2019 Federal Exempt Organization Tax Summary (EZ)								
Siuslaw Rod & Gun Club								
FORM COO EZ REVENUE	2019	2018	Diff					
FORM 990-EZ REVENUE Contributions, gifts, and grants Program service revenue Membership dues and assessments Gross profit (loss) - inventory sales	0 2,713 43,985 6	500 3,167 58,345 5	-500 -454 -14,360 1					
Total revenue	46,704	62,017	-15,313					
EXPENSES Occupancy/rent/utilities/maintenance Printing, publications, and postage Other expenses	9,646 1,762 22,741	12,434 1,637 19,630	-2,788 125 3,111					
Total expenses	34,149	33,701	448					
NET ASSETS OR FUND BALANCES Excess or (deficit) for the year Net assets/fund bal. at beg. of year Net assets/fund bal. at end of year	12,555 211,272 223,827	28,316 182,956 211,272	-15,761 28,316 12,555					

2019	General Inform	Page 1		
	Siuslaw Rod & Gu	n Club		93-6031546
Forms needed for this return				
Federal: 990-EZ, Sch O				
Carryovers to 2020				
None				
*				

12/31/19

2019 Federal Book Depreciation Schedule

Page 1

Siuslaw Rod & Gun Club

93-6031546

Description	Date Acquired_	Date C Sold B	ost/ lasis	Bus. Pct.	Cur 179 Bonus	Special Depr. Allow.		Prior 179/ Bonus/ Sp. Depr.	Prio Dec. E Dep	Bal.	Salvage /Basis Reductn	Dep Basi	r. s	Prior Depr.	Method	Life	Rate	Current Depr.
m 99 0 /990-PF																		
urniture and Fixtures																		
Pre-2015 Furn/Equip	12/31/14		5,760										5,760	5,760	S/L	7		
2015 Furn/Fix	12/31/15		1,964										1,964	1,274	200DB MQ	7	.10040	
3 2017 Furn/Fix	4/03/17		460										460	179	200DB HY	7	.17490	
5 2019 Furn/Fix	4/25/19		62										62		200DB HY	7	.14290	
Total Furniture and Fixtures			8,246		0		0	0		0	0		8,246	7,213				
mprovements													,					
2 Pre-2015 Land Improvement	12/31/14		374,098									3	374,098	374,098	S/L	15		
2015 Land Improvement	4/29/15		4,379										4,379	1,387	150DB MQ	15	.06830	
7 2016 Land Improvement	10/22/16		4,663										4,663	934	150DB MQ	15	.08000	
3 2017 Land Improvement	2/15/17		1,031										1,031	150	150DB HY	15	.08550	
2 2018 Land Improvement	8/30/18		2,546										2,546	127	150DB HY	15	.09500	
4 2019 Land Improvement	8/16/19		6,420										6,420		150DB HY	15	.05000	
Total Improvements			393,137		0		0	C		0	C) 3	393,137	376,696				
Land																		
1 87227 Munsel Lake Rd	12/31/14	_	51,299										51,299					
Total Land			51,299		0		0	(0	C)	51,299	0				
Machinery and Equipment																		

12/31/19

2019 Federal Book Depreciation Schedule

Page 2

Siuslaw Rod & Gun Club

93-6031546

_No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus. Pct.	Cur 179 Bonus	Special Depr. Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec. Bal. Depr.	Salvage /Basis _Reductn	Depr. Basis	Prior Depr.	Method	_Life_	Rate	Current Depr.
5	2015 Equip	12/31/15		16,245							16,245	12,911	200DB MQ	5	.10940	1,777
10	Kubota Tractor	2/21/17		5,960							5,960	3,099	200DB HY	5	.19200	1,144
11	Cub LT Mower	5/07/17		1,499							1,499	780	200DB HY	5	.19200	288
13	2018 Equip	2/20/18		6,575							6,575	1,315	200DB HY	5	.32000	2,104
16	2019 Equip	3/04/19		5,172							5,172		200DB HY	5	.20000	1,034
	Total Machinery and Equipment			35,451		0	0	() (0	35,451	18,105				6,347
	Total Depreciation			488,133		0	0		00	0	488,133	402,014				7,956
	Grand Total Depreciation			488,133		0	0		0 (00	488,133	402,014				7,956

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form, as it may be made public.

► Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

Boroset resplicable: Capitage	_		ne 2019 Calendar year, or tax year beginning , 2019, and ending	,	
Satus Satu				mployer ide	ntification number
The standard control of the contro			Cinalar Dad C Cun Club	93-603	1546
President interminent President referred President President referred President referred President President referred President referred President President referred President Preside			07227 Muncel Take Pd		
Amended return Amen	H		Florence OP 07420		
Sopiciation penditro	H		urn/terminated	541-90	2-1108
Accounting Method: Cash Accrual Other (specify) Accrual Other Study Accrual Other Accrual Othe			Ir S		mption
Website: * situalawrodgunic1ub. com	근				rganization is not
Tax-exempt tatus (check only one)	ĭ				
Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ. 47, 276.	J		tempt status (check only one) — 501(c)(3) X 501(c) (7) ◄(insert no.) 4947(a)(1) or 527 (Form 990,		
Part Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part Check if the organization used Schedule O to respond to any question in this Part	K	Form	of organization: X Corporation Trust Association Other		
Check if the organization used Schedule O to respond to any question in this Part I 1 Contributions, gifts, grants, and similar amounts received. 2 Program service revenue including government fees and contracts. 2 2 2,713. 3 Membership dues and assessments. 4 Investment income. 5 a Gross amount from sale of assets other than inventory. a b Less: cost or other basis and sales expenses. 5 b c Gain or (Joss) from sale of assets other than inventory. a c Gain or (Joss) from sale of assets other than inventory. b Gross income from gaming (attach Schedule G if greater than \$15,000) [6 a] b Gross income from fundraising events (not including \$ of contributions from fundraising events (not on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) [6 c] d Net income or (Joss) from gaming and fundraising events. [6 c] d Net income or (Joss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) c Gross sprofit or (Joss) from sales of inventory (subtract line 7b from line 7a) 7 C G. 3 Other revenue (Joss) from sales of inventory (subtract line 7b from line 7a) 7 C G. 3 Other revenue (Joss) from sales of inventory (Subtract line 7b from line 7a) 10 Grants and similar amounts paid (Jist in Schedule O) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 13 Professional fees and other payments to independent contractors 13 Professional fees and other payments to independent contractors 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe in Schedule O) 17 Total expenses. Add lines 10 through 16 18 Excess or (Jeficit) for the year (Subtract line 17 from line 9) 18 Excess or (Jeficit) for the year (Subtract line 17 from line 9) 29 Other cha		asset	ts (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ	. ►\$	
1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 3 43,985 3 43,985 4 Investment income 4 5 6 Gaming and fundraising events 5 5 5 5 5 5 5 5 5	Pa	rt I			
2 Program service revenue including government fees and contracts. 3 Membership dues and assessments. 4 Investment income. 5 Gross amount from sale of assets other than inventory. b Less: cost or other basis and sales expenses. c Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a). 6 Garning and fundraising events: a Gross income from garning (attach Schedule G if greater than \$15,000). b Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000). b Gla c Less: direct expenses from garning and fundraising events. d Net income or (Joss) from garning and fundraising events. c Gross profit or (Joss) from garning and fundraising events. c Gross profit or (Joss) from sales of inventory (subtract line 7b from line 7a). c Gross profit or (Joss) from sales of inventory (subtract line 7b from line 7a). 7 C G G. 8 Other revenue (describe in Schedule O). 10 Grants and similar amounts paid (list in Schedule O). 11 Benefits paid to or for members. 11 1 1 2 Salaries, other compensation, and employee benefits. 12 13 Professional fees and other payments to independent contractors. 13 14 9, 646. 15 Printing, publications, postage, and shipping. 16 Other expenses (describe in Schedule O). 17 Total expenses. Add lines 10 through 16. 18 Excess or (deficit) for the year (subtract line 17 from line 9). 18 Excess or (deficit) for the year (subtract line 17 from line 9). 18 Excess or (deficit) for the year (subtract line 17 from line 9). 19 Net assets or fund balances at end of year. Combine lines 18 through 20. 20 Other changes in net assets or fund balances (explain in Schedule O). 20 Other changes in net assets or fund balances at end of year. Combine lines 18 through 20.			Check if the organization used Schedule O to respond to any question in this Part I		X
