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# Form **990**

SCANNED JUN 05

### **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

Open to Public

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.

Department of the Treasury Inspection Internal Revenue Service ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2016 calendar year, or tax year beginning 2016, and ending . 20 16 January 1 December 31 D Employer identification number C Name of organization Aberdeen Gun Club, Inc. Check if applicable Address change Doing business as 46-0375398 Number and street (or P.O box if mail is not delivered to street address) Room/suite E Telephone number Name change Initial return 605-228-2449 City or town, state or province, country, and ZIP or foreign postal code Final return/terminated G Gross receipts \$ Amended return Aberdeen, SD 57402 171595 H(a) Is this a group return for subordinates? ✓ Yes Application pending F Name and address of principal officer. Jerry Brick 2202 15th Ave SE Aberdeen, SD 57401 H(b) Are all subordinates included? Yes No If "No." attach a list. (see instructions) √ 501(c) ( 4 ) 
√ (insert no ) 
√ 4947(a)(1) or 
√ 527 Tax-exempt status 501(c)(3) Website: ▶ www.aberdeengunclub.com H(c) Group exemption number ▶ Form of organization Corporation Trust Association L Year of formation. M State of legal domicile SD 1980 Part I Summary Briefly describe the organization's mission or most significant activities: Recreational Shooting and Hunter Safety 1 Activities & Governance Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) . . . . 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 6 5 5 Total number of individuals employed in calendar year 2016 (Part V, line 2a) <u>11</u> Total number of volunteers (estimate if necessary) 6 15 Total unrelated business revenue from Part VIII, column (07, 10472) 7a 0 Net unrelated business taxable income from Form 990-T, line-34 7b 0 **Current Year** Ō Contributions and grants (Part VIII, line 1h) 78277 8 32667 9 Program service revenue (Part VIII, line 2q) 114016 67830 Investment income (Part VIII, column (A), lines 3, 4060 10 N UT 10 12036 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 -3400 12274 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 109133 204567 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . . 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 18351 20817 Professional fundraising fees (Part IX, column (A), line 11e) . . . 16a 0 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 53822 119794 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 140611 72173 19 Revenue less expenses. Subtract line 18 from line 12 . 36960 63956 End of Year Beginning of Current Year 20 Total assets (Part X, line 16) 552066 596022 21 Total liabilities (Part X, line 26) . 66311 46311 22 Net assets or fund balances. Subtract line 21 from line 20 485755 549711 Signature Block Under penalties of perjury, I declare tight I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declara fon of prepard (other than officer) is based on all information of which preparer has any knowledge Sign Signature of Here Type or print name and title Print/Type preparer's name Preparer's signature Date Check | if Paid self-employed Preparer Firm's name Firm's EIN ▶ Use Only Firm's address ▶

May the IRS discuss this return with the preparer shown above? (see instructions)

Page	2

Part	Ш	Statement of Program Service Accomplishments		
		Gheck if Schedule O contains a response or note to any line in this Part III		🗸
1		fly describe the organization's mission:		
	Тор	rovide a recreational shooting opportunity to the population in the Aberdeen, SD area		
2	Did	the organization undertake any significant program services during the year which were not listed on the		
	prio	r Form 990 or 990-EZ?	☐ Yes	✓ No
3		es," describe these new services on Schedule O. the organization cease conducting, or make significant changes in how it conducts, any program		
3		rices?	□Yes	☑ No
		es," describe these changes on Schedule O.		
4	ехр	cribe the organization's program service accomplishments for each of its three largest program services enses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allow total expenses, and revenue, if any, for each program service reported.		
4a	(Co	de: ) (Expenses \$ 300 including grants of \$ 0) (Revenue \$		0)
	Hun	ter Safety - 150 students trained in the proper use of firearms and hunter ethics		
4b	(Co	de: ) (Expenses \$ 44074 including grants of \$ 0) (Revenue \$	624	198)
	Rec	reational shooting club open to the public - over 5000 rounds of trap provided to the general public. Over 500 in	dividual	s shot in
		ues and registered shoots during the year		
4	100	do: \/Evnences \$ 27705 including grants of \$ 10500\/Devenue \$	211	E10\
4c		de:) (Expenses \$ 37785 including grants of \$ 10500 ) (Revenue \$	313	518)
	Ove	r 150 youth shooters age 12-18 participated in a youth league during the 2016 year.		
		***************************************		
			. <b></b>	
			· • • • • • • • • • • • • • • • • • • •	
	Oth	ner program services (Describe in Schedule O.)		
4d		ner program services (Describe in Schedule O.) penses \$ 0 including grants of \$ 0) (Revenue \$ 23079)		

Part	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		✓_
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	✓	<b></b>
	candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	<b>Section 501(c)(3) organizations.</b> 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	<b>*</b>	
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		1
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		1
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		1
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	 ./	
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		<b>V</b>	
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	11b		1
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		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b> </b>
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
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
		For	m <b>99</b> (	2016

37

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Part	Checklist of Required Schedules (continued)		¥	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	200	Yes	No
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<b>√</b>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		_
	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		✓
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			,
	employees? If "Yes," complete Schedule J	23		✓
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 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		<b>V</b>
-	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			<u> </u>
	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		
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	054		<b>/</b>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	25b		<u> </u>
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	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			1
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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):			
_		-		;
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		1
_	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)			† <del></del>
	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	_		_
31	conservation contributions? If "Yes," complete Schedule M	30		1
31	Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		\ <u> </u>
	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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
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	330		+
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		1

