Return of Organization Exempt From Income Tax 2949306022919 OMB No 1545-0047

2018

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Dep	artment of rnal Revent	the Treasury	, •	al security numbers on this gov/Form990 for instruction				7110	Open to I	
A			ndar year, or tax year beginning		, 2018, and			per 31	, 20 19	
В		applicable	C Name of organization Forks Rifle		<u> </u>				er identification n	umber
	Address		Doing business as						45-6036671	
$\overline{\Box}$	Name ch	•	Number and street (or P O box if m	nail is not delivered to street add	ress) Ro	om/suite		E Telepho	ne number 2	
	Initial retu	•	P.O. Box 14842		ļ				7017750008	
		n/terminated	City or town, state or province, cou	ntry, and ZIP or foreign postal co	ode .					
	Amended		Grand Forks, ND, USA, 58208-4	1842				G Gross re	eceipts \$	48522
			F Name and address of principal office				H(a) Is this a gre	oup return for	subordinates? Yes	
						17			s included? Tes	
$\overline{}$	Tax-exen	npt status	501(c)(3)	(7) ◀ (insert no) ☐ 4947	(a)(1) or 5	(2)			a list (see instruction	
J	Website:		srifleclub.org		1		H(c) Group	exemption	number >	
K	Form of o		✓ Corporation ☐ Trust ☐ Associa	ation ☐ Other ►	L Year of	formation	1993	M State	of legal domicile	ND
Р	art I	Summ								
	1	Briefly de	escribe the organization's miss	sion or most significant ad	tivities: Pi	roviding	recreation	nal shoot	ing facilities an	d
9	1		for members. Providing junior	-						
ā										
Activities & Governance	2	Check th	is box ▶ ☐ if the organization	discontinued its operatio	ns or dispo	sed of r	more than	25% of	its net assets.	
õ	1		of voting members of the gove					3		8
ಹ	ı		of independent voting membe		•			4		
ijes			nber of individuals employed i					5		0
Ž			nber of volunteers (estimate if	•	•			6		35
Ąċ	1		elated business revenue from	* *				7a		0
	ľ		ated business taxable income					7b		0
							Prior Yea	ar	Current Ye	
6)	8	Contribut	tions and grants (Part VIII, line	1h)				45201	_	24001
Revenue	1		service revenue (Part VIII, line		IVED	. \square		20713		20490
946			nt income (Part VIII, column (A			S 🗆		0		0
Œ			enue (Part VIII, column (A), lin		±11€10.10.	lö 🗀		1980		1150
			enue-add lines 8 through 11 (r			202 T		67894		45641
						"- 		650	-,	700
	14	Benefits :	nd similar amounts paid (Part I paid to or for members (Part I)	K. columnia) line 4)	N, U I			5884		4413
s			other compensation, employee			0)		0		0
Expenses			onal fundraising fees (Part IX, o			<u> </u>				0
De l	1		draising expenses (Part IX, col	• • •		0				
ũ	,		penses (Part IX, column (A), lin					37040	·	27773
			enses. Add lines 13-17 (must	•	, line 25)	. —		43574		32886
			less expenses. Subtract line 1	• • • • • • • • • • • • • • • • • • • •	•	. \square		24320	·	12755
PS BS				<u> </u>		Beg	unning of Cur		End of Ye	
ats	20	Total ass	ets (Part X, line 16)			. 🗀		490316		502201
Ass	21		ılıtıes (Part X, line 26)					1066		196
Net Assets or Fund Balances	22		ts or fund balances. Subtract I	ine 21 from line 20 .				489250		502005
	art II		ture Block							
Un	der penalt	ies of perjui	ry, I declare that I have examined this	return, including accompanying	schedules and	statemer	nts, and to th	e best of n	ny knowledge and	belief, it is
tru	e, correct,	and comple	ete Declaration of preparer (other than	officer) is based on all informati	on of which pr	eparer ha	s any knowle	dge		
			TO C. R. adden					11/:	27/2019	
Siç	n l	Signa	atore of officer				Date	е		
He	re	1 TA	HOMAS C. REIT	EN, SECRETA	RY-TF	ZEAS	URER			
		Type	or print name and title	······································						
Pa	id	Print/Typ	pe preparer's name	Preparer's signature		Date		Check [PTIN	
	eparer	. [_						self-emp		
	e Only	· - ·	ame >				Firm'	s EIN ▶		
_	o Omy		ddress ▶				Phor			
Ма	y the IR	S discuss	this return with the preparer	shown above? (see instru	ctions) .	<u></u>			. Yes	□ No
For	Paperw	ork Reduc	ction Act Notice, see the separa	te instructions.		Cat No 1	11282Y	$\overline{}$	Form 9	90 (2018)

Cat No 11282Y

For Paperwork Reduction Act Notice, see the separate instructions.

