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Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury

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.

Open to Public

Inte	nal Heven	ue Service	<u>I</u> Inform	mation about	Form 990 and its i	nstructions is at	www.irs.g	ov/form99	<u>0</u>	Inspect	on
<u> </u>	For the	2015 caler	ndar year, or tax ye	ear beginning	January 1	, 2015, a	ind ending	Decer	nber 31	, 20 15	
В	Check If	applicable	C Name of organization	n Aberdeen C	iun Club, Inc.				D Employer	identification nu	mber
	Address		Doing business as							46-0375398	
	Name ch	nange	Number and street (or P.O. box if ma	all is not delivered to s	reet address)	Room/suite		E Telephone		
	Initial ret	-	PO Box 1235							605-228-2449	
$\overline{\Box}$		m/terminated		r province, coun	try, and ZIP or foreign	postal code				700 LLU L 110	
\exists	Amende		Aberdeen, SD 574	•	,,	•			G Gross rec	ointe ¢	115021
\exists			F Name and address of		r Jama Oriale						115031
ш	Applicati				-					bordinates? Ves	∐ No
_			2202 15th Ave SE							ncluded?	
<u> </u>		mpt status	☐ 501(c)(3)		4) ◀ (insert no)	4947(a)(1) or	<u> 527</u>	1		·	is)
<u>J</u>	Website		v.aberdeengunclub		<u> </u>				exemption n		
K		organization [st Associa	tron	L Yea	r of formation	r 1980	M State o	f legal domicile	SD
Р	artl	Summa									
_	1	Briefly de	scribe the organiz	zation's miss	on or most signif	icant activities:	Recreation	onal Shoot	ing and Hu	nter Safety	·
Activities & Governance											
ᅙ	ŀ										
ě	2		s box ▶☐ if the o			-	sposed of	more thar	1 25% of it	s net assets.	
ၓၟ	3	Number of	of voting members	s of the gove	ming body (Part \	/I, line 1a)			3		7
•ಥ	4	Number of	of independent vo	ting member	s of the governing	body (Part VI,	line 1b)		4		6
Ę.	5	Total num	nber of individuals	employed in	n calendar year 20)15 (Part V, line	2a) .		5	- :-	11
₹	6	Total num	ber of volunteers	(estimate if	necessary)				6		15
ĄĊ	7a	Total unre	elated business re	venue from I	Part VIII, column (C), line 12 .			7a		0
	b	Net unrela	ated business tax	able income	from Form 990-T	, line 34			7b		0
					,	7.6		Prior Y	ear	Current Ye	
_	8	Contributi	ions and grants (F		57525		32667				
Revenue	9	Program s	service revenue (F	Part VIII. line	2a)				94153		67830
Š	10	Investmen	nt income (Part VI	Il column (A	lines 3 4 and 2	x 0 9 2015		•	15854		
æ	11	Other reve	enue (Part VIII, co	_			12036				
	12		enue—add lines 8		3459		-3400				
	13		nd similar amounts						170991		109133
	14					•	· · ⊢		0		0
	1		oald to or for mem	•		•	- <u>' .</u> . ⊢		0		0
Expenses	15		other compensation						28703		18351
Ë	16a		nal fundraising fe	-		•	· ·		0		0
꿃	_b		draising expenses	•	• • •						
_	17		enses (Part IX, co				. • •		89768		53822
	18		enses. Add lines						118471		72173
	19	Revenue	less expenses. Su	ubtract line 1	8 from line 12 .				52520		36960
S of		_					Be	ginning of Co	ırrent Year	End of Yea	ir
Net Assets o	20	Total asse	ets (Part X, line 16	6)			· · <u> </u>		515106		552066
¥ E	21	Total liabi	ilities (Part X, line	26)					66311		66311
Ž	22		s or fund balance	s. Subtract li	ne 21 from line 20	<u></u>			448795		485755
P	art II	Signat	ure Block								
			ry, I declare that I have							knowledge and	belief, it is
tru	e, correct	t, and comple	ete. Declaration of prep	parer (other than	officer) is based on all	information of white	ch preparer h	as any know	ledge.		
			1						_		
Sig	gn	Signa	ature of officer	1	Ô			Da			
He	re		Lun E	Soul	PREJ	IDEHT		5	5-1-16	1	
		Type	or print name and title			-111					
Pa	.i.d	Print/Typ	oe preparer's name		Preparer's signature		Date		Charle	PTIN	
									Check _ self-emple		
	epare		ame 🕨		·				n's EIN ▶	<u></u> 1	
US	e Onl	· y	ddress >						one no.		
Ma	y the IF		this return with t	he preparer s	shown above? (se	e instructions)				· · Tyes	No
_			ction Act Notice, se					11282V	<u> </u>		90 (2015)