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

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

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, 

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

37

Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Check in Concodule C Contains a response of note to any line in this Fart V	•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a			<del></del>
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		1
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: ▶			1
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
E0				المراجية المراجية
5a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	<u> </u>	<b>V</b>
C	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		<b>V</b>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c	ļ	1
-	organization solicit any contributions that were not tax deductible as charitable contributions?	6-	,	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a	<b>V</b>	
_	gifts were not tax deductible?	6b		1
7	Organizations that may receive deductible contributions under section 170(c).	OD		<u> </u>
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		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			ļ
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		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<b>✓</b>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	,	✓
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8	<u> </u>	<b>✓</b>
9	Sponsoring organizations maintaining donor advised funds.	_		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<b>V</b>
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<b>✓</b>
10	Section 501(c)(7) organizations. Enter:			
a b	Initiation fees and capital contributions included on Part VIII, line 12	1		
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .   Section 501(c)(12) organizations. Enter:	-		
''a				
b	Gross income from members or shareholders	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		i .
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			<u> </u>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
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.		1	
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			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Part '		e ins	or a tructi	
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.			, I
b 2	Enter the number of voting members included in line 1a, above, who are independent .    1b 6  Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	_		
3	any other officer, director, trustee, or key employee?	2		<b>√</b>
_	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		<del>/</del>
4 5	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?	<b>4 5</b>		<b>V</b>
6	Did the organization have members or stockholders?	6	1	<u> </u>
7a	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?	7a	1	
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		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓_	ļ
ь 9	Each committee with authority to act on behalf of the governing body?	8b	<b>√</b>	
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode )	
00011	on bit didied (fine decical bridgeste information about ponded not required by the internal fieres.		Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		1
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a		1
b 12a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b		1
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		1
а	The organization's CEO, Executive Director, or top management official	15a 15b		1
16a	Other officers or key employees of the organization	130		<b>V</b>
b	with a taxable entity during the year?	16a		1
J	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 (Sectio available for public inspection. Indicate how you made these available. Check all that apply.	n 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.	terest	polic	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	cords	s: <b>&gt;</b>	
	lerry Brick 2202 15th Ave SE Aberdeen SD 57401 605-228-2449			

Form	agn	(2016)	
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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees	, 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 any related organization compensated any current officer, director, or trustee. **Position** (A) (B) (D) (E) (F) (do not check more than one Name and Title Average Reportable Reportable Estimated box, unless person is both an hours per compensation compensation from amount of officer and a director/trustee) eek (list any from related other Officer Individual Institutional Highest co compensation Key employee hours for organizations related organization (W-2/1099-MISC) from the rganizations (W-2/1099-MISC) organization compensated below dotted and related trustee line) trustee organizations (1) Jerry Brick Aberdeen, SD 0 0 (2) Ken Hallstrom Aberdeen, SD O 0 (3) Bob Bucholz Aberdeen, SD n 0 (4) Harlan Young Aberdeen, SD 0 0 (5) Todd Hanson Aberdeen, SD 0 0 0 (6) Dennis Arment 1 Aberdeen, SD 0 n (7) Jeff Serfoss Aberdeen, SD 0 (9) (10) (11) (12) (13) (14)

(17) (18) (19) (20) (21) (22) (23) (24) (25)  1b Sub-total	Part	Section A. Officers, Directors, Trus	tees, Key E	mploy	yees			lighes	st C	ompensated E	mployees (con	tinuec	1)		
(159)  (169)  (177)  (199)  (270)  (199)  (29)  (29)  (29)  (20)  (20)  (20)  (21)  (22)  (22)  (23)  (24)  (25)  (26)  (27)  (28)  (29)  (29)  (29)  (20)				İ		•	•								
Name and title    Name and title   Name part of the properties   Name part of the part of		, (A)	(B)	(do n	ot ch			than c	ne	(D)	(E)	-	(	F)	
Name and business address   Part		Name and title								1 '	, , , , , , , , , , , , , , , , , , ,	-			
to the proper control of the proper control											n				
15   16   17   17   18   18   18   18   18   18				오코	) j	Ş	₩.	육,포	Fo	II.	1				n.
15   16   17   17   18   18   18   18   18   18			· ·	F 1	₹	6	ě	B B	Ĭ			) }			
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(17) (18) (29) (21) (22) (23) (24) (25) (25) (26) (27) (28) (29) (29) (29) (29) (20) (20) (20) (20) (21) (22) (23) (24) (25) (25) (26) (27) (28) (29) (29) (29) (20) (20) (20) (20) (20) (20) (20) (21) (22) (23) (24) (25) (26) (27) (28) (29) (29) (29) (20) (20) (20) (20) (20) (20) (20) (21) (22) (23) (24) (25) (26) (27) (27) (28) (29) (29) (20) (20) (20) (20) (20) (20) (20) (20	(15)		ļ	ļ	1						}				
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(23)   (24)   (25)   (25)   (26)   (27)   (27)   (28)   (29)					ļ	ļ	1	<b>!</b>	<u> </u>		<u></u>	—			
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1b Sub-total	(OE)		1		+	-	-	╁	⊢	+		+			
C Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶  3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who	(25)		<b></b>	-			1	1		1					
C Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶  3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who			1	L		<u> </u>		L	Ļ						
Total (add lines 1b and 1c)	1b				•	٠	•		•		)				0
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶  3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	С		t VII, Sectio	on A			-					0			0
Total number of independent contractors (including but not limited to those listed above) who	d_	Total (add lines 1b and 1c)	<u> </u>	<u> </u>				<u> </u>	<u> </u>		<u>)                                     </u>	<u>o</u>			0
Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who	2			d to tl	hose	e lis	ted	abov	e) w	vho received m	ore than \$100,	000 c	of		
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		reportable compensation from the organ	ızation ►												
employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who														Yes	No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	3	Did the organization list any former o	fficer, direc	ctor, e	or t	rust	ee,	key (	em	ployee, or high	hest compensa	ated			
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual													3		1
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4								nn s	and other com	nensation from	the		$\vdash$	† <u>*                                    </u>
individual	•												1	!	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person			greater ti	iaii ψ	100	,000	J	, ,	٠٠,	complete oc	incubic b for s	acii	- 4		<del>-</del>
for services rendered to the organization? If "Yes," complete Schedule J for such person	_					· •:		 			 	ماريما	-	<del>  '</del>	-
Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who	5											uuai		-	
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who			Y IT Yes,"	comp	iete	SC	nea	uie J	ior .	sucn person	<u> </u>	<u>·</u>	<u> </u>	<u>∟</u> _	
compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who															
year.  (A) Name and business address  Description of services  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who	1														
(A) Name and business address  Description of services  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who		compensation from the organization. Re	port compe	ensati	on f	or t	he o	calend	dar	year ending wi	ith or within the	orga	ınizati	on's i	tax
Name and business address  Description of services  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who		year.													
Name and business address  Description of services  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who		(A)							Τ	(B)			(C)		
			dress								services	С			
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			<del> </del>						+-						
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		Total number of independent and	C1 **			t	1:			hana Bakada da					
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Form **990** (2016)