) (Revenue \$

including grants of \$

(Expenses \$



Part	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		√
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
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		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		√
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		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, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
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	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		✓_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓_
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		√
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		√
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		✓
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		✓
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		✓
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
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓

Part.	Checklist of Required Schedules (continued)			
			Yes	No
` 22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
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?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
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	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
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		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓_
	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38		✓
Part				_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1)		
	reportable gaming (gambling) winnings to prize winners?	1c	✓	
		Forn	₁ 990	(2018)

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u> </u>
_	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		1
	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,	4a		1
b	a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:	40		-
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			'
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		7
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b_		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			<u></u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	\dashv	· •
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
·	required to file Form 8282?	7c		1
ď	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓_
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓_
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	}	<u> </u>
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		✓
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
9	sponsoring organization have excess business holdings at any time during the year?	-		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			
11	Section 501(c)(12) organizations. Enter.			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources		İ	
	against amounts due or received from them.)	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		
	Section 501(c)(29) qualified nonprofit health insurance issuers.		ĺ	
	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.			
	Enter the amount of reserves the organization is required to maintain by the states in which	1		
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓ _
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		✓
	excess parachute payment(s) during the year?	-13		
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	 	<u> </u>
	If "Yes," complete Form 4720, Schedule O.			
		Form	990	(2018)

Part		•			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change.				
Secti	Check if Schedule O contains a response or note to any line in this Part VI on A. Governing Body and Management	<u> </u>	- · · ·	• •	. 🗸
Secu	on A. Governing Body and Management		_	Yes	No
12	Enter the number of voting members of the governing body at the end of the tax year	la s		163	- '\\
10	If there are material differences in voting rights among members of the governing body, or	14	1		
	if the governing body delegated broad authority to an executive committee or similar		[,]		1
	committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent .	1b 8	ľ		
2	Did any officer, director, trustee, or key employee have a family relationship or a business in		1		
_	any other officer, director, trustee, or key employee?	· · · · ·	2		7
3	Did the organization delegate control over management duties customarily performed by or	under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other		3		
4	Did the organization make any significant changes to its governing documents since the prior Form 9		4		1
5	Did the organization become aware during the year of a significant diversion of the organization		5		1
6	Did the organization have members or stockholders?		6	√	
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	✓	
b	Are any governance decisions of the organization reserved to (or subject to approva				
-	stockholders, or persons other than the governing body?		7b	✓	1
8	Did the organization contemporaneously document the meetings held or written actions un	dertaken durina			· · ·
	the year by the following:	. 3			
а	The governing body?		8a	✓	
b	Each committee with authority to act on behalf of the governing body?		8b	✓_	\Box
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot	ot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		9		✓
Secti	on B. Policies (This Section B requests information about policies not required by the	e Internal Reven	ue Co	_	
			- 	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		<u> </u>
þ	If "Yes," did the organization have written policies and procedures governing the activities of				ĺ
	affiliates, and branches to ensure their operations are consistent with the organization's exem		10b		├──
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before the complete copy of this Form 990 to all members of its governing body before the copy of		11a		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		40-		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a 12b		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could giv		120		
С	Did the organization regularly and consistently monitor and enforce compliance with the	-	12c		
13	describe in Schedule O how this was done		13		
14	Did the organization have a written whistleblower policy?		14		
15	Did the process for determining compensation of the following persons include a review a				1
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation				
а	The organization's CEO, Executive Director, or top management official		15a		
b	Other officers or key employees of the organization		15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			-	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or simi	ar arrangement			,
	with a taxable entity during the year?		16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization				
	participation in joint venture arrangements under applicable federal tax law, and take steps t				
_	organization's exempt status with respect to such arrangements?		16b		
Secti	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable				i01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that				
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Sci	nedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing docume	nts, conflict of int	erest p	olicy	, and
_	financial statements available to the public during the tax year.				
20	State the name, address, and telephone number of the person who possesses the organization	n's books and re	cords	>	
_	Thomas C. Reiten, 4620 Loamy Hills Pl, Grand Forks, ND 58201 701-775-0008				