Part				
			Part III	🗸
1	Briefly describe the organization's miss			
	To provide a recreational shooting oppor			
2	Did the organization undertake any sig prior Form 990 or 990-EZ?	nificant program services during the	year which were not listed on the	Yes 🗸 No
	If "Yes," describe these new services of	on Schedule O.		
3	Did the organization cease conducti services?	ng, or make significant changes in		Yes ☑ No
	If "Yes," describe these changes on So	chedule O.	_	
4	Describe the organization's program s			
	expenses. Section 501(c)(3) and 501(c		ort the amount of grants and allocat	ions to others,
	the total expenses, and revenue, if any	, for each program service reported.		
4a	(Code:) (Expenses \$	300 including grants of \$	0) (Revenue \$	0)
	Hunter Safety - over 200 students trained	I in the proper use of firearms and hunt	er ethics.	

4h	(Codo: \/Evpopsos \$	27940 including grants of \$	A) (Payanua ¢	E407C\
4b	(Code:) (Expenses \$	37940 including grants of \$	0) (Revenue \$	54976)
4b	Recreational shooting club open to the p	ublic - over 5000 rounds of trap provide	ed to the general public. Over 500 indivi	iduals shot ın
4b	Recreational shooting club open to the p leagues and registered shoots during the	ublic - over 5000 rounds of trap provid e year.	ed to the general public. Over 500 indivi	iduals shot in
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	Recreational shooting club open to the p leagues and registered shoots during the	10000 including grants of \$ cipated in a youth league during the 20	ed to the general public. Over 500 indivi	iduals shot in
4c	Recreational shooting club open to the pleagues and registered shoots during the control of the con	10000 including grants of \$ cipated in a youth league during the 20	0) (Revenue \$	iduals shot in

Part I	V Checklist of Required Schedules			
			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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓_	
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3_		1
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		1
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	√	
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		√
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		√
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		√
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	√	<u>'</u>
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		1
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		1
đ	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		✓
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
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		1
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
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		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
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		1
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		1
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		1
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		1
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		1
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		1

Form **990** (2015)

Part	Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		✓
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		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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			
240	employees? If "Yes," complete Schedule J	23		✓
24 a	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 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
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 transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
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 current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
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		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			() ()
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	CHARLET IN	1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	-	1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			-
	Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	:	1
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		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		√
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
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		1
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		1
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 VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	/	

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable 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 11			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓_	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		_	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		√
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		✓
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			,
	account)?	4a		✓
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 (FRAD)			
E-	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		/
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		Y
•	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	1	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Oa	•	
_	gifts were not tax deductible?	6b		/
7	Organizations that may receive deductible contributions under section 170(c).			
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		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		1
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		/
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<u>7h</u>		✓
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<u> </u>		ļ.,
•	sponsoring organization have excess business holdings at any time during the year?	8		✓
9_	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		✓
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	90		-
а	Initiation fees and capital contributions included on Part VIII, line 12	ĺ		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	ł		
11	Section 501(c)(12) organizations. Enter:	1		
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them.)	}		
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 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	L		<u> </u>
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			1
	the organization is licensed to issue qualified health plans	1		
C	Enter the amount of reserves on hand		<u> </u>	<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b	1	l

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Schedule O contains a response or note to any line in this Part VI	ee ins	tructi	ons.
Section	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	_	
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		1
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	4 5 6	√	√
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	•	✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓	
ь	Each committee with authority to act on behalf of the governing body?	8b	✓	
9 Saati	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	-d- 1	✓
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	165	√
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		▼
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		<u>, </u>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		_	
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a 12b		✓
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13 14 15	Did the organization have a written whistleblower policy?	13		√
a b 16a	The organization's CEO, Executive Director, or top management official	15a 15b		✓
b	with a taxable entity during the year?	16a		✓
	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		
Secti	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ► None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	i 501(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.	erest	policy	/, and
20	State the name, address, and telephone number of the person who possesses the organization's books and red Jerry Brick 2202 15th Ave SE Aberdeen, SD 57401 605-228-2449	cords	· •	

Part VII	Compensation of Officers, D	Directors, Trustees,	Key Employees, Hig	ghest Compensated E	mployees, and
	Independent Contractors				

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.