Part	VIII	Statement of Reve	enue	<del></del>				
		'Check if Schedule O		oonse 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
ts	1a	Federated campaigns	1a	0				ı
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	1b	3538	1			1
S, E	С	Fundraising events .	1c	35218	į	ļ		ı
i i	d	Related organizations	1d	0	<u> </u>	}		
S, E	е	Government grants (con		20308				
<u>0</u> S	f	All other contributions, g						
F E		and similar amounts not inc	luded above   1f	19213		Ì		;
E O	g	Noncash contributions includ	ded in lines 1a-1f. \$	0				,
Contributions, and Other Sim	h	Total. Add lines 1a-1	•	▶	78277			ı
			<del></del>	Business Code			<del></del>	
Program Service Revenue	2a	Shooting Leagues			44995	44995	0	
Be	b	ATA Registered Comp	etition	<u> </u>	8224	8224	0	0
<u>i</u>	С	Practice Trap Shooting			9279	9279	0	0
ē	d	Hunter Safety			0	0	0	0
E	e	Youth League Income			51518	51518	0	0
gra	f	All other program ser	vice revenue .	0	0	0	0	0
Pro	g	Total. Add lines 2a-2			114016			<u></u>
	3	Investment income		ends. interest.	114010			
		and other similar amo		•	o		0	a
	4	Income from investmen	•	and proceeds	o	0	0	0
	5	Royalties		>	0	0	0	0
		,	(i) Real	(ii) Personal				
	6a	Gross rents	11012	0	ļ			
	b	Less: rental expenses	0	0				
	c	Rental income or (loss)	11012	0				
	d	Net rental income or		<u> </u>	11012	11012	0	
	7a	Gross amount from sales of	(i) Securities	(ii) Other	11012	11012		
		assets other than inventory	0	0				
	ь	Less: cost or other basis	<u> </u>	<del>-</del>				
		and sales expenses .	o	o				
	c	Gain or (loss)	0					
	d	Net gain or (loss)						
<u>o</u>					0	0	0	
Other Revenue	oa	Gross income from fu events (not including \$	~					
ě		of contributions reporte	35218					
Œ		n	•	i _				
E E			_		}			
δ	b	Less: direct expenses		1.0000)	1 1			
	C	Net income or (loss) f		events . >	(10806)		0	
	ya	Gross income from gasee Part IV, line 19		_	j			
	b	Less: direct expenses Net income or (loss) 1						
	100	· · · · · · · · · · · · · · · · · · ·		ivilles P	0	0		
	iva	Gross sales of in returns and allowance		ļ	<u> </u>		Į	
			_	1077	1			
	b	Less: cost of goods s		(	1 - 1	-		
	C	Net income or (loss) 1		<del></del>	(289)	(289)	0	
	<u> </u>	Miscellaneous F		Business Code	ļ. <sub>-</sub>			
	11a	Sign Income		ļ	12357	12357	0	
	b				ļ		ļ	ļ
	C			ļ	<u> </u>			
	ď	All other revenue .		L	ļ			<b></b>
	е	Total. Add lines 11a-			12357			
	12	Total revenue. See in	nstructions		104567	127006	1 0	.1

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4)	organızations must complete all colui	nns. All other organizations mus	t complete column (A).

Check if Schedule O contains a response or note to any line 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									
	and domestic governments. See Part IV, line 21	0	0							
2	Grants and other assistance to domestic				1					
	individuals. See Part IV, line 22	0	0							
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign				f					
	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,	į								
	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	17764	17764	0	0					
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)									
^		0		0	0					
9	Other employee benefits	0	0	0	0					
10	Payroll taxes	3053	3053	0	0					
11	Management	_	_	_ [	•					
a	Legal	0	0	0						
c	Accounting	0	0	0						
ď	Lobbying	0	0	0	<u>_</u>					
e	Professional fundraising services. See Part IV, line 17	0								
f	Investment management fees	0	0	0						
g	Other. (If line 11g amount exceeds 10% of line 25, column									
_	(A) amount, list line 11g expenses on Schedule O)	o	0	اه	0					
12	Advertising and promotion	709	0	709	0					
13	Office expenses	1010	0	1010	0					
14	Information technology	0	0	0	0					
15	Royalties	0	0	0	0					
16	Occupancy	31233	0	31233	0					
17	Travel	0	0	0	0					
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials	0	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	Other expenses Itemize expenses net equared	7592	0	7592	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	27349	27349	0	0					
b	ATA Registered Shoot Expenses	2754	2754		0					
C	League Expenses	44802	44802		0					
d	Sales Tax Expense	3445	3445		0					
e	All other expenses	0	0	0	0					
<b>25</b> _	Total functional expenses. Add lines 1 through 24e	140611	99167	41444	0					
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here    if following SOP 98-2 (ASC 958-720)									