						-
Part VII	Compensation of Officers, D	irectors, Trustees, K	ey Employees, Highe	est Compensated	Employees, a	nd
	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 no	r any relate	d org	aniz	atio	n c	ompe	nsa	ited any curren	t officer, directo	r, or trustee.
(A)	(B)	l			ition			(D)	(E)	(F)
Name and Title	Average hours per	box,	unles	s pe	rson	e than on the street of the st	n an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Dennis Coulter	12			,						
President	<u> </u>			✓	_	ļ <u>-</u>	⊢	0	0	
(2) Kevin Fire	5			1						_
Executive officer	30		-	•		-	-	0	0	
(3) Thomas C. Reiten Secretary-Treasurer	30	}		1				0	0	,
(4) Gordy Linnell	5			Ť				<u> </u>		
Director	† -	1						0	o	,
(5) Alfredo Martinez	10							_		
Director		✓						0	0	
(6) Rick Kraft	5									
Director		✓			<u> </u>		<u> </u>	0	0	
(7) Steven Martin	20	ļ	,		1]		
Chief Instructor	ļ	<u> </u>	<u> </u>				L	0	0	(
(8) Michael Knain	30									
Range Officer	 			_			<u> </u>	0	0	
(9)	 					İ				
(10)										
(11)			1							
(12)								_		
(13)										
(14)										

Pari	VII Section A. Officers, Directors, Trust	tees, Key E	mplo	yees			lighes	st C	ompensated E	mployees (co	ontinu	ıed)		
•	. (A) Name and title		(do not check more than box, unless person is bo					an ee)	compensation	(E) Reportable compensation from related organizations	from	am	(F) timated tount of	f
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MI		fro orga and	pensation the anization trelated in the anization in the	n d
(15)							<u>u</u>						- "	
(16)									 					
(17)											+		_	
(18)							_							
(19)									<u> </u>		\dashv			
(20)						_		-			+		. <u> </u>	
(21)											+	· · · -		
(22)											+			
(23)				\dashv							+			_
(24)											+	_	<u> </u>	
(25)								_			-		_	
1b c d	Sub-total	VII, Section			•		•	>	0		0			0
2	Total (add lines 1b and 1c)	not limited) W	ho received m		0,000	of		0
3	Did the organization list any former of employee on line 1a? If "Yes," complete \$1.00.	ficer, direct							loyee, or high	•	sated	3	Yes	No V
4	For any individual listed on line 1a, is the organization and related organizations individual													__\
5	Did any person listed on line 1a receive of for services rendered to the organization?											5	_	
Section	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	ress							(B) Description of se	ervices		(C) Compens	sation	
				_										<u></u>
2	Total number of independent contracto							th	ose listed abo	ove) who			_	

Form **990** (2018)