Check this box if neither the organization nor	r any relate	d orga	aniz	atio	n co	ompe	nsa	ted any curren	t officer, directoi	, or trustee.
				(0	; }					
(A)	(B)			Pos				(D)	(E)	(F)
Name and Title	Average hours per week (list any	box,	cer and a director/trustee) compensation compens						Reportable compensation from related	Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Jerry Brick	5			,						_
Aberdeen, SD			H	✓			<u> </u>	0	0	0
(2) Ken Hallstrom	11			1				_		_
Aberdeen, SD			H				├	0	0	<u>0</u>
(3) Bob Bucholz Aberdeen, SD	1			1				0	o	
(A) Harden Verme	1			÷			┢╌			0
Aberdeen, SD	 			1				0	0	G
(5) Todd Hanson	1	<u> </u>					_			, , , , , , , , , , , , , , , , , , ,
Aberdeen, SD		✓						l 0	o	0
(6) Dennis Arment	1							1		
Aberdeen, SD		✓						о	0	0
(7) Jeff Serfoss	1									
Aberdeen, SD		✓						0	0	
(8)					:					
(9)							<u> </u>			
(10)			_							
(11)										
(12)							_			
(13)										
(14)							-			

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
					•	C} ition								
	(A)	(B)	(do n	ot ch			than o	one	(D)	(E)			(F)	
	Name and title	Average hours per					is both or/trust		Reportable compensation	Reportable compensation			mated unt of	
		week (list any		_		_		,	from	related		of	ther	
		hours for related	호텔	ıstıtı	Officer	ey e		Former	the organization	organization (W-2/1099-Mi			ensatior n the	ו
		organizations	ecta	tio	4	ğ	by st c	욕	(W-2/1099-MISC)	(** 23 1000 ***	55,	orgar	nization	
		below dotted line)	7 2			Key employee	~ A						related ızatıons	
		1	Individual trustee or director	Institutional trustee		٩	Highest compensated employee					organ	izations	•
				8			ated	1						
(15)						-	-		-					
3		†	1								i			
(16)			-											-
X.::/		†									1			
(17)														
3		† 	1		ļ						1			
(18)														
J		†	1											
(19)		1												
		T	1			1								
(20)														
(21)								_						
(22)								1						
					_	<u> </u>	<u> </u>	<u> </u>						
(23)]											
			ļ			_		Ь.	<u></u>					
(24)			1											
			ļ	_	_	_		<u> </u>						
(25)			4			İ								
		<u> </u>		<u>l</u>	L			Ļ						
1b	Sub-total		٠.	•	•	•	•		0		0			0
C	Total from continuation sheets to Part			•	•	•	• •		0		0			0
<u>q</u>	Total (add lines 1b and 1c)						· · ·	<u>.</u>			0			0
2	Total number of individuals (including but reportable compensation from the organization)		to tr	1056	lis	ted	above	e) w	ho received m	ore than \$10	10,000	ot		
	reportable compensation from the organi	Zation											<u></u> T	
3	Did the organization list any former of	ficer direc	tor c	or tr	niet	00	kev d	-mr	nlovee or high	est comper	hatean		Yes	No
Ŭ	employee on line 1a? If "Yes," complete							- III				3		1
4	For any individual listed on line 1a, is the							nn a	and other comm	oneation fro	m the	<u> </u>		<u> </u>
•	organization and related organizations													
	individual			,				·,				4		1
5	Did any person listed on line 1a receive of	or accrue co	ompe	nsa	tion	fro	m anv	v un	related organiz	zation or ind	ıvidual			<u> </u>
•	for services rendered to the organization											5		1
Section	on B. Independent Contractors				-				· · · · · ·				LL	
1	Complete this table for your five highest	compensat	ed in	dep	end	ent	contr	act	ors that receive	ed more that	n \$100.	.000 of		
	compensation from the organization. Rep													iX.
	year.	•						•			•			
	(A)								(B)			(C)		
	Name and business add	iress							Description of s	ervices	C	Compens	ation	
2	Total number of independent contractor							o th	nose listed ab	ove) who				
	received more than \$100,000 of compens	ation from	the or	roar	izat	tion	▶							