Form 990 (2016) Page 11 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X End of year Beginning of year Cash-non-interest-bearing . . . . . . . . . Savings and temporary cash investments . . . . . ol Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 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 Inventories for sale or use . . . . . . . Prepaid expenses and deferred charges . . 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10b Less: accumulated depreciation . . . . 539759 10c Investments—publicly traded securities . . . . . Investments—other securities. See Part IV, line 11 . Investments—program-related. See Part IV, line 11. ol Total assets. Add lines 1 through 15 (must equal line 34) . . . 0 19 Deferred revenue . . . . . . . . . . . . . . . . . Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. . . . . . . . Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . . . Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X **Total liabilities.** Add lines 17 through 25 . Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 30 through 34. Capital stock or trust principal, or current funds . . . . . . 

Paid-in or capital surplus, or land, building, or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds .

Total liabilities and net assets/fund balances . . . . . . . . . .

Page	1	2
1 ago		

Part	XI Reconciliation of Net Assets					
	`Check if Schedule O contains a response or note to any line in this Part XI	. <u>.</u>	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			184	4567
2	Total expenses (must equal Part IX, column (A), line 25)	2			140	0611
3	Revenue less expenses. Subtract line 2 from line 1	3			4:	395 <u>6</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			55	2066
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
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			59	6022
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_	Y	'es	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other		_	- 1		1
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın	in		- 1	ι
	Schedule O.		j			<del>-</del>
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2	<b>3</b>		✓_
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	oiled	or	-		
	reviewed on a separate basis, consolidated basis, or both:					,
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			_	_[	د ساچيا
b	Were the organization's financial statements audited by an independent accountant?		. 2	<u>.  </u>	$\dashv$	<u>√</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on	a		i	i i
	separate basis, consolidated basis, or both:				- }	1
	Separate basis Consolidated basis Both consolidated and separate basis					1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o		_		1	,
	of the audit, review, or compilation of its financial statements and selection of an independent accounts to the selection of		_			<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, ex	plain	ın		- 1	
_	Schedule O.	المراد	<u> </u>			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	tortn	i i		}	,
	the Single Audit Act and OMB Circular A-133?		· 3	a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		1			,
	required addit or addits, explain why in schedule O and describe any steps taken to undergo such a	นนแร.	3		200	<u> </u>
			F	om '	990	(2016)