Par	VIII	Statement of Revenue Check if Schedule O contains a resp	onso or note to	any line in this l	Part VIII		
		Officer if Schedule O Contains a resp	ionse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grents and Other Similar Amounts	1a b c d e f	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a 1f \$	0 23350 0 0 651			-	
ပို့ န	h	Total. Add lines 1a-1f	•	24001			
nre	_	_	Business Code	-			•
eve	2a	Rifle Matches		8158	8158	0	815
Program Service Revenue	b	Leagues		6490	6490	0	649
Ž	d	Shooting House Program Income		3195	3195	0	319
Š	e	riogram income		2647	2647		264
grar	f	All other program service revenue .					
Pro	g	Total. Add lines 2a–2f		20190			
	3	Investment income (including divide and other similar amounts)	▶ [0	0	0	
	4 5	Income from investment of tax-exempt bo	na proceeas	0	0	0	
	3	Royalties	(II) Personal	O	0	0	<u> </u>
	6a	Gross rents					
	b	Less rental expenses	_			İ	
	С	Rental income or (loss)					
	d	Net rental income or (loss)		0	0	0	
	7a	Gross amount from sales of (i) Securities	(II) Other				
	b	Less: cost or other basis and sales expenses .					
,	C	Gain or (loss)					
ā	d	Net gain or (loss)	▶	0	0	0	
Other Revenue	ба	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a					
둙	b	Less: direct expenses b					
		Net income or (loss) from fundraising e Gross income from gaming activities. See Part IV, line 19 a	vents . ►	0		0	
	b	Less: direct expenses b	994		ļ	ĺ	
		Net income or (loss) from gaming active Gross sales of inventory, less returns and allowances a		963	0	0	963
	L	~ <u>-</u> L	1906				
	b	Less cost of goods sold b Net income or (loss) from sales of inver	1886	30			
	U	Miscellaneous Revenue	Business Code	20	0	0	20
	11a	Sale of scrap brass	- danies Coue	127	127	0	127
	b	locker leases		40	40	0	4(
į	C			40	40		
	d	All other revenue					- <u>-</u>
	e	Total. Add lines 11a-11d	▶	167			
	12	Total revenue. See instructions		45641	21640	0	21640

	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must con	nolete all columns. A	Il other organization	es must complete co	olumn (A)
260110	Check if Schedule O contains a respon				numm (A).
	ot include amounts reported on lines 6b, 7b, b, 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	700	700		
2	Grants and other assistance to domestic individuals. See Part IV, line 22		700		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0	0		
4 5	Benefits paid to or for members	4413	4413	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	O	0	C
7 8	Other salaries and wages	0	0	0	
9	section 401(k) and 403(b) employer contributions) Other employee benefits	0	0	0	0
10 11	Payroll taxes	0	0	0	C
a b	Management	0	0 0	o	<u></u>
c d	Accounting	0	0	0	
e f	Professional fundraising services. See Part IV, line 17 Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0	0	0	
12	Advertising and promotion	0	0	0	0
13	Office expenses	3299	3299	0	
14 15	Information technology	867	867	0	0
16	Occupancy	23607	23607	0	0
17	Travel	0	0	0	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	
19	Conferences, conventions, and meetings .	0	0	0	
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	O
22	Depreciation, depletion, and amortization .	0	0	0	0
23	Insurance	0	0	0	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.)				
a b					
c d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	32886	32886	0	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 following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Par	tX		<u>.</u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	32253	1	40424
	2	Savings and temporary cash investments	0	_	0
	3	Pledges and grants receivable, net	0	-	
	4	Accounts receivable, net	0	4	
	5	Loans and other receivables from current and former officers, directors,	 _		
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
		Loans and other receivables from other disqualified persons (as defined under section		-	<u> </u>
	6	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		,	•
s		organizations (see instructions). Complete Part II of Schedule L		6	
šet	,		0	-	0
Assets	7	Notes and loans receivable, net	0		0
-	8	Inventories for sale or use	0	- <u>-</u>	
	10a	Land, buildings, and equipment: cost or	0	-	0
	IVa	ather hasis Complete Dort VI of Cohedula D			}
		401777	450000	10-	
	l b	Less. accumulated depreciation 10b 0	458063	_	461777
	11	Investments—publicly traded securities		11	0
	12	Investments—other securities. See Part IV, line 11	0		0
	13 14	Investments—program-related. See Part IV, line 11	0		0
		Intangible assets	0		0
	15	Other assets. See Part IV, line 11	0		0
—	16	Total assets. Add lines 1 through 15 (must equal line 34)	490316		502201
	17	Accounts payable and accrued expenses	1066		196
	18	Grants payable	0		0
	19	Deferred revenue	0		0
	20	Tax-exempt bond liabilities	0		0
(A	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors,			
E		trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			
ia	00	· · · · · · · · · · · · · · · · · · ·	0		0
_	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X	i		
		of Schedule D		0E	
	26	<u>i</u>	0		0
_	20	Total liabilities. Add lines 17 through 25	1066	20	196
es		complete lines 27 through 29, and lines 33 and 34.			
2	27	Unrestricted net assets		27	0
als	28	Temporarily restricted net assets	0	28	0
8	29	Permanently restricted net assets	0		0
5		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and □		70	-
F		complete lines 30 through 34.		1	
8	30	Capital stock or trust principal, or current funds	31187	30	40228
set	31	Paid-in or capital surplus, or land, building, or equipment fund	458063		461777
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	458063	32	401777
<u>e</u>	33	Total net assets or fund balances	489250		202005
~	34	Paid-in or capital surplus, or land, building, or equipment fund	490325	_	502201
	<u></u>		490923	1	Form 990 (2018)