Part	VIII	Statement of Reve						_
		Check if Schedule O) contains a r	esponse or note to	o any line in this (A) Total revenue	Part VIII (B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
के क	1a	Federated campaigns	s 1	a o				
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues .						
2, E	С	Fundraising events .						
iifts ar A	d	Related organizations	_	d o				
S, G	е	Government grants (con						
io S	f	All other contributions, g				İ		
the Et		and similar amounts not inc	luded above 🛾 🖠	f 13291		İ		
E Ó	g	Noncash contributions include	ded in lines 1a-1f:					į
a Co	h	Total. Add lines 1a-1	f		32667			
		-		Business Code				
le l	2a	Shooting Leagues			40178	40178	0	0
æ	b	ATA Registered Comp	etition		8292	8292	0	0
je Je	С	Practice Trap Shooting			6506	6506	0	0
Sen	d	Hunter Safety			0	0	0	0
Ē	е	Youth League Income			12854	12854	0	0
Program Service Revenue	f	All other program ser	vice revenue .	. 0	0	0	0	0
<u> </u>	g	Total. Add lines 2a-2			67830			
	3	Investment income						
	İ	and other similar amo	•		0	0	0	0
	4	Income from investment	t of tax-exempt	bond proceeds ►	0	0	0	0
	5	Royalties			0	0	0	0
			(i) Real	(ii) Personal				
	6a	Gross rents	120	36 0				
	Ь	Less: rental expenses		0 0				
	С	Rental income or (loss)	120	36 0			·	
	_d	Net rental income or	} '		12036	12036	0	0
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
	.	assets other than inventory		0 0				
	b	Less: cost or other basis						
	_	and sales expenses .	· · · · · · · · · · · · · · · · · · ·	0 0				
	C	Gain or (loss)	L	0 0				
	d	Net gain or (loss) .		. <u> P</u>	0	0	0	0
Other Revenue	8a b	Gross income from fuevents (not including \$ of contributions reporte See Part IV, line 18 Less: direct expenses	16431 ed on line 1c).	a <u>0</u>				
0	C	Net income or (loss) f		- 10.10	-4348		0	0
		Gross income from ga		s	-7070			
	b	Less: direct expenses	s	b 0				
	С	Net income or (loss) f	from gaming a	ctivities >	0	0	0	0
	10a	Gross sales of in returns and allowance						
	b	Less: cost of goods s		b 1550				
	С	Net income or (loss) f			184	184	0	0
		Miscellaneous F		Business Code				
	11a	Sign Income	·	_	764	764	0	0
	b			-	<u> </u>	i		
	С				 			
	d	All other revenue .		L				
	e	Total. Add lines 11a-		💺	764	<u> </u>		
	12	Total revenue. See in	ristructions.	<u></u> ▶	109133	80814	0	5 000 :====
								Form 990 (2015)

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 respon	se or note to any lir	ne in this Part IX .						
	t include amounts reported on lines 6b, 7b, , 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				1				
	and domestic governments. See Part IV, line 21	. 0	0						
2	Grants and other assistance to domestic								
	ındıviduals. See Part IV, line 22	0	0						
3	Grants and other assistance to foreign								
	organizations, foreign governments, and foreign								
	individuals. See Part IV, lines 15 and 16	0	0						
4	Benefits paid to or for members	0	0						
5	Compensation of current officers, directors,								
	trustees, and key employees	0	0	0	0				
6	Compensation not included above, to disqualified								
	persons (as defined under section 4958(f)(1)) and								
_	persons described in section 4958(c)(3)(B)	0	0	0	0				
7	Other salaries and wages	15791	15791	0	0				
8	Pension plan accruals and contributions (include								
_	section 401(k) and 403(b) employer contributions)	0	0	0	0				
9	Other employee benefits	0	0	0	0				
10	Payroll taxes	2560	2560	0	0				
11	Fees for services (non-employees):	_		_	_				
a	Management	. 0	0	0	0				
b	Legal	0	0	0	0				
C	Accounting	0	0	0	0				
d	Lobbying	0	0	0	0				
e •	Professional fundraising services. See Part IV, line 17 Investment management fees	0			0				
f g	Other. (If line 11g amount exceeds 10% of line 25, column	0	0	0	0				
9	(A) amount, list line 11g expenses on Schedule O.)				•				
12	Advertising and promotion	0 734	0:	734	0				
13	Office expenses	734	0	795	0				
14	Information technology	0	0	793	0				
15	Royalties	0	0	0	0				
16	Occupancy	12829	0	12829	0				
17	Travel	0	0	0	0				
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials	o	0	0	0				
19	Conferences, conventions, and meetings .	0	0	0	0				
20	Interest	900	0	900	0				
21	Payments to affiliates	0	0	0	0				
22	Depreciation, depletion, and amortization	0	0	0	0				
23	Insurance	8675	0	8675	0				
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	Targets	16871	16871	0	. 0				
b	Registered Shoot Expenses	3173	3173	0	0				
C	League Expenses	8239	8239	0	0				
d	Sales Tax Expense	1606	1606	0	0				
е	All other expenses	0	. 0	0	0				
25	Total functional expenses. Add lines 1 through 24e	72173	48240	23933	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)			•					