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

### **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ 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

	see separate instructions), ti		taly (000 copared		
	ection 501(c)(4), (5), or (6) orga of organization	ınizatıons: Complete Part III.	<del></del>	Employer idea	tification number
	een Gun Club, Inc;			• •	46-0375398
Part		e organization is exempt und	or costion E01/		
1	Provide a description of definition of political can	the organization's direct and in npaign activities")	direct political ca	mpaign activities in Part	IV. (see instructions for
2		y expenditures (see instructions)			
3 Part	Volunteer hours for politic	cal campaign activities (see instruc	otions)	· · · · · · · · · · · · · · · · · · ·	
1		e organization is exempt und excise tax incurred by the organization			
2	-	excise tax incurred by the organization			
3		ed a section 4955 tax, did it file Fo			. Yes No
4a	Was a correction made?		•		Tyes No
b	If "Yes," describe in Part			. ,	
Part		e organization is exempt und	er section 501(d	c), except section 501	(c)(3).
1	Enter the amount direct	ly expended by the filing organiz	ation for section	527 exempt function	
2	Enter the amount of the	filing organization's funds contrib	outed to other org	anizations for section	
3	•	expenditures. Add lines 1 and 2			
4	Did the filing organization	n file Form 1120-POL for this year	?	- 	Yes No
5	organization made payme the amount of political co	ses and employer identification nuests. For each organization listed, ontributions received that were profund or a political action committed.	enter the amount mptly and directly	paid from the filing organi delivered to a separate p	zation's funds. Also enter olitical organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group name, address, EIN, expenses, and share of excess lobbying expenditures.  B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.  Limits on Lobbying Expenditures  (file term "expenditures" means amounts paid or incurred.)  1a Total lobbying expenditures to influence public opinion (grass roots lobbying)  b Total lobbying expenditures (add lines 1a and 1b)  c Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures (add lines 1c and 1d)  f Lobbying nontaxable amount. Enter the amount from the following table in both columns.  If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:  Not over \$500,000 but not over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S 20% of the amount on line 1e.  Over \$1,000,000 but not over \$1,500,000  S 20% of the excess over \$1,500,000  Over \$1,000,000 but not over \$1,500,000  S 205,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,500,000  S 205,000 but not over \$1,5	Part	II-A	Complete if the organization section 501(h)).	on is exempt	under section 50	01(c)(3) and filed	Form 5768 (elec	ction under
(a) Filing (parameters) means amounts paid or incurred.)  1a Total lobbying expenditures to influence public opinion (grass roots lobbying)  b Total lobbying expenditures to influence a legislative body (direct lobbying)  c Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures  e Total exempt purpose expenditures (add lines 1c and 1d)  f Lobbying nontaxable amount. Enter the amount from the following table in both columns.  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Ver \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,000,000 but not over \$17,000,000  g Grassroots nontaxable amount (enter 25% of line 1f)  h Subtract line 1g from line 1a. If zero or less, enter -0-  j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns See the separate instructions for lines 2a through 2t.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2013  (b) 2014  (c) 2015  (d) 2016  Carasroots ceiling amount (150% of line 2a, column (e))	A C	heck >						up member's
Total lobbying expenditures to influence public opinion (grass roots lobbying)	B C	heck 🕨	if the filing organization cl	necked box A	and "limited cont	trol" provisions a	ipply.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)  c Total lobbying expenditures (add lines 1a and 1b)  Other exempt purpose expenditures  Total exempt purpose expenditures  Total exempt purpose expenditures (add lines 1c and 1d)  Lobbying nontaxable amount. Enter the amount from the following table in both columns.  If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,500,000 but not over \$1,000,000  Over \$1,500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,000,000  S 1,000,000  G Grassroots nontaxable amount (enter 25% of line 1f)  Subtract line 1g from line 1a. If zero or less, enter -0-  If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  -4-Year Averaging Period Under section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns See the separate instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  Lobbying ceiling amount (150% of line 2a, column (e))  c Total lobbying expenditures  d Grassroots ceiling amount (150% of line 2d, column (e))						)		(b) Affiliated group totals
c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures (add lines 1c and 1d) . f Lobbying nontaxable amount. Enter the amount from the following table in both columns.  If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000	1a	Total lo	bbying expenditures to influence	public opinion	(grass roots lobby	ring)		
d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns.  If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 Over \$500,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Over \$1,500,000 Over \$1,500,000 Over \$1,500,000 Over \$1,7000,000 Over \$1,000,000 Over \$1	b	Total lo	bbying expenditures to influenc	e a legislative b	ody (direct lobbyin	g)		
Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount. Enter the amount from the following table in both columns.  If the amount on line 1e, column (a) or (b) is: Not over \$500,000  Over \$500,000  Over \$1,000,000 but not over \$1,000,000  Over \$1,500,000 but not over \$1,000,000  S225,000 plus 10% of the excess over \$1,000,000  Over \$1,500,000 but not over \$1,000,000  Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a. If zero or less, enter -0- i Subtract line 1f from line 1c. If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns See the separate instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  Calendar year (or fiscal year beginning in)  (a) 2013 (b) 2014 (c) 2015 (d) 2016  Grassroots nontaxable amount  b Lobbying expenditures  d Grassroots nontaxable amount  c Total lobbying expenditures  d Grassroots celling amount (150% of line 2d, column (e))	C	Total lo	bbying expenditures (add lines	la and 1b) .				
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000  20% of the amount on line 1e.  Over \$500,000 but not over \$1,000,000  \$100,000 plus 15% of the excess over \$500,000.  Over \$1,000,000 but not over \$1,500,000  \$175,000 plus 10% of the excess over \$1,000,000.  Over \$17,000,000  \$1,00	d	Other e	exempt purpose expenditures .					
tf the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  \$100,000 plus 15% of the excess over \$500,000.  Over \$1,000,000 but not over \$1,000,000  Over \$1,500,000 but not over \$1,000,000  S225,000 plus 10% of the excess over \$1,000,000.  Over \$1,700,000  Over \$1,500,000 but not over \$1,000,000  \$225,000 plus 5% of the excess over \$1,500,000.  Grassroots nontaxable amount (enter 25% of line 1f)  Subtract line 1g from line 1a. If zero or less, enter -0-  i Subtract line 1f from line 1c. If zero or less, enter -0-  j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns See the separate instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2013  (b) 2014  (c) 2015  (d) 2016  Calendar year (or fiscal year beginning 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))	е	Total e	xempt purpose expenditures (ac					
Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$1,7000,000  S1,000,000.  Grassroots nontaxable amount (enter 25% of line 1f)  h Subtract line 1g from line 1a. If zero or less, enter -0-  j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns See the separate instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2013  (b) 2014  (c) 2015  (d) 2016  Calendar year (or fiscal year beginning in)	f	f Lobbying nontaxable amount. Enter the amount from the following table in both						
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000.  Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.  Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.  Grassroots nontaxable amount (enter 25% of line 1f)	[	If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:						
Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.  Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.  Grassroots nontaxable amount (enter 25% of line 1f)		Not over	\$500,000			ļ		
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.  Grassroots nontaxable amount (enter 25% of line 1f)	[	Over \$5	00,000 but not over \$1,000,000	\$100,000 plu	s 15% of the excess	over \$500,000.		
Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0- i Subtract line 1f from line 1c. If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns See the separate instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  Calendar year (or fiscal year beginning in)  Lobbying ceiling amount (150% of line 2a, column (e))  C Total lobbying expenditures  d Grassroots ceiling amount (150% of line 2d, column (e))		Over \$1	,000,000 but not over \$1,500,000	\$175,000 plu	s 10% of the excess	over \$1,000,000.		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0- i Subtract line 1f from line 1c. If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns See the separate instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2013 (b) 2014 (c) 2015 (d) 2016  Lobbying ceiling amount (150% of line 2a, column (e))  c Total lobbying expenditures  d Grassroots nontaxable amount (150% of line 2d, column (e))	ſ	Over \$1	500,000 but not over \$17,000,000	\$225,000 plu	s 5% of the excess o	ver \$1,500,000.		!
h Subtract line 1g from line 1a. If zero or less, enter -0- i Subtract line 1f from line 1c. If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns See the separate instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2013  (b) 2014  (c) 2015  (d) 2016  Lobbying nontaxable amount (150% of line 2a, column (e))  Total lobbying expenditures  d Grassroots nontaxable amount (150% of line 2d, column (e))	ſ	Over \$1	7,000,000	\$1,000,000.			1	
i Subtract line 1f from line 1c. If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns See the separate instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2013 (b) 2014 (c) 2015 (d) 2016  Lobbying ceiling amount (150% of line 2a, column (e))  c Total lobbying expenditures  d Grassroots nontaxable amount (150% of line 2d, column (e))	g	Grassr	oots nontaxable amount (enter 2	5% of line 1f)				
If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  4-Year Averaging Period Under section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns See the separate instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2013 (b) 2014 (c) 2015 (d) 2016  2a Lobbying nontaxable amount (150% of line 2a, column (e))  c Total lobbying expenditures  d Grassroots nontaxable amount (150% of line 2d, column (e))	h	Subtra	ct line 1g from line 1a. If zero or	less, enter -0-				
reporting section 4911 tax for this year?  4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns See the separate instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period  Calendar year (or fiscal year beginning in)  (a) 2013 (b) 2014 (c) 2015 (d) 2016  Lobbying nontaxable amount (150% of line 2a, column (e))  C Total lobbying expenditures  d Grassroots nontaxable amount (150% of line 2d, column (e))	i	Subtra	ct line 1f from line 1c. If zero or l	ess, enter -0-				
(Some organizations that made a section 501(h) election do not have to complete all of the five columns See the separate instructions for lines 2a through 2f.)    Lobbying Expenditures During 4-Year Averaging Period	j 			_		•		Yes No
Calendar year (or fiscal year beginning in)  (a) 2013 (b) 2014 (c) 2015 (d) 2016  2a 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))		(Som	e organizations that made a s	ection 501(h) el	lection do not hav	e to complete all	of the five column	s below.
beginning in)  2a 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))			Lobbyin	g Expenditure:	s During 4-Year A	veraging Period	1	
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))		Cale		(a) 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	(d) 2016	(e) Total
(150% of line 2a, column (e))  c Total lobbying expenditures  d Grassroots nontaxable amount  e Grassroots ceiling amount (150% of line 2d, column (e))	2a	Lobbyi	ng nontaxable amount					
d Grassroots nontaxable amount  e Grassroots ceiling amount (150% of line 2d, column (e))	b	•						
e Grassroots ceiling amount (150% of line 2d, column (e))	С	Total lo	obbying expenditures					
(150% of line 2d, column (e))	d	Grassr	oots nontaxable amount					
f Grassroots lobbying expenditures	е							
. Grade out roughing experiences	f	Grassr	oots lobbying expenditures					

