For Paperwork Reduction Act Notice, see the separate instructions.

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Department of the Treasury

Internal Revenue Service

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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.

2014

Open to Public Inspection

For the 2014 calendar year, or tax year beginning and ending Gopher Rifle & Revolver Check if applicable C Name of organization D Employer identification number Doing business as Address change Number and street (or P O box if mail is not delivered to street address) 41-6051511 Name change E Telephone number P.O. Box 18023 Initial return City or town 7IP code 651-462-4722 Minneapolis MN 55418 Final return/terminated Foreign postal code Foreign country name Foreign province/state/county 103,440 Amended return Gross receipts \$ P Name and address of principal officer Yes X No Application pending H(a) is this a group return for subordinates? Richard Williams PO Box 18023, Minneapolis, MN 55418 H(b) Are all subordinates included? 501(c)(3) X If "No," attach a list. (see instructions) 501(c) Tax-exempt status ✓ (insert no.) 4947(a)(1) or J Website: ► N/A H(c) Group exemption number K Form of organization X Corporation L Year of formation Trust Association Other • M State of legal domicile MN 1946 Part I Summary Briefly describe the organization's mission or most significant activities To provide recreation, education and promotion of markmenship activities to members Governance Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 15 Number of independent voting members of the governing body (Part VI, line 1b) 0 Total number of individuals employed in calendar year 2014 (Part V, line 2a) Total number of volunteers (estimate if necessary)
Total unrelated business revenue from Part VIII 6 0 7a Net unrelated business taxable income from Form SP F (INCOME) 0 Contributions and grants (Part VIII, line 1h) 44,632 57,687 APR 1 7 2018 Program service revenue (Part VIII, line 2g) 43,584 10 ,169 0 C Total revenue—add lines 8 through 11 (must equal Part VIII Charles A line 81,876 103,440 13 Grants and similar amounts paid (Part IX, column (A), lines-1-3)-600 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e). 0 Total fundraising expenses (Part IX, column (D), line 25) 17 86,547 90,001 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 90,601 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25). 86,747 19 Revenue less expenses Subtract line 18 from line 12 -4,871 12,839 Beginning of Current Year 20 Total assets (Part X, line 16) 281,754 318,768 21 Total liabilities (Part X, line 26) 43,556 24,608 Net assets or fund balances Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge (other than officer) s based on all information of which preparer has any knowledge and belief, it is true, correct, and copilplete. Declaration of prepares Sign Date Here BoD TREASURER Type or print name and title Preparer's signature PTIN Print/Type preparer's name Check Paid self-employed Preparer Firm's EIN Firm's name **Use Only** May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

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Form 990 (2014)

Form 9	90 (2014)	Gopher Rifle & Revolver	41-6051511	Page 2
Pa	rt III	Statement of Program Service Accomplishments		
		Check if Schedule O contains a response or note to any line in this Part III	<u> </u>	
1		escribe the organization's mission:		
	To provi	de recreation, education and promotion of markmenship activities to members		
				·
	5:14			
2		organization undertake any significant program services during the year which were not listed on Form 990 or 990-EZ?	□ vaa	X No
		Form 990 or 990-EZ? describe these new services on Schedule O.	Yes	[▼] MO
3		organization cease conducting, or make significant changes in how it conducts, any program		
J		?	Yes	X No
		describe these changes on Schedule O		<u> </u>
4		e the organization's program service accomplishments for each of its three largest program services,	as measured by	
		s Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allog		
		expenses, and revenue, if any, for each program service reported.		•
4a	(Code.) (Expenses \$ including grants of \$) (Revenue	\$)
	The orga	anization provided recreation, education and promotion of markmenship activities to over		
	450 mer	nbers		
4b	(Code) (Expenses \$ Including grants of \$) (Revenue	\$)
			·	
4c	(Code) (Expenses \$ including grants of \$) (Revenue	\$)
	(/(minute) / (minute) /		/
			·	
	Othor	Ogram Canagoo (Decembe in Schedule O.)		
4d	(Expens	ogram services. (Describe in Schedule O)	0.	
4e		es \$ 0 including grants of \$ 0) (Revenue \$ pgram service expenses • 0	0)	
	. July pile	- Companies - Comp		

