea	r Averaging P	eriod	
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	( <b>d)</b> 201	14 <b>(e)</b> Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount					
	(150% of line 2a, column(e))					
С	Total lobbying expenditures		,			
d	d Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))		,			

Schedule C (Form 990 or 990-EZ) 2014

f Grassroots lobbying expenditures

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Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT file (election under section 501(h)).	ed F	orm	5768			
For on	ich "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a	)		(b)	)	
		'es	No		Amo	unt	
a \	During the year, did the filing organization attempt to influence foreign, national, state or local egislation, including any attempt to influence public opinion on a legislative matter or eferendum, through the use of foliunteers?						
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?						
d N	Mailings to members, legislators, or the public?						
	Publications, or published or broadcast statements?						
f (	Grants to other organizations for lobbying purposes?						
g [	Direct contact with legislators, their staffs, government officials, or a legislative body?						
h f	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i (	Other activities?						
j 1	otal Add lines 1c through 1i						
2a [	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						•
	f "Yes," enter the amount of any tax incurred under section 4912				_		
c l	f "Yes," enter the amount of any tax incurred by organization managers under section 4912		[				
d l	f the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5 501(c)(6).	5), c	rsec	tion			
						Yes	No
1 V	Vere substantially all (90% or more) dues received nondeductible by members?			Γ	1	Х	1
	Old the organization make only in-house lobbying expenditures of \$2,000 or less?				2		Х
	Old the organization agree to carry over lobbying and political expenditures from the prior year?				3		X
Part		5), c	or sec	ction			
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR answered "Yes."				ne 3	, is	
1 [	Dues, assessments and similar amounts from members		1				
2 9	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of					_	
	political expenses for which the section 527(f) tax was paid).						
a (	Current year		2a				
<b>b</b> (	Carryover from last year		2b				
<b>c</b> 1	otal		2c				
3 A	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				·
<b>4</b> 1	f notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the						
6	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying						
	and political expenditure next year?		4				
5 7	axable amount of lobbying and political expenditures (see instructions)		5				
Part							
Provide	e the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line	es 1	and				
2 (see	instructions), and Part II-B, line 1. Also, complete this part for any additional information						

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Page 4

Part IV Supplemental Information (continued)

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

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

11c, 11d, 11e, 11f, 12a, or 12b.

Open to Public

its instructions is at waw irs gov/form990

OMB No 1545-0047

► Attach to Form 990.
► Information about Schedule D (Form 990) and its instructions is at www.irs.qov/form990.

Employer Identification number Name of the Organization E'VILLE IRON STREET RODS LIMITED 35-1813892 INC. Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (b) Funds and other accounts (a) Donor advised funds 1 Total number at end of year Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a 2b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes No and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

	E IRON STR				35-1813		Page <b>2</b>
Part III Organizations Maintai	ning Collection	s of Art, His	storical Tr	easures, c	or Other Sin	nilar Assets	(continued)
3 Using the organization's acquisition, acc collection items (check all that apply)	ession, and other red	cords, check an	y of the follow	ring that are a	a significant use	of its	
a Public exhibition	d	Loan or e	exchange prog	grams			
b Scholarly research	е	<b>—</b>		-			
c Preservation for future generations							
4 Provide a description of the organization	's collections and ex	plain how they f	urther the org	anization's e	xempt purpose i	n Part	
XIII	·	•					
5 During the year, did the organization soli	cit or receive donation	ons of art, histor	rical treasures	, or other sim	nılar		
assets to be sold to raise funds rather th	an to be maintained	as part of the o	rganization's	collection?			Yes No
Part IV Escrow and Custodial							
Complete if the organization	ation answered "	'Yes" to Forr	n 990, Par	t IV, line 9	, or reported	an amount	on Form
990, Part X, line 21							
1a Is the organization an agent, trustee, cus	todian or other interi	mediary for con	tributions or o	ther assets r	not		
included on Form 990, Part X?							Yes No
b If "Yes," explain the arrangement in Part	XIII and complete th	e following table	е				
							Amount
c Beginning balance						1c	
d Additions during the year						1d	
<ul> <li>Distributions during the year</li> </ul>						1e	
f Ending balance						1f	
2a Did the organization include an amount of	on Form 990, Part X,	line 21, for esc	row or custod	lial account li	ability?		Yes No
<b>b</b> If "Yes," explain the arrangement in Part	XIII Check here if the	e explanation h	as been prov	ided in Part >	KIII		
Part V Endowment Funds.					_		
Complete if the organize	ation answered "	Yes" to Forr	n 990, Par	t IV, line 1	0	<del></del>	<del></del>
	(a) Current yea	r (b)	Pnor year	(c) Two yes	ars back (d	) Three years back	(e) Four years back
1a Beginning of year balance				ļ			
<b>b</b> Contributions				<u> </u>		<del>_</del>	<del></del>
c Net investment earnings, gains, and					1		
losses							
d Grants or scholarships				<u> </u>			<u> </u>
<ul> <li>Other expenditures for facilities and</li> </ul>							1
programs				<del> </del>			<del></del>
f Administrative expenses							
g End of year balance				<u> </u>			
2 Provide the estimated percentage of the	-	ance (line 1g, c	olumn (a)) he	ld as			
a Board designated or quasi-endowment							
b Permanent endowment ▶	%						
c Temporarily restricted endowment ▶	%						
The percentages in lines 2a, 2b, and 2c	•						
3a Are there endowment funds not in the po	issession of the orga	inization that are	e neid and ad	ministered to	or the		Van Na
organization by							Yes No
(i) unrelated organizations							3a(i)
(ii) related organizations		- d O-b - d d-	DO.				3a(ii)
b If "Yes" to 3a(ii), are the related organiza	•						
4 Describe in Part XIII the intended uses of Part VI Land, Buildings, and E		ndowment tuno	is		<del> </del>		
	• •	Vos" to Form	n 000 Bod	t IV Juno 1:	1a Saa Earn	. 000 Part \	/ line 10
Complete if the organiza							
Description of property		other basis	(b) Cost or o		(c) Accumu depreciat	l	(d) Book value
1a Land	- ture:	,		,	Sopredat		
1a Land					<del> </del>		
b Buildings				· <del>··</del> ·		<del></del>	
c Leasehold improvements		+	<del></del>	14,528	1	1,915	2,613
d Equipment e Other				17,540	<del>_</del>		2,013
Total. Add lines 1a through 1e (Column (d) mi	ist equal Form 990	Part X column	(B) line 10c \		<u> </u>	<b>—</b>	2,613
	Joe oquar i Omi 330,	are A. Column	(D), mie 100 )				