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Par	t X		🗆
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	8935	1	10982
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	0	5	0
ts.	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
As	8	Inventories for sale or use	1325	8	1325
	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 539759			
	b	Less: accumulated depreciation 10b 0	504846	10c	539759
	11	Investments—publicly traded securities		11	0
	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	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	515106	16	552066
	17	Accounts payable and accrued expenses	0	17	0
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
es	22	Loans and other payables to current and former officers, directors,			
Ħ		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L	30000	22	30000
_	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	36311	24	36311
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			
	00	-	0	25	0
	26	Total liabilities. Add lines 17 through 25	66311	26	66311
ces		complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets		27	
Ва	28	Temporarily restricted net assets		28	
Ā	29	Permanently restricted net assets		29	
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.			
ţ	30	Capital stock or trust principal, or current funds	0	30	0
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
Net Assets	32	Retained earnings, endowment, accumulated income, or other funds .	448795	32	485755
Š	33	Total net assets or fund balances	448795	33	485755
_	34	Total liabilities and net assets/fund balances	515106	34	552066
_				_	Form 990 (2015)

_	-4	•
Page	- 1	- 2
ı ayç		-

	- (9
Part						
	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			1	09133
2	Total expenses (must equal Part IX, column (A), line 25)	2				72173
3	Revenue less expenses. Subtract line 2 from line 1	3				36960
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			5	15106
5	Net unrealized gains (losses) on investments	5				0
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				o
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10			5	52066
Part	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: Cash Accrual Other		_			1
	If the organization changed its method of accounting from a pnor year or checked "Other," ex	plaın	ın	-		
	Schedule O.					
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled (or			
	reviewed on a separate basis, consolidated basis, or both:					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		-	2b		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on	a			
	separate basis, consolidated basis, or both:					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		Ĺ			}
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or			Ī		
	of the audit, review, or compilation of its financial statements and selection of an independent account			2c		✓
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın	ın			
	Schedule O.		<u> </u>			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	ın			
	the Single Audit Act and OMB Circular A-133?			За		✓
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?			I		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.		3b		✓
				Forn	990	(2015)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization		Employer identification number
Aberdeen Gun Club, Inc.		46-0375398
Part III, Line 4d		
Part III, Line 40		
Net rental income \$ 12036		
Income from Inventory 184		
Sign Income 764		
Part IV, Line11b		
This form 990 is only reviewed by the Pr	resident of the club. It is available for review by anyone v	who asks for it. Typically, it is
provided to our bank as a requirement of	of our Line of Credit.	•••••
Deat VII 1 inc. 40		
Part VI, Line 19		
The governing documents and financial	statements of the Aberdeen Gun Club are available to a	ny member of the public upon
request. Contact the President of the cl	ub.	
	ub.	*
•		······································

	•	

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

20**15**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

If the organization answered "Yes," on 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," on 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

	ee separate instructions), tr				
	ection 501(c)(4), (5), or (6) orga of organization	inizations: Complete Part III.		Employer ider	ntification number
	een Gun Club, Inc.				46-0375398
		e organization is exempt une	der section 5016	c) or is a section 527	
1		he organization's direct and indir			
2	•		•	~	3
3	•				
Part	I-B Complete if the	e organization is exempt und	der section 501(c)(3).	
1		excise tax incurred by the organiz			S
2		excise tax incurred by organization)
3	•	ed a section 4955 tax, did it file Fe	•		
4a					Yes No
	If "Yes," describe in Part		1 504/		/ 1/01
Part 1		e organization is exempt und ly expended by the filing organ			(c)(3).
'		· · · · · · · · · · · · · · · ·		•	
2		filing organization's funds contri			·
_		vities			
3	•	expenditures. Add lines 1 and		•	
	•	·		·	
4	Did the filing organization	n file Form 1120-POL for this yea	r?		Yes No
5	Enter the names, address	ses and employer identification nu	umber (EIN) of all s	ection 527 political organi	zations to which the filing
		ents. For each organization listed			
		ontributions received that were pr			
	as a separate segregated	fund or a political action commit	tee (PAC). If addition	onal space is needed, prov	de information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
					delivered to a separate political organization. If
					none, enter -0
/4\					···
(1)					
(2)					
(3)					
					ļ
(4)					
<i>(E)</i>			 		
(5)					
(6)					
,-,			1		1