41-6051511

Page 3

aıı	Checklist of Required Schedules			
_	1- H		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			¥
2	complete Schedule A	2		X
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
J	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4		<u> </u>		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-		
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u> </u>		
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		-	
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	_		<u> </u>
-	complete Schedule D. Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			<u> </u>
-	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt			
	negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	(.0)	1.5	-
	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	Х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u>x</u>
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		1	i
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	<u> </u>	X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"		1]
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		}	1
	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		l	,
40	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	_ ا	1	
4-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	-	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
46	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	├—	×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	1	l	_
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	├	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	4.		_
20-	If "Yes," complete Schedule G, Part III	19	 	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.	20a	 	X
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	<u>ا</u>	<u> </u>

Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	1		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		1	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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		ļ	
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	1	j	
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	i i		ı
	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	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l I
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a	-	
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			1
	current or former officers, directors, trustees, key employees, highest compensated employees, or	20		х
27	disqualified persons? If "Yes," complete Schedule L, Part II	26		
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	27		х
28	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L,	. 400		23.24
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	1		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	المفتئدة)	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	1		
_	Schedule L, Part IV	28Ь		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			\Box
	conservation contributions? If "Yes," complete Schedule M	30		<u> x</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31	<u> </u>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	1		1
	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		1	
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	ļ	LX.
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,	1	j	١.,
	III, or IV, and Part V, line 1	34	-	X
	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	254	l	
20	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	\vdash	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	20	l	1
27	organization? If "Yes," complete Schedule R, Part V, line 2	36	 	\vdash
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			ł
	VI	37	ŀ	×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	\ -	 	 ^
J 0	19? Note. All Form 990 filers are required to complete Schedule O	38	x	

Par			_	_					
	Check if Schedule O contains a response or note to any line in this Part V		Ļ						
		_	Yes	No					
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	- 1							
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			1					
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			~ '					
20	gaming (gambling) winnings to prize winners?	1c							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0		1	1					
b									
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions)	2b							
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	1	X					
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u>~</u>					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		T						
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	- 1	- 1						
	account)?	4a	- 1	Х					
b	b If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts	- 1	- 1						
	(FBAR)								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		- 1						
	organization solicit any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		Х					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			Į					
_	gifts were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).	İ	Ì						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>					
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was								
•	required to file Form 8282?	7c		х					
d	If "Yes," indicate the number of Forms 8282 filed during the year								
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
	sponsoring organization have excess business holdings at any time during the year?	8		Х					
9	Sponsoring organizations maintaining donor advised funds.			ļ					
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter			1					
a b	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.								
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . Section 501(c)(12) organizations. Enter			l					
''a	Gross income from members or shareholders			ĺ					
b	Gross income from other sources (Do not net amounts due or paid to other sources								
-	against amounts due or received from them)			1					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note. See the instructions for additional information the organization must report on Schedule O								
b	Enter the amount of reserves the organization is required to maintain by the states in which								
	the organization is licensed to issue qualified health plans		J	!					
С	Enter the amount of reserves on hand	4.	ļ	 					
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	I X					
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	ı	L					

Form 9	90 (2014) Gopher Rifle & Revolver 41-600	51 5 11	Р	age 6
Par		a "No		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O S	ee insi	tructio	ons.
	Check if Schedule O contains a response or note to any line in this Part VI		. :	$\overline{\mathbf{X}}$
Sect	ion A. Governing Body and Management			
0000	on A. Governing Dody and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . 15	5		
	If there are material differences in voting rights among members of the governing body, or]		
	if the governing body delegated broad authority to an executive committee or similar			,
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 15	<u> </u>		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with]		, ا
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	<u> </u>	X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	'	1	1
	one or more members of the governing body?	7a	X	<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	1	ł	1
	stockholders, or persons other than the governing body?	7b	X	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached		j	
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	<u> </u>	X
Seci	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	100	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	1.00		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	l	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	1		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by		}	1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		.]	.
а	The organization's CEO, Executive Director, or top management official	15a	X	↓
b	Other officers or key employees of the organization	15b	X	1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	1		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a	₩-	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		1	1
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard		-	-
	the organization's exempt status with respect to such arrangements?	16b	1	<u> </u>
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed	3\0		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c))	a)s on	y)	
	available for public inspection. Indicate how you made these available. Check all that apply			

18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)
	available for public inspection. Indicate how you made these available. Check all that apply