Schedule D (Fi	orm 990) 2014 E'VILLE IRON STREET RO	DDS LIMITED	35-1813892	Page 3
Part VII	Investments—Other Securities.			
I dit vii	Complete if the organization answered "Yes" to F	Form 990 Part IV line	11b See Form 990 Part X, line 12	2
<del></del>		(b) Book value	(c) Method of valuation	<del></del>
	(a) Description of security or category (including name of security)	(b) Book value	Cost or end-of-year market value	
(1) Financial d	derivatives			
(2) Closely-he	ld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)		<u> </u>		
(F)				
(G)				-
(H)				
	n (b) must equal Form 990, Part X, col (B) line 12 )	<u> </u>		
Part VIII	Investments—Program Related.			_
	Complete if the organization answered "Yes" to F	form 990, Part IV, line	11c See Form 990, Part X, line 13	3
	(a) Description of investment	(b) Book value	(c) Method of valuation	
			Cost or end-of-year market value	
(1)				
(2)				
(3)	· · · · · · · · · · · · · · · · · · ·			
		<del>                                     </del>		<del></del>
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				<del></del>
Total. (Columi	n (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" to F	Form 990, Part IV, line	11d See Form 990, Part X, line 1	5
	(a) Description		(b) Boo	
(1)				
(2)				
(3)				
(4)				
(5)	<del></del>	· · · · · · · · · · · · · · · · · · ·		<del></del>
(6)				
(7)				
(8)		<del></del>		
(9)				
Total. (Columi	n (b) must equal Form 990, Part X, col (B) line 15)		<u>▶</u>	· · · · · · · · · · · · · · · · · · ·
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" to I	Form 990, Part IV, line	11e or 11f. See Form 990, Part X	,
	line 25.	•		
1.	(a) Description of liability	(b) Book value		
		<del></del>	•	
	income taxes	+	†	
(2)		<del> </del>	·	
(3)		<del> </del>	{	
_(4)			<u> </u>	
_(5)			[	
(6)			_	
(7)				
(8)				
(9)	· ·		1	
	n (h) must equal Form 990. Part X. col. (B) line 25.)	<u> </u>	1	

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Schedule D (Form 990) 2014 E'VILLE IRON STREET RODS LIMITED

35-1813892

Page 5

Part XIII Supplemental Information (continued)

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

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

ZU 14

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

E VILLE IRON STREET RODS LIMITED

Em

Employer identification number

35-1813892 INC. Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Part I Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Solicitation of government grants Internet and email solicitations Special fundraising events Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fund-(v) Amount paid to (vi) Amount paid to raiser have (i) Name and address of individual (iv) Gross receipts (or retained by) (or retained by) custody or (ii) Activity from activity fundraiser listed in organization or entity (fundraiser) control of contributions' col (i) Yes No 9 10

List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Total

Schedule G (Form 990 or 990-EZ) 2014

Page 2

P	<ul> <li>more th</li> </ul>	nan \$15,000	ts. Complete of fundraisii eceipts grea	ng event co	ntribu	on answeitions and	red "Yes" gross inco	to Forr ome or	n 990, Part n Form 990	t IV, line 18 -EZ, lines	3, or reported 1 and 6b List	
	CVCITES		(a) Event #	ies		(b) Even	_	_ <u>N</u>	(c) Other ever		(d) Total events (add col (a) through col (c))	
Revenue	1 Gross receipts			457,887							457	887
	2 Less Contribution 3 Gross income (line line 2)			457,887							457	887
	4 Cash prizes								<del></del>			
	5 Noncash prizes											<del></del>
suses	6 Rent/facility cost	s								_		<del> </del>
Direct Expenses	7 Food and bever	ages									<del></del>	<del></del>
Dire	8 Entertainment						<u>.</u> ,					
	9 Other direct exp	enses		304,690					<del></del>		304	690
	10 Direct expense s 11 Net income sum 2 art III Gamin	mary Subtract	_	3, column (d)		"Voo" to I	Form 000	Port IV	/ line 10	b b	304, 153,	690 197
			orm 990-EZ,		Vereu	(b) Pull tab		-   ait i	v, iiie 15, t		(d) Total gaming (a	udd
Revenue			(a) Bingo	)		bingo/progres			(c) Other ga	ming	col (a) through col	
	1 Gross revenue										· · · · · · · · · · · · · · · · · · ·	
penses	2 Cash prizes											
Direct Exp	3 Noncash prizes											
ے	4 Rent/facility cost											· · ·
	5 Other direct exp 6 Volunteer labor	enses	Yes No	%		Yes No	%	,	Yes No	%		
	7 Direct expense s	summary Add I	nes 2 through 5	5 ın column (d)						•		
	8 Net gaming inco	me summary S	Subtract line 7 fr	om line 1, colu	mn (d)					<b>&gt;</b>		
	Enter the state(s) in its the organization lid if "No," explain	_				states?					Yes	☐ No
	Were any of the orga If "Yes," explain	anization's gami	ng licenses rev	oked, suspend	ed or te	erminated du	iring the tax	year?			Yes	☐ No

Sche	dule G (Form 990 or 990-EZ) 2014 E'VILLE IRON STREET RODS LIMITED	35-1813892 Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity	
	formed to administer charitable gaming?	Yes No
13	Indicate the percentage of gaming activity conducted in	1 1
а	The organization's facility	13a %
b	An outside facility	13b %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and	
	records	
	Name ▶	
	Address ▶	
15a	Does the organization have a contract with a third party from whom the organization receives gaming	☐ Yes ☐ No
	revenue?  If "Yes " enter the amount of gaming revenue received by the organization ▶ \$ and the	
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$	16
С	If "Yes," enter name and address of the third party	
	Name ▶	
	Address ▶	
16	Gaming manager information	
	Name ▶	
	Gaming manager compensation ▶ \$	
	Description of services provided ▶	
	Director/officer Employee Independent contractor	
17	Mandatory distributions	
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	п., п.,
	retain the state gaming license?	Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$	
Par		nns (III) and (v), and
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition	
	instructions)	

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SCHEDULE (Form 990)

Grants and Other Assistance to Organizations,

2014

OMB No 1545-0047

Open to Public Inspection

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

E VILLE IRON STREET RODS LIMITED Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States ► Attach to Form 990.