1 Durin legis refer a Volu b Paid c Med d Maili e Publ f Grar	"Yes," response on lines 1a through 1i below, provide in Part IV a detailed of the lobbying activity.  In the year, did the filing organization attempt to influence foreign, national, state or local slation, including any attempt to influence public opinion on a legislative matter or rendum, through the use of:	Yes				
legis refer a Volu b Paid c Med d Maili e Publ f Grar g Direc	slation, including any attempt to influence public opinion on a legislative matter or	1	No		Amoun	rt
a Volu b Paid c Med d Maili e Publ f Grar g Direct	· · · · · · · · · · · · · · · · · · ·				<del>- 1</del>	
b Paid c Med d Maili e Publ f Grar g Direct	inteers?					
c Med d Maili e Publ f Grar g Direc	I staff or management (include compensation in expenses reported on lines 1c through 1i)?					
e Publ f Grar g Dire	fia advertisements?					
f Gran	ings to members, legislators, or the public?					
g Dire	lications, or published or broadcast statements?					
-	nts to other organizations for lobbying purposes?					
F D III	ct contact with legislators, their staffs, government officials, or a legislative body?					
	es, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	er activities?					
-	al. Add lines 1c through 1i					
	the activities in line 1 cause the organization to be not described in section 501(c)(3)?				~ ~ ~ ·	
	es," enter the amount of any tax incurred under section 4912					
	'es," enter the amount of any tax incurred by organization managers under section 4912 .					
	e filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	VE\ .	L			
Part III-A	501(c)(6).	)(5), (	or se	CHO	l	
				_	Yes	N
	re substantially all (90% or more) dues received nondeductible by members?			1	~	-
	the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Did to Part III-B	the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)					1.
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."					<b>3</b> , i
	s, assessments and similar amounts from members	of	1			
	tical expenses for which the section 527(f) tax was paid).		1			····
polit						
polit a Curr	rent year		2a 2b			
polit a Curr	rent year		2a			
politi a Curr b Carr c Tota	rent year		2a 2b			
politi a Curr b Carr c Tota 3 Agg	rent year	the	2a 2b 2c			
politi a Curr b Carr c Tota 3 Aggi 4 If no	rent year	the	2a 2b 2c 3			
politi a Curr b Carr c Tota 3 Agg 4 If no	rent year	the ying	2a 2b 2c			

	rm 990 or 990-EZ) 2016	Page 4
Part IV	Supplemental Information (continued)	
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#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

### **Supplemental Financial Statements**

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Aberdeen Gun Club, Inc. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . Aggregate value at end of year . . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . . ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a Total acreage restricted by conservation easements . . . . . . 2b Number of conservation easements on a certified historic structure included in (a) . . . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items; **b** Assets included in Form 990, Part X