MI MEDSILE	☐ Another a website	[V] oboutedoest	Cities (explain in dericable o)
Describe in Schedule O	whether (and if so, how) the or	ganization made its gove	rning documents, conflict of interest policy, an
financial statements avai	ilable to the public during the ta	ax vear	

19	Describe in Schedule O whether (and if so, how) the organization made its governing documents	s, conflict of interest policy,	and
	financial statements available to the public during the tax year		
20	State the name, address, and telephone number of the person who possesses the organization's	books and records.	▶
	Richard Williams	(763) 257-3653	

DO Boy	19026	Minnoanalia	MNI SEA10

Form 990 (2014)	Gopher Rifle & Revolver	41-6051511	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensat	ed	
	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 related organizations below dotted line)	box,	unles er an	s pe	tion more rson irecto	o st st a b z th ந rt employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Dave Newell	3 00									
Director	0 00		_					0	0	
(2) Kim Frick	3 00		l	İ						
Director	0 00		┞	<u> </u>	_			0	0	
(3) Laune Pekank	4.00		ł					_	_	
Secretary	0.00		 	X	_		\vdash	0	0	
(4) Richard Williams	4 00					•		_	_	
Treasurer	0.00		├	X		<u> </u>		0	0	
(5) Rick Rarick	1 00								_	
Director	0.00	_	⊢	_	—	ļ	_	0	0	
(6) Rick Repovsch	1 00	1	١	١.,				_		
Vice President	0.00		-	X	_	_	_	0	0	
(7) Wade Brown	1 00			l		. !	1		_	
Executive Officer	0.00		ļ.,	-			<u> </u>	0	0	
(8) Rut McGhee	1 00	1	1	١		i i	ŀ	·	1	
President	0.00	-	⊢	×	<u> </u>		⊢	0	0	
(9) Andy Carlson	1 00							١ .		
Director	0 00	+	₩	-	-			0	0	
(10) Andy Mager	1 00		1							ļ
Chief Instructor	0 00		├	-	├-	<u> </u>	┝	0	0	
(11) Bruce Peglow	1 00	•]	1	
Director	0 00	_	⊢	├-	⊢		-	0	0	<u> </u>
(12) Dennis Robinson	1 00							١ .		
Director Character Charact	0.00	-	⊢	\vdash	\vdash	 	⊢	0	0	
(13) Steve Shimek	1 00				1			۱ .	_	
Director	0.00	+	╀	⊢	\vdash		-	0	0	
(14) Morgan Prock	100			1			l	۱		ł
Director	0 00	1. ^	<u> </u>	Ц.	Ц.,	l	L		<u> </u>	5 990 2014)

Pá	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
_	(A) Name and title	(B) Average	(C) Position (do not check more than o box, unless person is both officer and a director/truste					an	(D) Reportable	(E) Reportab			(F) timated	
		hours per week (list any hours for related organizations below dotted line)	Individual trustee or director		a Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensati from relati organizativ (W-2/1099-N	ed ons	com fr orga	nount of other pensation the anization in relate in its anization in its a	on on ed
	Bruce Aune			Г						_				
Direct (16)		0 00	×	\vdash	Н	\vdash		_	0		9			
			_	L				L				•		
(17)		 												
(18)														
(19)														
(20)			 					-						
(21)								┞						
(22)				Γ				Γ						
(23)					_			┝						
(24)														
(25)											-			
1b	Sub-total				·			•	0		0			0
c d	Total from continuation sheets to Part VII, S Total (add lines 1b and 1c)	ection A .				<i>.</i>		>	0		0			0 0
2	Total number of individuals (including but not li	mited to those lis				vho	recei	ved	more than \$100	0,000 of				
	reportable compensation from the organization	<u> </u>			0								Yes	No
3	Did the organization list any former officer, dire		-		loye	e, c	r higi	hes	t compensated					
	employee on line 1a? If "Yes," complete Scheo				٠							3		Х
4	For any individual listed on line 1a, is the sum of the organization and related organizations great													
	ındıvıdual .							-				4		X
5	Did any person listed on line 1a receive or accifor services rendered to the organization? If "Y									vidual		5		- X
Sec	tion B. Independent Contractors	, <u>, , , , , , , , , , , , , , , , , , </u>					po.		·	· · · · ·				
1	Complete this table for your five highest compe compensation from the organization Report of year	•										tax		
	(A) Name and business add	ress							(B) Description of ser	vices		(C Comper		
								+-						
2	Total number of independent contractors (inclu	-		tho	se	liste	_) who received					
	more than \$100,000 of compensation from the	organization	•				0	1						