Department of the Treasury Internal Revenue Service	•	Information about	Schedule I	Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.	structions is at www	v.irs.gov/form990.		Inspection
	E'VILLE IRON STREET INC.	STREET RODS LIMI	ITED				Emp 3.5	Employer Identification number 35-1813892
Part i General I	General Information on Grants and Assistance	Assistance						
1 Does the organization the selection criteria us 2 Describe in Part IV the	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? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	e amount of the grance? Se? torng the use of gra	ts or assistant funds in t	ince, the grantees' eligine. The United States	bility for the grants or	assistance, and		X Yes
art II	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if	mestic Organizeceived more t	rations a	nd Domestic Gov	<b>Domestic Governments.</b> Complete if the organization Part II can be duplicated if additional space is needed.	onal space is ne	nzation answe eeded.	Complete if the organization answered "Yes" to Form 990, additional space is needed.
1 (a) Name and a or g	(a) Name and address of organization or government	(p) 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) WENDALL FOSTER HOME P.O. BOX 1668	номв							CHARITABLE
OWENSBORO	KY 42303	61-0490868		28,000				
(2) MATER DEI HIGH UNKNOWN EVANSVILLE	SCHOOL IN 47720			000,6				CHARITABLE
(3) Donations UNKNOWN								CHARITABLE
EVANSVILLE	IN 47710			8,940				
(4) GIBSON SOUTHERN HIGH 3499 W 800 S	N HIGH SCHOOL							CHARITABLE
FORT BRANCH	IN 47648			5,500				
(5)								:
(9)							; ;	
(2)								
(8)								
(6)			,					
2 Enter total number of s 3 Enter total number of s	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	organizations listed ii 1 table	the line 1 t	able				<b>▼</b> 25

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

Schedule I (Form 990) (2014)

	', line 22		
	ce to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22		
35-1813892	he organization answered		
S LIMITED	duals. Complete if the	eq	
ON STREET RODS LIMITED	Domestic Individ	Iditional space is needed	
E'VILLE IR	d Other Assistand	Part III can be duplicated if addition	
Schedule I (Form 990) (2014)	Part III		

Page 2

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(e) Method of valuation (book, FMV, appraisal, other)
-						
5						
4						
, v						
ဖ						
<b>^</b>						
Part IV	Supplemental Information. Provide the information		urred in Part I, line 2	. Part III. column (b).	required in Part I, line 2. Part III. column (b), and any other additional information	nformation

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.

Open to Public

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.

E'VILLE IRON STREET RODS LIMITED INC.

Employer identification number 35 – 1813892

Form 990, Part III, Line 4d - All Other Accomplishment
EXHIBITS VINTAGE CARS TO THE PUBLIC TO PROMOTE INTEREST IN VINTAGE
AUTOMOBILES AND TRUCKS. PROMOTES AUTOMOBILE SAFETY.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 FORM 990 IS REVIEWED BY THE TREASURER.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

Form 4562

Department of the Treasury Internal Revenue Service

### **Depreciation and Amortization**

(Including Information on Listed Property)

► Attach to your tax return.

Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No 1545-0172

2014

achment quence No. 17

E'VILLE IRON STREET RODS LIMITED Identifying number Name(s) shown on return 35-1813892 INC. Business or activity to which this form relates Indirect Depreciation Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I 500,000 1 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 10 Carryover of disallowed deduction from line 13 of your 2013 Form 4562 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 13 Carryover of disallowed deduction to 2015 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions ) Part II Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 15 Property subject to section 168(f)(1) election Other depreciation (including ACRS) 16 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions) Section A 1,741 17 MACRS deductions for assets placed in service in tax years beginning before 2014 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2014 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (business/investment use (a) Classification of property placed in (e) Convention (f) Method (g) Depreciation deduction penod service only-see instructions) 19a 3-year property b 5-year property 7-year property d 10-year property e 15-year property 20-year property S/L g 25-year property 25 yrs S/L Residential rental 27 5 yrs MM property MM S/L 27 5 yrs MM Nonresidential real 39 yrs S/L property MM S/L Section C—Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs S/L S/L c 40-year 40 yrs MM Part IV Summary (See instructions ) 21 21 Listed property Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 1,741 here and on the appropriate lines of your return Partnerships and S corporations—see instructions 22 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs

23

# E'VILLE IRON STREET RODS LIMITED INC. P.O. BOX 3011 EVANSVILLE, IN 47730

### Section 1.263(a)-1(f) De Minimis Safe Harbor Election

Under Regulation 1.263(a)-1(f), the taxpayer hereby elects to apply the de minimis safe harbor election to all qualifying property placed in service during the tax year.

# Form **3115**

(Rev December 2009)
Department of the Treasury

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

OMB No 1545-0152

Internal Revenue Service		
Name of filer (name of parent corporation if a consolid	dated group) (see instructions)	Identification number (see instructions)
		35-1813892
		Principal business activity code number (see instructions)
E'VILLE IRON STREET RODS LIN	MITED INC.	811118
Number, street, and room or suite no. If a P.O. box, se	ee the instructions	Tax year of change begins (MM/DD/YYYY) 01/01/2014
PO BOX 3011		Tax year of change ends (MM/DD/YYYY) 12/31/2014
City or town, state, and ZIP code		Name of contact person (see instructions)
EVANSVILLE, INDIANA 47730	· · · · · · · · · · · · · · · · · · ·	MIKE WAGNER
Name of applicant(s) (if different than filer) and identifi	ication number(s) (see instructions)	Contact person's telephone number
W0		812-568-9962
If the applicant is a member of a consolida		<u> </u>
	•	attached (see instructions for when Form 2848 is
		· · · · · · · · · · · · · · · · · · ·
Check the box to indicate the type of ap	•	Check the appropriate box to indicate the type
☐ Individual	Cooperative (Sec. 1381)	of accounting method change being requested.
☐ Corporation ☐ Controlled foreign corporation	☐ Partnership	(see instructions)
(Sec. 957)	S corporation	Depreciation or Amortization
☐ 10/50 corporation (Sec. 904(d)(2)(E))	☐ Insurance co. (Sec. 816(a)☐ Insurance co. (Sec. 831)	Financial Products and/or Financial Activities of Financial Institutions
Qualified personal service	☐ Other (specify) ►	
corporation (Sec. 448(d)(2))	☐ Other (specify) ►	▼ Other (specify) ► MULTI AUTO CHNG RQST
∑ Exempt organization. Enter Code section	ion > 501 (C) (A)	REPAIR REGS
		- the terresis and the state of
or to the taynayer's requested change in method of	steu change in memou of accounting of accounting. This includes all inform	g, the taxpayer must provide all information that is relevant to the taxpay nation requested on this Form 3115 (including its instructions), as
well as any other information that is not speci	rifically requested.	nation requested on this Form STTS (including its instructions), as
The taxpayer must attach all applicable		uested throughout this form.
Part I Information For Automatic	Change Request	
	<del></del>	e number for the requested automatic change Enter Yes N
only one designated automatic accou	inting method change number, ex	except as provided for in guidance published by the
IRS. If the requested change has no o	designated automatic accounting i	method change number, check "Other," and provide
both a description of the change and o	citation of the IRS guidance provid	ding the automatic change. See instructions.
► (a) Change No 184 186 192	(b) Other ☐ Description ▶	
		Proc. 2008-52 cause automatic consent to be
unavailable for the applicant's reque	ested change? If "Yes," attach a	an explanation
Note. Complete Part II below and then Pa	art IV, and also Schedules A thre	rough E of this form (if applicable).
Part II Information For All Reques	its	Yes N
3 Did or will the applicant cease to	engage in the trade or busine	ness to which the requested change relates, or
terminate its existence, in the tax ye	ear of change (see instructions)	)?
If "Yes," the applicant is not eligible	to make the change under auto	omatic change request procedures.
4a Does the applicant (or any present	or former consolidated group in	n which the applicant was a member during the
applicable tax year(s)) have any Fed	deral income tax return(s) unde	er examination (see instructions)?
If "No," go to line 5.		
<b>b</b> Is the method of accounting the app	olicant is requesting to change a	an issue (with respect to either the applicant or
any present or former consolidated	group in which the applicant w	vas a member during the applicable tax year(s))
either (i) under consideration or (ii) p		ctions)?
	Signature (see insti	
Inder penaities of perjury, I declare that I have examin he application contains all the relevant facts relating t	ned this application, including accompan	nying schedules and statements, and to the best of my knowledge and belie it, and complete Declaration of preparer (other than applicant) is based on
ntormation of which preparer has any knowledge	as the application, and it is true, contest	in and complete Decidation of preparer (once than applicant) is based on
Filer		Preparer (other than filer/applicant)
$\mathbb{R}$ $\mathbb{R}$ $\mathbb{R}$	4,20,200	Moty L. Massey CPA
1 rooney wyself	4.28.2015	
O Signature and date		Signature of individual preparing the application and date
CODNEY WYATT PRESIDENT		STY L. MASSEY, CPA
Name and title (print or type		Name of individual preparing the application (print or type)
	BRC	OWN, SMITH & SETTLE, LLC CPA'S
		Name of firm preparing the application