orm 9	90 (201	18)	Page 12
Par	t ₂ XI	Reconciliation of Net Assets	
		Check if Schedule O contains a response or note to any line in this Part XI	🗆
1	Tota	al revenue (must equal Part VIII, column (A), line 12)	45641
2	Tota	al expenses (must equal Part IX, column (A), line 25)	32886
3	Rev	venue less expenses. Subtract line 2 from line 1	12755
4	Net	t assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	489250
5	Net	t unrealized gains (losses) on investments	
6	Don	nated services and use of facilities	
7	Inve	estment expenses	

8 8 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 10 502005 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Yes No Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . . 2a 1 If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis **b** Were the organization's financial statements audited by an independent accountant? 2b If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in За b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form 990 (2018)

SCHEDULE D (Form 990)

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.

OMB No 1545-0047 20**19**

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information.

Forks Rifle Club 45-6036671 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) . 3 Aggregate value of grants from (during year) . . . 4 5 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 ☐ Yes ☐ No Conservation Easements. Part II 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 (for example, recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat ☐ 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 Total number of conservation easements . . 2a 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, 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 6 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB 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 FASB 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 FASB ASC 958 relating to these items: Assets included in Form 990, Part X . . .

Par	t III Organizations Maintaining	Collections of	Art, His	torical 1	<u>reasures</u>	, or O	her Similar	<u>Ass</u>	ets (con	tinued)
. 3	Using the organization's acquisition, collection items (check all that apply):		ther reco	rds, chec	k any of th	e follov	ving that make	e sig	inificant L	ise of it
а	☐ Public exhibition		d	□ Loan	or exchang	je progi	ram			
b	☐ Scholarly research		е	☐ Other				_		
С	☐ Preservation for future generations	i								
4	Provide a description of the organiza XIII.	tion's collections	and expl	aın how t	hey further	the ore	ganızatıon's ex	emp	ot purpos	e ın Paı
5	During the year, did the organization assets to be sold to raise funds rather								☐ Yes	□ N ₄
Par	t IV Escrow and Custodial Arra		unica as	part or tri	o organizat	1071 0 00	neodioir	<u> </u>		
	Complete if the organization 990, Part X, line 21.		on For	m 990, F	Part IV, line	e 9, or	reported an	amo	ount on F	orm
	Is the organization an agent, trustee, included on Form 990, Part X?								☐ Yes	□ No
b	If "Yes," explain the arrangement in P	art XIII and compl	ete the fo	ollowing to	able:	_	<u> </u>	Am	ount	
С	Beginning balance					10				
d	Additions during the year					10	1			
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amour	nt on Form 990, P	art X, line	21, for e	scrow or c	ustodia	account liabil	ity?	☐ Yes	☐ No
b	If "Yes," explain the arrangement in Pa	art XIII. Check her	e if the e	xplanation	n has been	provide	ed on Part XIII			
Par	t V Endowment Funds.									
	Complete if the organization	answered "Yes	on For	m 990, F	Part IV, line	e 10.				
		(a) Current year	(b) Pn	or year	(c) Two year	rs back	(d) Three years b	ack	(e) Four ye	ars back
1a	Beginning of year balance						· · · · · · · · · · · · · · · · · · ·			
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships			·- <u>-</u>						
е	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance							\dashv		
2	· ·	he current vear er	nd balanc	e (line 1a	. column (a	i)) held :	as:		_	
а	Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment									
b	Permanent endowment ▶	%								
С	Term endowment ▶%									
	The percentages on lines 2a, 2b, and	2c should equal 1	00%.							
3a	Are there endowment funds not in the	e possession of th	ne organi	zation tha	at are held	and ad	ministered for	the		
	organization by:								Y	es No
	(i) Unrelated organizations								3a(i)	
	• •	<i></i>							3a(ii)	
b	If "Yes" on line 3a(ii), are the related of								3b	
4	Describe in Part XIII the intended uses		on's endo	owment fu	ınds.					
Part								_		
	Complete if the organization	answered "Yes	" on For	<u>m 990, F</u>	Part IV, line	e 11a. :	See Form 99	<u>0, P</u>	art X, lin	e 10.
	Description of property	(a) Cost or ot (investm		, , ,	r other basis ther)		Accumulated preciation		(d) Book v	alue
1a	Land	. [29000					29000
b	Buildings				301509		0			301509
С	Leasehold improvements									
d	Equipment				131268		0			131268
ее	Other									
Total.	Add lines 1a through 1e. (Column (d) m		90, Part)	K, column	(B), line 10)c.)	•			461777