Page 8

Part VIII Statement of Revenue

		Check if Schedule O contains a response or	note to any line in	this Part VIII			. 📙
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a	0		revenue		312-314
	b	Membership dues			į į		
	С	Fundraising events 1c		ļ			
a G	ď	Related organizations . 1d					
Si E	е	Government grants (contributions) 1e	0				
rio er S	f	All other contributions, gifts, grants, and					
ontifbu nd Oth		similar amounts not included above 11	15				
	g	Noncash contributions included in lines 1a-1f; \$	0				
ပ္မ	h	Total. Add lines 1a-1f	>	57,687			
-			Business Code				
2	2a	Discipline income	900099	36,307	36,307		
ě	ь	lunior auction rafflo	900099	5,113	5,113		·····
9	c	Miccollanoous	900099	245	245		
Ž	ď	Panguet	900099	1,919	1,919		
Sc	<u>.</u>	lackete nateh color			1,515		
Ta .		Jackets, patch sales	900099	0			
Program Service Revenue	I	All other program service revenue .		0			
	- 3	Total. Add lines 2a-2f		43,584			
	3	Investment income (including dividends, interest	, and		0.400		
		other similar amounts)		2,169	2,169		
	4	Income from investment of tax-exempt bond pro	ceeds.	0			
	5	Royalties .		0			
		(i) Real	(ii) Personal				
	6a	Gross rents					
	ь	Less. rental expenses .				İ	
	С	Rental income or (loss)	0		_		
	d	Net rental income or (loss)	. •	0			
	7a	Gross amount from sales of (i) Securities	(II) Other	:			
		assets other than inventory(0				
	b	Less cost or other basis					
		and sales expenses	ol ol				
	С	Gain or (loss) .	0		ľ		
	d	Net gain or (loss) .		o			-
e e	8a	Gross income from fundraising					
Revenue	٠	events (not including \$ 0		;			
9,6		of contributions reported on line 1c)					
_		0 5 4 8 4 4 4 0	o				
Jer					-		
Other	b					-	
_	C	Net income or (loss) from fundraising events		0			
	9a	Gross income from gaming activities					
		See Part IV, line 19 a					
		Less. direct expenses b	0		_	-	-
		Net income or (loss) from gaming activities		0			
	10a	Gross sales of inventory, less					
		returns and allowances a	0				
	b	Less cost of goods sold b	0	-			
	<u> </u>	Net income or (loss) from sales of inventory .		0			
	L	Miscellaneous Revenue	Business Code			_	
	11a	Miscellaneous and reimbursements		0			
	Ь			0			
	С			0			
	d	All other revenue		0			
	e	Total. Add lines 11a-11d		O	1		
i	12	Total revenue See instructions	•	103.440	45 753	n	

Form 990 (2014) Gopher Rifle & Revolver 41-6051511 Page 10 Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX. (A) (B) (D) Do not include amounts reported on lines 6b, 7b, Total expenses Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations domestic governments. See Part IV, line 21 600 Grants and other assistance to domestic individuals See Part IV, line 22 0 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members ō 5 Compensation of current officers, directors, trustees, and key employees 0 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 Other salaries and wages. 0 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 0 Other employee benefits 0 10 Payroll taxes 0 11 Fees for services (non-employees) Management 0 Legal 0 b Accounting . . 0 C d Lobbying 0 Professional fundraising services. See Part IV, line 17. 0 f Investment management fees . . . 0 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion 278 13 Office expenses 13,581 14 Information technology 360 15 Royalties 0 16 Occupancy. 0 17 Travel 0 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 0 19 Conferences, conventions, and meetings 0 20 Interest . . . 0 21 Payments to affiliates 0 22 Depreciation, depletion, and amortization 0 23 Insurance 4,529 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 () Schedule Attached 71.253 b 0 0 ď 0 e All other expenses 0 Total functional expenses. Add lines 1 through 24e 90,601 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)