<ul> <li>4c Is the method of accounting the applicant is requesting to change an issue pending (with respect to either the applicant or any present or former consolidated group in which the applicant was a member during the applicable tax year(s)) for any tax year under examination (see instructions)?</li> <li>d Is the request to change the method of accounting being filed under the procedures requiring that the operating division director consent to the filing of the request (see instructions)?  If "Yes," attach the consent statement from the director.</li> <li>e Is the request to change the method of accounting being filed under the 90-day or 120-day window period?  If "Yes," check the box for the applicable window period and attach the required statement (see instructions).  □ 90 day  □ 120 day: Date examination ended ▶  If you answered "Yes" to line 4a, enter the name and telephone number of the examining agent and the tax year(s) under examination.  Name ▶  □ Tax year(s) ▶  Telephone number ▶  □ Tax year(s) ▶  Tax year(s) ▶  B Does the applicant (or any present or former consolidated group in which the applicant was a member during the applicable tax year(s)) have any Federal income tax return(s) before Appeals and/or a Federal court?  If "Yes," enter the name of the (check the box)  □ Appeals officer and/or  □ Counsel for the government, telephone number, and the tax year(s) before Appeals and/or a Federal court.  Name ▶  □ Tax year(s) ▶  Has a copy of this Form 3115 been provided to the Appeals officer and/or counsel for the government, telephone number, and the tax year(s) before Appeals and/or a Federal court.  Name ▶  □ Tax year(s) be not the applicant or any present or former consolidated group in which the applicant was a member for the tax year(s) the applicant was a member) (see instructions)?  If "Yes," attach an explanation.  If the applicant answered "Yes" to line 4a and/or 5a with respect to any present or former consolidated group.</li> </ul>								
d Is the request to change the method of accounting being filed under the procedures requiring that the operating division director consent to the filing of the request (see instructions)?  If "Yes," attach the consent statement from the director.  If "Yes," check the box for the applicable window period and attach the required statement (see instructions).  90 day 120 day: Date examination ended ▶  If you answered "Yes" to line 4a, enter the name and telephone number of the examining agent and the tax year(s) under examination.  Name ▶ Telephone number ▶ Tax year(s) ▶  Bas a copy of this Form 3115 been provided to the examining agent identified on line 4f?  Telephone number If "Yes," enter the name of the (check the box) Appeals officer and/or counsel for the government, telephone number, and the tax year(s) before Appeals and/or a Federal court.  Name ▶ Tax year(s) ▶  Bas a copy of this Form 3115 been provided to the Appeals officer and/or counsel for the government, telephone number, and the tax year(s) before Appeals and/or a Federal court.  Name ▶ Tax year(s) ▶  Bas a copy of this Form 3115 been provided to the Appeals officer and/or counsel for the government identified on line 5a?  C Is the method of accounting the applicant is requesting to change an issue under consideration by Appeals and/or a Federal court (for either the applicant or any present or former consolidated group in which the applicant was a member for the tax year(s) the applicant was a member) (see instructions)?  If "Yes," attach an explanation.								
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year(s) under examination.  Name ▶ Telephone number ▶ Tax year(s) ▶  g Has a copy of this Form 3115 been provided to the examining agent identified on line 4f?  5a Does the applicant (or any present or former consolidated group in which the applicant was a member during the applicable tax year(s)) have any Federal income tax return(s) before Appeals and/or a Federal court?  If "Yes," enter the name of the (check the box)								
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Name ► Tax year(s) ►  b Has a copy of this Form 3115 been provided to the Appeals officer and/or counsel for the government identified on line 5a?  c Is the method of accounting the applicant is requesting to change an issue under consideration by Appeals and/or a Federal court (for either the applicant or any present or former consolidated group in which the applicant was a member for the tax year(s) the applicant was a member) (see instructions)?  If "Yes," attach an explanation.	Х							
<ul> <li>b Has a copy of this Form 3115 been provided to the Appeals officer and/or counsel for the government identified on line 5a?</li> <li>c Is the method of accounting the applicant is requesting to change an issue under consideration by Appeals and/or a Federal court (for either the applicant or any present or former consolidated group in which the applicant was a member for the tax year(s) the applicant was a member) (see instructions)?</li> <li>If "Yes," attach an explanation.</li> </ul>								
on line 5a?  Is the method of accounting the applicant is requesting to change an issue under consideration by Appeals and/or a Federal court (for either the applicant or any present or former consolidated group in which the applicant was a member for the tax year(s) the applicant was a member) (see instructions)?  If "Yes," attach an explanation.								
a Federal court (for either the applicant or any present or former consolidated group in which the applicant was a member for the tax year(s) the applicant was a member) (see instructions)?								
	X							
If the applicant answered "Yes" to line 4a and/or 5a with respect to any present or former consolidated group, attach a statement that provides each parent corporation's (a) name, (b) identification number, (c) address, and (d) tax year(s) during which the applicant was a member that is under examination, before an Appeals office, and/or before a Federal court.  If, for federal income tax purposes, the applicant is either an entity (including a limited liability company) treated as								
If, for federal income tax purposes, the applicant is either an entity (including a limited liability company) treated as a partnership or an S corporation, is it requesting a change from a method of accounting that is an issue under consideration in an examination, before Appeals, or before a Federal court, with respect to a Federal income tax return of a partner, member, or shareholder of that entity?	X							
If "Yes," the applicant is not eligible to make the change								
8a Does the applicable revenue procedure (advance consent or automatic consent) state that the applicant does not receive audit protection for the requested change (see instructions)?	X							
b If "Yes," attach an explanation.								
Has the applicant, its predecessor, or a related party requested or made (under either an automatic change procedure or a procedure requiring advance consent) a change in method of accounting within the past 5 years (including the year of the requested change)?								
b If "Yes," for each trade or business, attach a description of each requested change in method of accounting (including the tax year of change) and state whether the applicant received consent.								
If any application was withdrawn, not perfected, or denied, or if a Consent Agreement granting a change was not signed and returned to the IRS, or the change was not made or not made in the requested year of change, attach an explanation.								
Does the applicant, its predecessor, or a related party currently have pending any request (including any concurrently filed request) for a private letter ruling, change in method of accounting, or technical advice?	X							
b If "Yes," for each request attach a statement providing the name(s) of the taxpayer, identification number(s), the type of request (private letter ruling, change in method of accounting, or technical advice), and the specific issue(s) in the request(s)								
Is the applicant requesting to change its <b>overall</b> method of accounting?	X							
Present method:   Cash Accrual Hybrid (attach description)								
Proposed method:   Cash Accrual Hybrid (attach description)	,							