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Part	III Organizations Maintaining	Collections of	Art, Hist	orical T	reasures,	or Ot	her Similar A	ssets (continued
	Using the organization's acquisition, a collection items (check all that apply):							
а	☐ Public exhibition		d l	☐ Loan e	or exchang	e progi	rams	
b	☐ Scholarly research							
С	☐ Preservation for future generations	3	- •					
4	Provide a description of the organizat XIII.		and expla	in how th	ney further	the org	anızation's exe	empt purpose in Pa
5	During the year, did the organization							
	assets to be sold to raise funds rather	than to be mainta	ined as p	art of the	organizatio	on's co	llection? .	· 🔲 Yes 🔲 N
Part	IV Escrow and Custodial Arra	ingements.					· · · · · · · · · · · · · · · · · · ·	
	Complete if the organization 990, Part X, line 21.							
1a	Is the organization an agent, trustee, included on Form 990, Part X?							not ·   Yes   N
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	llowing ta	ıble:			
								Amount
C	Beginning balance					10	;	
d	Additions during the year					10		
8	Distributions during the year					[ 1e		
f	Ending balance					11		
2a	Did the organization include an amoun	nt on Form 990, Pa	art X, line	21, for es	scrow or cu	ustodia	l account liabili	ity? 🗌 Yes 🗌 N
b	If "Yes," explain the arrangement in Page 1981	art XIII. Check her	e if the ex	cplanation	n has been	provide	ed on Part XIII	<u> </u>
Par	t V Endowment Funds.							
	Complete if the organization		" on For	m 990, F	Part IV, line	€ 10.		
		(a) Current year	<b>(b)</b> Pn	or year	(c) Two year	s back	(d) Three years ba	ack (e) Four years bac
1a	Beginning of year balance							
b	Contributions							
C	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of t	the current year er	nd balanc	e (line 1g	, column (a	)) held	as:	
а	Board designated or quasi-endowment	nt ▶	<b>.</b> %					
b	Permanent endowment ▶	%						
C	Temporarily restricted endowment ▶	%						
	The percentages on lines 2a, 2b, and	2c should equal 1	00%.					
3a	Are there endowment funds not in the	e possession of the	ne organi	zation tha	at are held	and ac	lministered for	the
	organization by:							Yes N
	(i) unrelated organizations							. 3a(i)
	(ii) related organizations							. 3a(ii)
b	If "Yes" on line 3a(ii), are the related o							. 3b
_4	Describe in Part XIII the intended uses		on's endo	owment fu	unds.			
Part	t VI Land, Buildings, and Equip							
	Complete if the organization	answered "Yes	on For	m 990, F	Part IV, line	e 11a.	See Form 99	0, Part X, line 10.
	Description of property	(a) Cost or o (investm		1	or other basis ther)		Accumulated lepreciation	(d) Book value
1a	Land	.	· · · · · ·		214094	of the second		2140
b	Buildings				144909		The state of the Party of	1449
C	Leasehold improvements						<del></del>	
d	Equipment			<u> </u>	200277	<u> </u>		2002
е	Other			1	260	_	<del></del>	1 2
Total	Add lines 1a through 1e. (Column (d) r	nust equal Form 9	90 Part	X column			<u> </u>	5595

Part VII	Investments – Other Securities.  Complete if the organization answered "Yes" on Fo	orm 990. Part IV. line	11b. See Form 990, Part X. line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial	derivatives		
	neld equity interests		
•			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
	b) must equal Form 990, Part X, col (B) line 12.) ▶	<u> </u>	
art VIII	Investments—Program Related.	000 D-+ N/ P	14 . O Farm 000 Bart V Brand 10
	Complete if the organization answered "Yes" on Fo		
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
)			
)			
)			
)			
5)			
<u>s)</u>	<del></del>		
<u> </u>	· · · · · · · · · · · · · · · · · · ·		
<u>3)                                    </u>			
9)			
	(b) must equal Form 990, Part X, col. (B) line 13.) ▶		
	Atl A A .		
Part IX	Other Assets.	orm 000 Dort IV line	11d Con Form 000 Bort V line 16
art IX	Complete if the organization answered "Yes" on F	orm 990, Part IV, line	
		orm 990, Part IV, line	11d. See Form 990, Part X, line 15 (b) Book value
1)	Complete if the organization answered "Yes" on F	orm 990, Part IV, line	
1)	Complete if the organization answered "Yes" on F	orm 990, Part IV, line	
1) 2) 3)	Complete if the organization answered "Yes" on F	orm 990, Part IV, line	
1) 2) 3) 4)	Complete if the organization answered "Yes" on F	orm 990, Part IV, line	
1) 2) 3) 4) 5)	Complete if the organization answered "Yes" on F	orm 990, Part IV, line	
1) 2) 3) 4) 5)	Complete if the organization answered "Yes" on F	orm 990, Part IV, line	
1) 2) 3) 4) 5) 5)	Complete if the organization answered "Yes" on F	orm 990, Part IV, line	
1) 2) 3) 4) 5) 5) 7)	Complete if the organization answered "Yes" on F	orm 990, Part IV, line	
1) 2) 3) 4) 5) 6) 7)	Complete if the organization answered "Yes" on F	orm 990, Part IV, line	
1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Colu	Complete if the organization answered "Yes" on Formal (a) Description	orm 990, Part IV, line	(b) Book value
1) 2) 3) 4) 5) 6) 7)	Complete if the organization answered "Yes" on Form (a) Description  Timn (b) must equal Form 990, Part X, col. (B) line 15.)		(b) Book value
1) 2) 3) 4) 5) 6) 7) 3) 9) otal. (Colu	Complete if the organization answered "Yes" on Financial Description  (a) Description  (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.		(b) Book value
(1) (2) (3) (4) (5) (5) (6) (7) (3) (9) (1) (1) (1) (2) (1) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	Complete if the organization answered "Yes" on Form (a) Description  Imm (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" on Foline 25.  (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
(1) (2) (3) (5) (5) (5) (7) (8) (9) (9) (1) Federal (1)	Complete if the organization answered "Yes" on Form (a) Description  Imm (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" on Folione 25.	orm 990, Part IV, line	(b) Book value
) (c) (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	Complete if the organization answered "Yes" on Form (a) Description  Imm (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" on Foline 25.  (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
) (Columbia Columbia	Complete if the organization answered "Yes" on Form (a) Description  Imm (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" on Foline 25.  (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
()) (2) (3) (3) (4) (5) (7) (8) (8) (9) (1) Federal (1) (2) (3)	Complete if the organization answered "Yes" on Form (a) Description  Imm (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" on Foline 25.  (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
1) 2) 3) 4) 5) 3) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7)	Complete if the organization answered "Yes" on Form (a) Description  Imm (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" on Foline 25.  (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
1) (2) (3) (4) (5) (5) (5) (5) (5)	Complete if the organization answered "Yes" on Form (a) Description  Imm (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" on Foline 25.  (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
1) 2) 3) 4) 5) 6) 7) 9) otal. (Column Part X 1) Federal II 2) 3) 4) 5) 6) 7)	Complete if the organization answered "Yes" on Form (a) Description  Imm (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" on Foline 25.  (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
1) (2) (3) (4) (5) (5) (5) (5) (5) (7) (3) (7) (3) (7) (3) (7) (3) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	Complete if the organization answered "Yes" on Form (a) Description  Imm (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" on Foline 25.  (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value
1) (2) (3) (4) (5) (6) (7) (3) (9) (7) (3) (9) (7) (3) (9) (7) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9	Complete if the organization answered "Yes" on Form (a) Description  Imm (b) must equal Form 990, Part X, col. (B) line 15.)  Other Liabilities.  Complete if the organization answered "Yes" on Foline 25.  (a) Description of liability (b) Book value	orm 990, Part IV, line	(b) Book value