33

Total net assets or fund balances

Total liabilities and net assets/fund balances

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 60,320 Cash-non-interest-bearing . . . 33,877 2 2 Savings and temporary cash investments 184,133 194,704 3 Pledges and grants receivable, net 3 0 0 Accounts receivable, net . . . 4 0 4 0 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 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. 7 Notes and loans receivable, net inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 63,744 b Less accumulated depreciation. 10b 63,744 63,744 11 Investments---publicly traded securities . 0 0 11 12 Investments-other securities See Part IV, line 11 0 12 0 13 Investments-program-related. See Part IV, line 11 0 13 0 14 0 Intangible assets 0 14 15 Other assets See Part IV, line 11. 0 15 0 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 318.768 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L. 22 23 23 0 Secured mortgages and notes payable to unrelated third parties 0 24 Unsecured notes and loans payable to unrelated third parties 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete <u>42,1</u>98 Part X of Schedule D 25 24,608 26 Total liabilities. Add lines 17 through 25 24,608 26 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 257,146 27 275,212 28 Temporanly restricted net assets. 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds. 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32

275.212

318,768

257,146

281,754

33

Form 9	90 (2014) Gopher Rifle & Revolver	41-60	51511	Pag	e 12
Part	XI Reconciliation of Net Assets			_	
	Check if Schedule O contains a response or note to any line in this Part XI			[
1	Total revenue (must equal Part VIII, column (A), line 12)	1		103	,440
2	Total expenses (must equal Part IX, column (A), line 25) .	2			,601
3	Revenue less expenses Subtract line 2 from line 1	3		12	,839
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4		257	,146
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		269	<u>,985</u>
Part				1	
	Check if Schedule O contains a response or note to any line in this Part XII	· ·			닏_
		_		Yes	No
1	Accounting method used to prepare the Form 990.	nd	1 1	į	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		1 1		
_	Schedule O.				-,
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	•	2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		1 1		
	reviewed on a separate basis, consolidated basis, or both.		1 1		l
	Separate basis				
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		1 1		
	Separate basis Donsolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	F	1		
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		ļ
	If the organization changed either its oversight process or selection process during the tax year, explain in		-{		1
	Schedule O		1 1		ļ'
3a	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		1		1
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u> </u>	3b	00.5	
			Earm	uui)	(2014)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

Open to Public Inspection

OMB No 1545-0047

2014

Department of the Treasury Internal Revenue Service

Name of the organization

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

Gopher Rifle & Revolver 41-6051511								
Part	Organizations Maintaining Dono	or Advised Funds or Other Similar F	unds or Accounts.					
Complete if the organization answered "Yes" to Form 990, Part IV, line 6								
		(a) Donor advised funds	(b) Funds and other accounts					
1	Total number at end of year .							
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year) .							
4	Aggregate value at end of year .							
5	Did the organization inform all donors and do							
	funds are the organization's property, subject							
6	Did the organization inform all grantees, dono							
	used only for charitable purposes and not for							
	purpose conferring impermissible private ben	entr	Yes No					
Part		110 / H / E	•					
		ered "Yes" to Form 990, Part IV, line 7	<u>/</u>					
1	Purpose(s) of conservation easements held b		of total and the second second					
	Preservation of land for public use (e.g., recre	=	n of a historically important land area					
	Protection of natural habitat	Preservation	n of a certified historic structure					
	Preservation of open space							
2	Complete lines 2a through 2d if the organizat	on held a qualified conservation contributio	n in the form of a conservation					
	easement on the last day of the tax year		Held at the End of the Tax Year					
а	Total number of conservation easements	•	2a					
b	Total acreage restricted by conservation ease		2b					
C	Number of conservation easements on a cert	` ,	<u>2c</u>					
d	Number of conservation easements included							
	historic structure listed in the National Registe		2d					
3	Number of conservation easements modified	transferred, released, extinguished, or terr	minated by the organization					
	during the tax year Number of states where property subject to c	proper ation accoment is lessted.						
4 5	Does the organization have a written policy re		handling of					
•	violations, and enforcement of the conservation		Yes No					
6	Staff and volunteer hours devoted to monitori							
•	>	ng, mopeoung, and emotoring octioer valien	odochio daning trio your					
7	Amount of expenses incurred in monitoring, ii	especting, and enforcing conservation ease	ments during the year					
	▶ \$	3	,					
8	Does each conservation easement reported of	on line 2(d) above satisfy the requirements	of section					
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		Yes No					
9	In Part XIII, describe how the organization rej							
	balance sheet, and include, if applicable, the	text of the footnote to the organization's fina	ancial statements that describes					
	the organization's accounting for conservation							
Part		ections of Art, Historical Treasures,	_					
	Complete if the organization answ	ered "Yes" to Form 990, Part IV, line t	8					
1a	If the organization elected, as permitted under	r SFAS 116 (ASC 958), not to report in its r	revenue statement and balance sheet					
	works of art, historical treasures, or other sim							
	of public service, provide, in Part XIII, the text							
b	If the organization elected, as permitted unde	• • •						
	works of art, historical treasures, or other sim		tion, or research in furtherance					
	of public service, provide the following amour		. .					
	(i) Revenue included in Form 990, Part VIII,	ine 1	. • • • • • • • • • • • • • • • • • • •					
2	(ii) Assets included in Form 990, Part X	with biotonical transporters and transport	. P b					
2	If the organization received or held works of a							
	following amounts required to be reported un	, , ,	. A					
a	Revenue included in Form 990, Part VIII, line	, , ,						