Par	t II	Information For A	II Reque	sts (continued)				Yes No
12 .	comp	unting and also chang lete description for ea	ging to a s ach of the	special method of acco		or (ii) is changing its ove or more items, attach a		
a b		tem(s) being changed		e item(s) being change	ed			
c		•		the item(s) being chang				
đ	The a	pplicant's present over	rall metho	d of accounting (cash,	accrual, or hyb	rid).		
13	activii 1.446 provid overa	ty code for each. If the code in the code	ne applica ther each ousiness a ng for eac	nt has more than one trade or business is nd any other types of	trade or busin accounted for activities engaged and which trade of	usiness(es), and the prince ess as defined in Regular separately; the goods and in that generate grost or business is requesting	ations section and services is income, the	
14	For in	ne proposed method o surance companies, s ," attach an explanatio	ee the ins		olicant's books a	and records and financial	statements?	X
15a	Has reorga	the applicant engage	ed, or wi liquidatior	) during the proposed		hich section 381(a) ap		X
b 16	the m distrib the ch	ethods of accounting ution or transfer and lange(s) requested in	used by t the metho this applic	he parties to the secti d(s) that would be rec ation.	on 381(a) trans juired by sectio	dication, attach a stateme action immediately befor n 381(c)(4) or (c)(5) abs IRS proposes an adverse	e the date of ent consent to	X
17	of ac	counting for any proporties subject to section	perty subj	ect to section 263A,	any long-term	rual method, or is changi contract subject to sec e 3 tax years preceding th	tion 460, or	
	1st pred year en	•	yr	2nd preceding year ended mo	yr	3rd preceding year ended mo	yr	a a
Part	<b>*</b>	Information For A	dvance (	onsent Request		\$		Vec No
18	is the		d change	described in any reve	nue procedure,	revenue ruling, notice,	regulation, or	Yes No
	If "Ye	•			nt is submitting	its request under adva	nce consent	
19	detaile situatio (statut	ed and complete desc on and that demonstra es, regulations, publis	ription of ates that the hed ruling	the facts that explains ne applicant is authoriz	how the law sed to use the proporting the pro-	for the item being change specifically applies to the roposed method. Include oposed method. Also, inc y exists.	e applicant's all authority	
20				to the proposed chang	•	ons).		
21 22		<u>-</u>	-	easons for the propose	•	do all ather		
22	conso		proposed i	method of accounting for		hange, do all other mer g changed?	noers of the	
23a	•	•		d to this application (se	ee instructions).	<b>\$</b>		
b	If the a	pplicant qualifies for a	reduced			on or certification (see ins	tructions).	
Part 24		Section 481(a) Adj			detien c#			Yes No
	implem		e in method	of accounting on a cut-o		ublished guidance require to an a section 481(a) adjustme		X
		•						
	income used to compu applica	e. ► \$  to determine the sectation for each compution, attach a list of the	Attion 481( onent. If rename, ic	tach a summary of the a) adjustment. If it is nore than one applica	computation ar based on mo nt is applying t rincipal busines	an increase (+) or a d and an explanation of the ore than one componer for the method change of a activity code (see instru	methodology nt, show the on the same	1

Form	3115 (Rev 12-2009)	Page 4
Pa	rt IV Section 481(a) Adjustment (continued)	Yes No
26	If the section 481(a) adjustment is an increase to income of less than \$25,000, does the applicant elect to ta entire amount of the adjustment into account in the year of change?	17 1 12 17 17 17 T
27	Is any part of the section 481(a) adjustment attributable to transactions between members of an affiliated group consolidated group, a controlled group, or other related parties?	oup, a
	If "Yes," attach an explanation.	
Sch	edule A—Change in Overall Method of Accounting (If Schedule A applies, Part I below must be c	ompleted.)
Pa	rt   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 statement providing a breakdown of the amounts entered on lines 1a through 1g.	e." Also, attach a
		Amount
а	Income accrued but not received (such as accounts receivable)	\$
Ь	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	
C	Expenses accrued but not paid (such as accounts payable)	
d	Prepaid expenses previously deducted	
е	Supplies on hand previously deducted and/or not previously reported	
f	Inventory on hand previously deducted and/or not previously reported. Complete Schedule D, Part II	·
g	Other amounts (specify). Attach a description of the item and the legal basis for its inclusion in the calculation of the section 481(a) adjustment ▶	
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	\$
2	Is the applicant also requesting the recurring item exception under section 461(h)(3)?	☐ Yes ☐ No
3	Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet, the close of the tax year preceding the year of change. Also attach a statement specifying the accounting m preparing the balance sheet. If books of account are not kept, attach a copy of the business schedules su Federal income tax return or other return (e.g., tax-exempt organization returns) for that period. If the amount at through 1g, do not agree with those shown on both the profit and loss statement and the balance sheet, at explaining the differences.	ethod used when ubmitted with the unts in Part I, lines
Par	t    Change to the Cash Method For Advance Consent Request (see instructions)	
Applic	cants requesting a change to the cash method must attach the following information:	
1 2	A description of inventory items (items whose production, purchase, or sale is an income-producing factor) a supplies 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 Coo	
		ie or regulations.
Sche	dule B—Change to the Deferral Method for Advance Payments (see instructions)	
1	If the applicant is requesting to change to the Deferral Method for advance payments described in section 5 2004-34, 2004-1 C.B 991, attach the following information:	.02 of Rev. Proc.
а	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 rec 8.02(3)(a)-(c) of Rev. Proc. 2004-34.	quired by section
С	If the applicant is filing under the advance consent provisions of Rev. Proc. 97-27, the information req 8.03(2)(a)-(f) of Rev. Proc. 2004-34.	uired by section
2	If the applicant is requesting to change to the deferral method for advance payments described in Reg 1.451-5(b)(1)(ii), attach the following.	ulations section
а	A statement explaining how the advance payments meet the definition in Regulations section 1.451-5(a)(1).	
Ь	A statement explaining what portions of the advance payments, if any, are attributable to services, whether sintegral to the provisions of goods or items, and whether any portions of the advance payments that ar non-integral services are less than five percent of the total contract prices. See Regulations sections 1.451-5(a	e attributable to
C	A statement explaining that the advance payments will be included in income no later than when included in g	gross receipts for

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.

purposes of the applicant's financial reports. See Regulations section 1.451-5(b)(1)(ii).