Page	2

Pa	rt II-A Complete if the organization section 501(h)).	is exempt	under section 50	01(c)(3) and file	d Form 5768 (ele	ction under
A	Check ► ☐ if the filing organization belo					up member's
_	name, address, EIN, expens				•	
В	Check ▶ ☐ if the filing organization chec			trol" provisions a	' '	
	Limits on Lobby (The term "expenditures" mea			,	(a) Filing organization's totals	(b) Affiliated group totals
			<u> </u>	<u> </u>	organization's totals	group totals
1	a Total lobbying expenditures to influence p	•		•		
	b Total lobbying expenditures to influence a	_	• • • • • • •			
	c Total lobbying expenditures (add lines 1a	-				
	d Other exempt purpose expenditures					·
	 Total exempt purpose expenditures (add I Lobbying nontaxable amount. Enter the 					
	columns.	e amount i	tom the lonowing	g table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:		·
	Not over \$500,000	20% of the a	mount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	s 15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000		s 10% of the excess		1	
	Over \$1,500,000 but not over \$17,000,000		s 5% of the excess o	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.				
	g Grassroots nontaxable amount (enter 25%	•				
	h Subtract line 1g from line 1a. If zero or les	•				
	i Subtract line 1f from line 1c. If zero or less				<u> </u>	
	j If there is an amount other than zero o		•	•		☐ Yes ☐ No
	reporting section 4911 tax for this year?		· · · · · ·			
	(Some organizations that made a sect See the s	ion 501(h) el eparate inst	ructions for lines	e to complete all 2a through 2f.)	of the five column	s below.
	Lobbying E	Expenditures	During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2	Lobbying nontaxable amount					
	b Lobbying ceiling amount (150% of line 2a, column (e))					
	c Total lobbying expenditures					
	d Grassroots nontaxable amount					
	e Grassroots ceiling amount (150% of line 2d, column (e))					
	f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2015

	(election under section 501(h)).			<i>(</i> L)		
	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed iption of the lobbying activity.	Yes	No	A	(b) mount	
	·					
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
đ	Mailings to members, legislators, or the public?					
e	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 :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?					
1	Other activities?					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
za b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5).	or se	ction		
	501(c)(6).	ν-,,				
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	1	Ĺ
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	✓	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			3	<u>L</u>	✓
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes." Dues, assessments and similar amounts from members	R (b)	Part	i III-A,	line :	3, is
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year	_	2a			
b	Carryover from last year		2b			
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3		_	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby	/ing]			
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5			
Part						
	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	up lis	t); Pa	rt II-A, I	lines 1	anc
? (see	instructions); and Part II-B, line 1. Also, complete this part for any additional information.					
				-		
					-	
						

Schedule C (For	m 990 or 990-EZ) 2015	Page 4
Part IV	Supplemental Information (continued)	
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SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a,

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

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

Inspection

Name of the organization **Employer identification number** 46-0375398 Aberdeen Gun Club, Inc.

Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only). Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and (c) Description of transaction		(d) Con	rected?
•	(a) Name of disqualities person	organization	(c) Description of transaction	Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
2		ed by the organization managers or disc			
3		on line 2, above, reimbursed by the organi	·		
9	Enter the amount of tax, it any, t	or line 2, above, reimbursed by the organi	<u></u>		
Part	Loans to and/or From Int				

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan		in to or i the zation?	(e) Onginal principal amount	(f) Balance due	(g) In d	lefault?		ard or	(i) Wr agreer	
			То	From			Yes	No	Yes	No	Yes	No
(1) Jerry Brick	President	Operating	1		30,000	30,000		✓	✓		✓	
(2)												
(3)												
(4)					İ							
(5)	ŀ											
(6)												
(7)												
(8)					1							
(9)												
(10)												
Total						\$ 30,000						

Grants or Assistance Benefiting Interested Persons. Part III

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)			_	
(5)				
(6)				
(7)				_
(8)				
(9)				
(10)				

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Shani organizat revenue	
					Yes	No
)						_
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art V	Supplemental Information	n for responses to questions	on Cabadula I. (aas	:		
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