	Gopher Kille & Revolver							41-00			age Z
Part										inued	
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant										
	use of its collection items (check all that app	ly).									
а	Public exhibition		ď	Ш	Loan o	or exchange p	orogran	ns			
b	Scholarly research		e		Other	·					
С	Preservation for future generations										
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII										
5	During the year, did the organization solicit of	or receive dona	ations	of a	rt, historic	al treasures,	or othe	er simılar			
	assets to be sold to raise funds rather than t								Ye	s 🔲	No
Part	IV Escrow and Custodial Arrange	ments.									
	Complete if the organization answ		to Fo	orm 9	990, Par	t IV, line 9,	or rep	orted an amou	unt on Fo	rm	
	990, Part X, line 21										
1a	Is the organization an agent, trustee, custod	ian or other in	terme	diary	for contri	ibutions or ot	her ass	sets not			
	included on Form 990, Part X?				•				Ye	s 🔲	No
b	If "Yes," explain the arrangement in Part XIII	and complete	the f	ollow	ıng table		,				
									Amount		
C	Beginning balance		-				10				0
d	Additions during the year						10				
e	Distributions during the year .	-					16				
f	Ending balance			-							0
2a	Did the organization include an amount on F	orm 990, Part	X, lin	ne 21	, for escro	ow or custodi	al acco	unt liability?	Ye	ıs 🔼	No
b	If "Yes," explain the arrangement in Part XIII	Check here	f the	expla	ination ha	is been provi	ded in	Part XIII			
Part	V Endowment Funds.						_				
	Complete if the organization ansi	wered "Yes"	to Fo	orm 9	990, Par	t IV, line 10					
	(a)	Current year	(ŧ) Pnoi	r year	(c) Two years	back	(d) Three years ba	ck (e)Fo	ur years	back
1a	Beginning of year balance .	0			0		0		0		0
b	Contributions .]				
C	Net investment earnings, gains,				1		1		1		
	and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
_	and programs .										
f	Administrative expenses									····	
9	End of year balance	0			0		<u> </u>		0		0
2	Provide the estimated percentage of the cur	rent year end		•	ne 1g, co	iumn (a)) hel	d as:				
a	Board designated or quasi-endowment	P	%	?_							
b	Permanent endowment Temporarily restricted endowment	%									
С	The percentages in lines 2a, 2b, and 2c sho		04								
3a	Are there endowment funds not in the posses			ration	that are	held and ad-	minieta	rad for the			
va	organization by	200110111160	19a1 112	Lauvi	i ulat ale	i iciu aliu dui	10111516	ieu ioi tile	i	Yes	No
	(i) unrelated organizations								3a(i)	, 63	.,,,,
	(ii) related organizations			•		•	•	•	3a(ii)		
b	If "Yes" to 3a(ii), are the related organization	ns listed as rec	uired	on S	Schedule I	R? .	•	_	3b		
4	Describe in Part XIII the intended uses of the							•			
Part											
	Complete if the organization ans		to Fo	orm s	990, Par	t IV, line 11	a Se	e Form 990. P	art X, lin	e 10	
	Description of property	(a) Cost or ot				st or other	T) Accumulated		ook valu	e
		(investm				s (other)		depreciation			
1a	Land			0		42,600					2,600
b	Buildings			0		0		0			0
С	Leasehold improvements .			0		0		0			0
d	Equipment			0		21,144		0		2	21,144
е -	Other .	1		<u> </u>		0	<u> </u>	0	<u> </u>		0
lotat	Add lines 1a through 1e (Column (d) must a	egual Form 99	U Pa	rt X	column (f	Bitine 10cl		▶		•	3.744