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

### Part I 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.
- If changing to the IPIC method, attach a completed Form 970.

### Part I Change 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
- 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.
- 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).

and expenses from long-term contracts. Also, attach a representative actual contract (without any deletic change. If the applicant is a construction contractor, attach a detailed description of its construction activities.  2a Are the applicant's contracts long-term contracts as defined in section 460(f)(1) (see instructions)?  b If "Yes," do all the contracts qualify for the exception under section 460(e) (see instructions)?  If line 2 b is "No; attach an explanation.  c If line 2 b is "Yes," is the applicant requesting to use the percentage-of-completion method using cost-to-cost under Regulations section 1.460-4(b)?  d If line 2 c is "No;" is the applicant requesting to use the exempt-contract percentage-of-completion method under Regulations section 1.460-4(c)(2)?  If line 2 d is "Yes," attach an explanation of what cost comparison the applicant will use to determine a contract's completion factor.  If line 2 d is "No," attach an explanation of what method the applicant is using and the authority for its use.  3a Does the applicant have long-term manufacturing contracts as defined in section 460(f)(2)?  If "Yes," attach an explanation of the applicant's present and proposed method(s) of accounting for long-term manufacturing contracts.  Attach a description of the applicant's manufacturing activities, including any required installation of manufaction and the applicant use the cost-to-cost method in Regulations section 1.460-4(b)?  b If line 4 a is "No," is the applicant electing the simplified cost-to-cost method (see section 460(b)(3) and Regulations section 1.460-5(c))?  5 Attach a statement indicating whether any of the applicant's contracts are either cost-plus long-term contracts or Federal long-term contracts  Part II Change in Valuing Inventories Including Cost Allocation Changes (Also complete Part III of the applicant subject to section 263A? If "No," go to line 4a  b Is the applicant with the inventory goods (if any) NOT being changed  is the applicant with the inventory goods of any) NOT being c								
1 To the extent not already provided, attach a description of the applicant's present and proposed methods and expenses from long-term contracts. Also, attach a representative actual contract (witchnstruct and expenses) if the applicant is a construction contractor, attach a detailed description of its construction activities. Are the applicant's contracts long-term contracts as defined in section 460(f)(1) (see instructions)?  b if "Yes," do all the contracts qualify for the exception under section 460(e) (see instructions)?  If line 2b is "No," attach an explanation.  c if line 2b is "Yes," is the applicant requesting to use the percentage-of-completion method using cost-to-cost under Regulations section 1.480-4(b)?  d if line 2c is "No," is the applicant requesting to use the exempt-contract percentage-of-completion method under Regulations section 1.480-4(c)(2)?  If line 2d is "Yes," attach an explanation of what cost comparison the applicant will use to determine a contract's completion factor.  If line 2d is "No," attach an explanation of what method the applicant is using and the authority for its use.  Does the applicant have long-term manufacturing contracts as defined in section 460(f)(2)?  b if "Yes," attach an explanation of the applicant's present and proposed method(s) of accounting for long-term manufacturing contracts.  c Attach a description of the applicant's manufacturing activities, including any required installation of manufacturing activities are completed in the proposed method and the applicant use the cost-to-cost method in Regulations section 1.480-4(b)?  b if line 4a is "No," is the applicant electing the simplified cost-to-cost method (see section 460(b)(3) and Regulations section 1.480-5(c)?  Attach a description of the inventory goods (if any) NOT being changed  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 (see instructions)?  Inventory Being Changed  Present method  Propos			er Section 460,	Inventories, or	Other			
and expenses from long-term contracts. Also, attach a representative actual contract (without any deletic change. If the applicant is a construction contractor, attach a detailed description of its construction activities.  2a Are the applicant's contracts long-term contracts as defined in section 460(f)(1) (see instructions)?  b If "Yes," do all the contracts qualify for the exception under section 460(e) (see instructions)?  If line 2 b is "No; attach an explanation.  c If line 2 b is "Yes," is the applicant requesting to use the percentage-of-completion method using cost-to-cost under Regulations section 1.460-4(b)?  d If line 2 c is "No;" is the applicant requesting to use the exempt-contract percentage-of-completion method under Regulations section 1.460-4(c)(2)?  If line 2 d is "Yes," attach an explanation of what cost comparison the applicant will use to determine a contract's completion factor.  If line 2 d is "No," attach an explanation of what method the applicant is using and the authority for its use.  3a Does the applicant have long-term manufacturing contracts as defined in section 460(f)(2)?  If "Yes," attach an explanation of the applicant's present and proposed method(s) of accounting for long-term manufacturing contracts.  Attach a description of the applicant's manufacturing activities, including any required installation of manufaction and the applicant use the cost-to-cost method in Regulations section 1.460-4(b)?  b If line 4 a is "No," is the applicant electing the simplified cost-to-cost method (see section 460(b)(3) and Regulations section 1.460-5(c))?  5 Attach a statement indicating whether any of the applicant's contracts are either cost-plus long-term contracts or Federal long-term contracts  Part II Change in Valuing Inventories Including Cost Allocation Changes (Also complete Part III of the applicant subject to section 263A? If "No," go to line 4a  b Is the applicant with the inventory goods (if any) NOT being changed  is the applicant with the inventory goods of any) NOT being c	Par	Change in Reporting Income From Long-Term Contracts	(Also complete	e Part III on pag	es 7 and	8.)		
2a Are the applicant's contracts long-term contracts as defined in section 460(f)(1) (see instructions)?  If I'res," do all the contracts qualify for the exception under section 460(e) (see instructions)?  If line 2b is "No," attach an explanation.  If line 2b is "Yes," is the applicant requesting to use the percentage-of-completion method using cost-to-cost under Regulations section 1.460-4(b)?  If line 2c is "No," is the applicant requesting to use the exempt-contract percentage-of-completion method under Regulations section 1.460-4(c)(2)?  If line 2d is "Yes," attach an explanation of what cost comparison the applicant will use to determine a contract's completion factor.  If line 2d is "No," attach an explanation of what method the applicant is using and the authority for its use.  3a Does the applicant have long-term manufacturing contracts as defined in section 460(f)(2)?  If "Yes," attach an explanation of the applicant's present and proposed method(s) of accounting for long-term manufacturing contracts.  Attach a description of the applicant's manufacturing activities, including any required installation of manufact and will the applicant use the cost-to-cost method in Regulations section 1.460-4(b)?  If line 4a is "No," is the applicant electing the simplified cost-to-cost method (see section 460(b)(3) and Regulations section 1.460-4(b)?  Attach a statement indicating whether any of the applicant's contracts are either cost-plus long-term contracts or Federal long-term contracts  Change in Valuing inventories including Cost Allocation Changes (Also complete Part III of Altach a description of the inventory goods being changed.  Attach a description of the inventory goods being changed.  Attach a description of the inventory goods fif any) NOT being changed (Also complete Part III of No," attach a description of the inventory goods fif any) NOT being changed (Also complete Part III of No," attach a description of the inventory goods fire proposed methods:  Specific identification FiFO  LIFO  Cher (attac	1	To the extent not already provided, attach a description of the applicant's present and proposed methods for reporting income and expenses from long-term contracts. Also, attach a representative actual contract (without any deletion) for the requested						
c If line 2b is "Yes," is the applicant requesting to use the percentage-of-completion method using cost-to-cost under Regulations section 1.460-4(b)?  d If line 2c is "No," is the applicant requesting to use the exempt-contract percentage-of-completion method under Regulations section 1.460-4(c)(2)?  If line 2d is "Yes," attach an explanation of what cost comparison the applicant will use to determine a contract's completion factor.  If line 2d is "No," attach an explanation of what method the applicant is using and the authority for its use. Does the applicant have long-term manufacturing contracts as defined in section 460(f)(2)?  If "Yes," attach an explanation of the applicant's present and proposed method(s) of accounting for long-term manufacturing contracts.  Attach a description of the applicant's manufacturing activities, including any required installation of manufacturing activities, including any required installation of manufacturing activities, including any required installation of manufacturing activities including any required installation of manufacturing activities including any required installation of manufacturing activities including any required installation of manufacturing activities including any required installation of manufacturing activities including any required installation of manufacturing activities including any required installation of manufacturing activities including any required installation of manufacturing activities including any required installation of manufacturing activities including activities including any required installation of manufacturing activities including ac		Are the applicant's contracts long-term contracts as defined in section 460	(f)(1) (see instruc	tions)?	☐ Yes ☐ Yes	□ No		