Part ₍ VII	Investments—Other Securities. Complete if the organization answered "Yes" on Formula (Security 2014).	m 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) Metho	od of valuation of-year market value
(1) Financial	derivatives			
•	eld equity interests			
(3) Other				
(A)				
<u>(E)</u>				
(F)		· · · · · · · · · · · · · · · · · · ·		
(G) (H)		·		
	mn (b) must equal Form 990, Part X, col. (B) line 12.) . ▶		<u> </u>	
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes" on For	m 990. Part IV. line	11c. See Form 9	990. Part X. line 13.
	(a) Description of investment	(b) Book value	(c) Metho	od of valuation
(4)				
(1) (2)				
(3)				
(4)				
(5)				
(6)				
(7)		-		· <u>-</u>
(8)				
(9)				
Total. (Colui	nn (b) must equal Form 990, Part X, col. (B) line 13.) . 🕨			
Part IX	Other Assets. Complete if the organization answered "Yes" on Form	m 990, Part IV, line	11d. See Form 9	990, Part X, line 15.
	(a) Description			(b) Book value
(1)				
(2)		<u> </u>		
(3)				
(4)				
(5)				
(6)				
(7)				
(8) (9)				
	nn (b) must equal Form 990, Part X, col. (B) line 15)			
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on Forr line 25.	n 990, Part IV, line	11e or 11f. See	Form 990, Part X,
<u>1, </u>	(a) Description of liability			(b) Book value
(1) Federal in	come taxes			
(2)	<u> </u>	<u></u>		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	nn (b) must equal Form 990, Part X, col. (B) line 25.)	· —		
	uncertain tay positions. In Part VIII, provide the text of the feetne	to to the organization's	<u></u>	to that reports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Part			r Return.	
-	Complete if the organization answered "Yes" on Form 990,		Tal	
` 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:			
a	Net unrealized gains (losses) on investments		-	
b	Donated services and use of facilities			
C	Recoveries of prior year grants		-	
d	Other (Describe in Part XIII.)		 	
e	Add lines 2a through 2d		2e 3	
3	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i . i	3	
4	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII.)		\dashv	
	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			
Part				
	Complete if the organization answered "Yes" on Form 990,			
1	Total expenses and losses per audited financial statements		1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	Donated services and use of facilities	2a		
b	Prior year adjustments	2b	7	
С	Other losses	2c	7	
	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		- 	
	Investment expenses not included on Form 990, Part VIII, line 7b		_	
	Other (Describe in Part XIII.)		<u> </u>	
	Add lines 4a and 4b			
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lines 2)	ne 18.)	5	
Part 2		. 1 4 0 - 10 10 1 10	No Double to Double	V 11
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this par			x, line
-, , uit	At, intes 2d and 45, and 1 art All, intes 2d and 45. Also complete this par	to provide any additionari	mornadors.	
		••••••		
				·
			•••	
				

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

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

Forks Rifle Club 45-6036671 Part VI, Sec. C #19: No requests were received for governing documents, conflict of interest policy or financial records during the tax year. Part VII, Sec. A: The Forks Rifle Club has no employees. All officers and directors are elected from the membership by a vote of the membership. No officer, director or other elected or appointed member of the club receives compensation for their time spent performing their duties. Part VI, Sec. A #6: The organization had 483 members at the end of the tax year. Part VI, Sec. A #7a: All annual members with 5 consecutive years of membership and all life members have the power to elect members of the governing body. Part VI, Sec. A #7b: Amendments to the by-laws of the corporation are subject to approval by voting members.