		100 0 0 000 0	4 10 4 11 10 E 000 D	
			art IV, line 11b See Form 990, Par	t X, line 12.
··	Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1) Financial (0	<u> </u>	
	eld equity interests	0		
				
<u>(B)</u>				
(E)				
(G)				
(H)				
	nust equal Form 990, Part X, col (B) line 12.)	0		
Part VIII	Investments—Program Relat			
			art IV, line 11c See Form 990, Par	t X. line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	·····			
	nust equal Form 990, Part X, col (B) line 13)	0		
Part IX	Other Assets.			
	· · · · · · · · · · · · · · · · · · ·		art IV, line 11d See Form 990, Par	
	(a) Description	(b) Bo	ook value
(1)				
(2)				
(4)				
			1	
(5)				
(5) (6) (7)				
(5) (6)				
(5) (6) (7) (8) (9) Total. (Colum	n (b) must equal Form 990, Part X, co	ol (B) line 15)		
(5) (6) (7) (8) (9)	Other Liabilities. Complete if the organization ar		rart IV, line 11e or 11f See Form 9s	
(5) (6) (7) (8) (9) Total. (Colum Part X	Other Liabilities. Complete if the organization ar line 25	nswered "Yes" to Form 990, P	<u></u>	
(5) (6) (7) (8) (9) Total. (Colum Part X	Other Liabilities. Complete if the organization ar line 25 (a) Description of liability		<u></u>	
(5) (6) (7) (8) (9) Total. (Colum Part X	Other Liabilities. Complete if the organization ar line 25 (a) Description of liability income taxes	nswered "Yes" to Form 990, P	<u></u>	
(5) (6) (7) (8) (9) Total. (Colum Part X	Other Liabilities. Complete if the organization ar line 25 (a) Description of liability Income taxes dues	nswered "Yes" to Form 990, P	<u></u>	
(5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal (2) Prepaid (3) Sales ta	Other Liabilities. Complete if the organization ar line 25 (a) Description of liability Income taxes dues	nswered "Yes" to Form 990, P	<u></u>	
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(5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal (2) Prepaid (3) Sales tat (4) (5) (6)	Other Liabilities. Complete if the organization ar line 25 (a) Description of liability Income taxes dues	nswered "Yes" to Form 990, P	<u></u>	
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(5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federal (2) Prepaid (3) Sales tat (4) (5) (6)	Other Liabilities. Complete if the organization ar line 25 (a) Description of liability Income taxes dues	nswered "Yes" to Form 990, P	<u></u>	

	le D (Form 990) 2014 Gopher Rifle & Revolver	41-6051511	Page 4
Part	·	er Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a		
1	Total revenue, gains, and other support per audited financial statements	1 1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1	
a	Net unrealized gains (losses) on investments	_	
b	Donated services and use of facilities	⊣ !	
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		•
e	Add lines 2a through 2d Subtract line 2e from line 1	2e	<u>0</u>
3 4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3	
4 а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	0
Part		<u> </u>	
rail	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	s per Return.	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments	⊣	
c	Other losses 2c	\dashv	
ď	Other (Describe in Part XIII)	-	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
С	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	0
Part	XIII Supplemental Information.		
Provid	de 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, Pa	rt XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional info	rmation	

Schedule D (Form 9	990) 2014	Gopher Rifle & Revolv	er		41-	6051511	Page 5
Part XIII	Supple	emental Information	(continued)				
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### SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Employer identification number

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

Open to Public Inspection

Gopher Rifle & Revolver	41-6051511						
Form 990, Part VI, Line 12c. The Organization monitors compliance with the conflict of							
interest policy through discussion at board meetings. The Board members are instructed to							
bring any issues to the attention of the President of the board							
Form 990, Part VI, Section C, Line 19 ⁻ The Organization makes its governing documents,							
conflict of interest policy, and financial statements available for public inspection upon							
wntten request							
*							

Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization	Employer identification number
Gopher Rifle & Revolver	41-6051511
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