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If line 2d is "Yes," attach an explanation of what cost comparison the applicant will use to determine a contract's completion factor.  If line 2d is "No," attach an explanation of what method the applicant is using and the authority for its use.  Does the applicant have long-term manufacturing contracts as defined in section 460(f)(2)?  b If "Yes," attach an explanation of the applicant's present and proposed method(s) of accounting for long-term manufacturing contracts.  c Attach a description of the applicant's manufacturing activities, including any required installation of manufactor using the percentage-of-completion method:  Will the applicant use the cost-to-cost method in Regulations section 1.460-4(b)?  b If line 4a is "No," is the applicant electing the simplified cost-to-cost method (see section 460(b)(3) and Regulations section 1.460-5(c))?  Attach a statement indicating whether any of the applicant's contracts are either cost-plus long-term contracts or Federal long-term contracts  Part III Change in Valuing Inventories Including Cost Allocation Changes (Also complete Part III of Attach a description of the inventory goods being changed.  Attach a description of the inventory goods being changed.  Attach a description of the inventory yould be possible to the applicant's present inventory valuation method in compliance with section 263A (see instructions)? If "No," attach a detailed explanation  Check the appropriate boxes below.  Identification methods:  Specific identification  FIFO  LIFO  Other (attach explanation)  Valuation methods  Cost  Cost or market, whichever is lower  Retail (ower of cost or market  Other (attach explanation)  b Enter the value at the end of the tax year preceding the year of change  If the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the follow instructions)	d	If line 2c is "No," is the applicant requesting to use the exempt-contract percentage-of-completion				□ No		
b if "Yes," attach an explanation of the applicant's present and proposed method(s) of accounting for long-term manufacturing contracts.  c Attach a description of the applicant's manufacturing activities, including any required installation of manufact.  4 To determine a contract's completion factor using the percentage-of-completion method:  will the applicant use the cost-to-cost method in Regulations section 1.460-4(b)?  b If line 4a is "No," is the applicant electing the simplified cost-to-cost method (see section 460(b)(3) and Regulations section 1.460-5(c))?  Attach a statement indicating whether any of the applicant's contracts are either cost-plus long-term contracts or Federal long-term contracts  Part II Change in Valuing Inventories Including Cost Allocation Changes (Also complete Part III of Attach a description of the inventory goods being changed.  Attach a description of the inventory goods being changed.  Is the applicant subject to section 263A? If "No," go to line 4a  b 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 (see instructions)? If "No," attach a detailed explanation  4a Check the appropriate boxes below. Identification methods:  Specific identification  FIFO  LIFO  Other (attach explanation)  Valuation methods:  Cost  Cost or market, whichever is lower  Retail cost  Retail, lower of cost or market  Other (attach explanation)  b Enter the value at the end of the tax year preceding the year of change  If the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the follow instructions)		If line 2d is "Yes," attach an explanation of what cost comparison the ap- contract's completion factor.  If line 2d is "No," attach an explanation of what method the applicant is usi	determine a rity for its use.	_				
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will the applicant use the cost-to-cost method in Regulations section 1.460-4(b)?  If line 4a is "No," is the applicant electing the simplified cost-to-cost method (see section 460(b)(3) and Regulations section 1.460-5(c))?  Attach a statement indicating whether any of the applicant's contracts are either cost-plus long-term contracts or Federal long-term contracts  Part II Change in Valuing Inventories Including Cost Allocation Changes (Also complete Part III of Attach a description of the inventory goods being changed.  Attach a description of the inventory goods (if any) NOT being changed.  Is the applicant subject to section 263A? If "No," go to line 4a.  Is the applicant's present inventory valuation method in compliance with section 263A (see instructions)?  Inventory Being Changed  Attach a detailed explanation.  Inventory Being Changed  Present method  Present method  Present method  Present method  Present method  Cost  Cost  Cost or market, whichever is lower  Retail cost  Retail, lower of cost or market  Other (attach explanation).  Enter the value at the end of the tax year preceding the year of change  If the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the follow instructions)	C			ion of manufacture	ed goods.			
Regulations section 1 460-5(c))?  Attach a statement indicating whether any of the applicant's contracts are either cost-plus long-term contracts or Federal long-term contracts  Part II Change in Valuing Inventories Including Cost Allocation Changes (Also complete Part III of Attach a description of the inventory goods being changed.  Attach a description of the inventory goods (if any) NOT being changed  Attach a description of the inventory goods (if any) NOT being changed  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 (see instructions)? If "No," attach a detailed explanation  Check the appropriate boxes below. Inventory Being Changed  Inventory Being Changed  Inventory Being Changed  Present method Proposed methods:  Specific identification  FIFO  LIFO  Other (attach explanation)  Valuation methods:  Cost  Cost or market, whichever is lower  Retail cost  Retail, lower of cost or market  Other (attach explanation)  b Enter the value at the end of the tax year preceding the year of change  If the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the follow instructions)	а	a Will the applicant use the cost-to-cost method in Regulations section 1.460-4(b)?				□ No		
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b Is the applicant's present inventory valuation method in compliance with section 263A (see instructions)?  If "No," attach a detailed explanation  Check the appropriate boxes below.  Identification methods:  Specific identification  FIFO  LIFO  Other (attach explanation)  Valuation methods:  Cost  Cost or market, whichever is lower  Retail cost  Retail, lower of cost or market  Other (attach explanation)  b Enter the value at the end of the tax year preceding the year of change  1 If the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the follow instructions)	2	Attach a description of the inventory goods (if any) NOT being changed			☐ Yes	□No		
Aa Check the appropriate boxes below.  Identification methods:  Specific identification  FIFO  LIFO  Other (attach explanation)  Valuation methods:  Cost  Cost or market, whichever is lower  Retail cost  Retail, lower of cost or market  Other (attach explanation)  b Enter the value at the end of the tax year preceding the year of change  If the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the follow instructions)		Is the applicant's present inventory valuation method in compliance with section 263A (see instructions)?				_ No_		
Identification methods:						tory Not Changed		
Specific identification  FIFO  LIFO  Other (attach explanation)  Valuation methods:  Cost  Cost or market, whichever is lower  Retail cost  Retail, lower of cost or market  Other (attach explanation)  b Enter the value at the end of the tax year preceding the year of change  If the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the follow instructions)	4a		Descent method	Brongrad method		t method		
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Retail, lower of cost or market		·			_			
Other (attach explanation)  b Enter the value at the end of the tax year preceding the year of change  5 If the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the follow instructions)					<del> </del>	<del></del>		
5 If the applicant is changing from the LIFO inventory method to a non-LIFO method, attach the follow instructions)		Other (attach explanation)			et et a se se se	i i		
instructions)				L				
		instructions)	LIFO method, att	ach the following	intormat	ion (see		
· · · · · · · · · · · · · · · · · · ·		Copies of Form(s) 970 filed to adopt or expand the use of the method.						
<ul> <li>b Only for applicants requesting advance consent. A statement describing whether the applicant is characteristic required by Regulations section 1.472-6(a) or (b), or whether the applicant is proposing a different method</li> <li>c Only for applicants requesting an automatic change. The statement required by section 22.01(5) of Proc. 2008-52 (or its successor).</li> </ul>	С	required by Regulations section 1.472-6(a) or (b), or whether the applicant Only for applicants requesting an automatic change. The statement	is proposing a dif	ferent method.				