Part			Return.
	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	7 1
C	Recoveries of prior year grants	2c	7 !
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line <b>2e</b> from line <b>1</b>		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	<u></u>
C	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		
Part			er Return.
	Complete if the organization answered "Yes" on Form 990,		
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	2a	<b>」</b>
b	Prior year adjustments	2b	
C	Other losses	2c	<u> </u>
đ	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d	<i></i>	2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b		4
þ	Other (Describe in Part XIII.)		
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lii XIII Supplemental Information.	ne 18.)	
Provid	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	nd 4; Part IV, lines 1b and 2 t to provide any additional i	b; Part V, line 4; Part X, line information.
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J			

### **SCHEDULE L**

(Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service

**Transactions With Interested Persons** 

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

OMB No 1545-0047

Open To Public Inspection

Name of the organization

Employer identification number

Abero	leen Gun Club, Inc.								_	46-0	37539	8								
Par								1(c)(29) organiza a or 25b, or For				/, line	40b.							
1	(a) Name of disqualified		(b) Relationship between disqualified person and organization					(c) Description of transaction					(d) Corr	ected?						
(1)																				
(2)					-	···														
(3)																				
(4)																				
(5)																				
(6)																				
2	Enter the amount under section 4958				n manag		qualifi · ·	ed persons dur	ring tl	ne ye l	ar ► \$									
3	Enter the amount o	f tax, if any, on	line 2, above,	reimbi	ursed by	the organi	zation	· · · · · ·		1	<b>\$</b>									
Part	Loans to and	or From Inter	ested Person	 S.																
	Complete if th		answered "Ye	s" on f	Form 990 art X, line	0-EZ, Part ve 5, 6, or 22	V, line 2.	38a or Form 99	90, Pa	rt IV, I	ine 2	6; or i	f the							
(a) N	ame of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the porganization?		principal amount				om the principal amo		from the principal amou				(g) In default?		(h) Approved by board or committee?		ntten ment?
				То	From				Yes	No	Yes	No	Yes	No						
(1)	Jerry Brick	President	Operating	~		3	0,000	10,000		V	~		~							
(2)																				
(3)																				
(4)																				
(5)									<u></u>											
(6)		ļ	ļ		<u> </u>					L		<u></u>								
(7)	<del></del>				<u> </u>				ļ	L										
(8)		ļ.,	<u> </u>		<u> </u>			·	<u> </u>	<u> </u>		<u> </u>								
(9)	·	<u> </u>		<u> </u>	<b></b>				Ļ	<u> </u>										
(10)		<u></u>			<u>.l.,</u> .	l			Street States	100 Miles 1968	Communication	Could be a	NEGOCIA POLICIA	E-8068 5 a 2 1						
Total						<del></del>	<u>.                                    </u>	<u>\$</u>			37		為海							
Part		sistance Bene ne organization	fiting Interest answered "Ye	ed Per s" on l	rsons. Form 99	0, Part IV, I	ine 27	<u>.                                    </u>					<u>.                                    </u>							
(a)	Name of interested persor		ship between inter and the organization		(c) Amount	of assistance	(	d) Type of assistanc	æ	(ө	Purpo	se of a	ssistan	ce						
(1)																				
(2)																				
(3)	····						Ĺ			<u> </u>			· · · · · · · · · · · · · · · ·							
(4)																				
(5)																				
(6)										<u> </u>										
(7)	-							·		<u> </u>										
(8)	· · · · · · · · · · · · · · · · · · ·						<u> </u>			<b></b>				_						
(9)							<u> </u>			<u> </u>			<del> </del>							
(10)							L			1										

Part IV	Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.								
• "	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction		anng of zation's nues?			
					Yes	No			
(1)						-			
(2) (3) (4) (5)									
(4)									
(5)									
<u>(6)</u>									
(7)		ļ			_	<b></b>			
(8)						ļ			
(9) (10)	<u> </u>					<del> </del>			
Part V	Supplemental Information Provide additional information for	or responses to questions	on Schedule L (see	e instructions).		<u> </u>			
			***************************************						
			•••••••••••						
			······						
				·					
		, 							
	·								

#### 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 2016

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

Aberdeen Gun Club, Inc				46-0375398
Part III, Line 4d			.,	
Net Rental Income	\$ 11012			
Income from Inventory	(289)			
Sign Income	12357			
Part IV, Line 11b			·	
This form 990 is only rev	lewed by the President of the	e Club. It is available for revie	ew by anyone	who asks for it. Typically, it is
provided to our bank as	a requirment of our line of cr	edit		
Part VI, Line 19			***************	
The governing documen	ts and financial statements o	of the Aberdeen Gun Club are	available to a	ny member of the public upon
request. Contact the Pre	esident of the club			
		~~~~~		
	***************************************			
	***************************************			
	·			
	*			