Part III 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 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:

- 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		<u> </u>
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)		
25	Administrative costs (not including any costs of selling or any return on capital)		· <del></del>
26	Research and experimental expenses attributable to long-term contracts		
27	Interest		<del></del>
28	Other costs (Attach a list of these costs.)		_

	Method of Cost Allocation (see instructions) (continued)			
	on C-Other Costs Not Required To Be Allocated (Complete Section C only if the ap	plicant is request	ing to ch	ange its
metho	od for these costs.)			
		Present method	Proposed	method
1	Marketing, selling, advertising, and distribution expenses			
2	Describe and synarimental synapses not included in Section P. line 26			
3	Didding synapses and included in Continu D. line 22			
4	General and administrative costs not included in Section B			
5	Income taxes			
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			
11	Other costs (Attach a list of these costs.)	_		
Sche	dule E—Change in Depreciation or Amortization (see instructions)			
Applic	ants requesting approval to change their method of accounting for depreciation or am	ortization comple	te this s	ection.
	ants must provide this information for each item or class of property for which a change is required			
	See the List of Automatic Accounting Method Changes in the instructions for information		utomatic (	changes
	sections 56, 167, 168, 197, 1400I, 1400L, or former section 168. Do not file Form 3115 w			
	ection revocations (see instructions).	•		
1	Is depreciation for the property determined under Regulations section 1.167(a)-11 (CLADR)?	Г	Yes	⊠ No
•	If "Yes," the only changes permitted are under Regulations section 1.167(a)-11(c)(1)(iii).			ш но
2	Is any of the depreciation or amortization required to be capitalized under any Code section	(e.g. section		
2	263A)?		☐ Yes	🛭 No
			1€3	ы но
	If "Yes," enter the applicable section ▶	laction under		
3	Has a depreciation, amortization, or expense election been made for the property (e.g., the e sections 168(f)(1), 179, or 179C)?		Yes	X No
			_ 162	M NO
_	If "Yes," state the election made ▶			
4a	To the extent not already provided, attach a statement describing the property being change to the control of t	jed. Include in the	descripti	on the
	type of property, the year the property was placed in service, and the property's use in the	e applicant's trade	e or busin	less of
	income-producing activity	- :-o	☐ Yes	X No
þ	If the property is residential rental property, did the applicant live in the property before renting		_	
С	Is the property public utility property?		☐ Yes	⊠ No
5	To the extent not already provided in the applicant's description of its present method, attac	h a statement exp	plaining he	ow the
	property is treated under the applicant's present method (e.g., depreciable property, in			unaer
	Regulations section 1.162-3, nondepreciable section 263(a) property, property deductible as			
6	If the property is not currently treated as depreciable or amortizable property, attach a state	ement of the facts	supporti	ng tne
_	proposed change to depreciate or amortize the property.	neanoth provid	la tha fal	lowing
7	If the property is currently treated and/or will be treated as depreciable or amortizable	property, provid	ie tile loi	llowing
	information for both the present (if applicable) and proposed methods:	400(-))		
а	The Code section under which the property is or will be depreciated or amortized (e.g., section			
b	The applicable asset class from Rev. Proc. 87-56, 1987-2 C.B. 674, for each asset depreciat			
	under section 1400L; the applicable asset class from Rev. Proc 83-35, 1983-1 C.B. 745,		-	
	former section 168 (ACRS); an explanation why no asset class is identified for each asset	t tor which an ass	set class	nas not
	been identified by the applicant.			
С	The facts to support the asset class for the proposed method.			
d	The depreciation or amortization method of the property, including the applicable Code sect	ion (e.g., 200% de	eclining b	alance
	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.			
9	A statement of whether or not the additional first-year special depreciation allowance (for			
	168(k), 168(l), 168(m), 168(n), 1400L(b), or 1400N(d)) was or will be claimed for the property	. If not, also provid	de an exp	lanation
	as to why no special depreciation allowance was or will be claimed.			