3 Membership dues and assessments. 3 43,985. 4 Investment income. 4 5 a Gross amount from sale of assets other than inventory. 5 b Less: cost or other basis and sales expenses. 5 b 5 c 6 Gaming and fundraising events: a Gross income from gaming (attach Schedule G if greater than \$15,000). 6 a 6 Gaming and fundraising events (not including \$ of contributions from fundraising events (not including \$ of contributions schedule G if the sum of such gross income and contributions evends \$15,000). 6 b 6 c c Less: direct expenses from gaming and fundraising events (add lines 6a and 6b and subtract line 6c). 6 c c Gross profit or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c). 7 a Gross sales of inventory, less returns and allowances. 7 a 578. 578. 578. 578. 579. 7 c 6. 3 Other revenue (describe in Schedule O). 8 7 to 10 Grants and similar amounts paid (list in Schedule O). 9 Total revenue, Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8. 9 46, 704. 10 Grants and similar amounts paid (list in Schedule O). 10 Benefits paid to or for members. 11 Senefits paid to or for members. 11 Senefits paid to or for members. 11 Senefits paid to or for members. 12 Salaries, other compensation, and employee benefits. 13 Professional fees and other payments to independent contractors. 13 Printing, publications, postage, and shipping. 15 1, 762. 16 Other expenses (describe in Schedule O). 16 22, 741. 17 Total expenses. Add lines 10 through 16. 17 Total expenses (describe in Schedule O). 18 Excess or (deficit) for the year (subtract line 17 from line 9). 18 12, 255. 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return). 20 Other changes in net assets or fund balances at end of year. Combine lines 18 through 20. 20 Sendent end of year. 223, 827.		1	Contributions, gifts, grants, and similar amounts received	1	
3 Membership dues and assessments. 3 43,985. 4 Investment income 4 5 a Gross amount from sale of assets other than inventory. 5 Less: cost or other basis and sales expenses. 5 Less: cost or other basis and sales expenses. 5 Less: cost or other basis and sales expenses. 5 Less: direct expenses from gaming (attach Schedule G if greater than \$15,000). 6 Less: direct expenses from gaming (attach Schedule G if greater than \$15,000). 6 Less: direct expenses from gaming and fundraising events (not including \$ of such gross income from fundraising events (not including \$ of such gross income and contributions exceeds \$15,000). 6 Less: direct expenses from gaming and fundraising events (add lines 6a and 6b and subtract line 6c). 6 Less: cost of goods sold. 7 Less: cost of goods sold.		2			2,713.
4 Investment income. 4 5 a Gross amount from sale of assets other than inventory. 5 b Less: cost or other basis and sales expenses. 5 b 5 c c 6 aming and fundraising events: a Gross income from gaming (attach Schedule G if greater than \$15,000). 6 a 5 c c 6 aming and fundraising events (not including \$ c c Less: direct expenses from fundraising events (not including \$ c c Less: direct expenses from gaming and fundraising events. 6 c c c c d d Net income or (loss) from gaming and fundraising events. 6 c c c d d Net income or (loss) from gaming and fundraising events. 6 c c c c d d Net income or (loss) from gaming and fundraising events. 6 c c c c c d d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c). 7 a Gross sales of inventory, less returns and allowances. 7 a 578. 572. c Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a). 7c c 6. 8 Other revenue (describe in Schedule O). 8 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8. 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8. 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8. 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8. 10 Grants and similar amounts paid (list in Schedule O). 10 In Benefits paid to or for members. 11 In Benefits paid to or for members. 12 Salaries, other compensation, and employee benefits. 13 Professional fees and other payments to independent contractors. 13 Sec Schedule O 16 22,741. 17 Sec. 16 Other expenses (describe in Schedule O). 16 22,741. 17 Sec. 17 Total expenses. Add lines 10 through 16. 17 Total expenses. Add lines 10 through 16. 17 Total expenses for fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return). 20 Other changes in net		3	Membership dues and assessments	3	
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6b and subtract line 6c). 7a Gross sales of inventory, less returns and allowances. b Less: cost of goods sold. c Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a). 8 Other revenue (describe in Schedule O). 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8. 10 Grants and similar amounts paid (list in Schedule O). 11 Benefits paid to or for members. 12 Salaries, other compensation, and employee benefits. 13 Professional fees and other payments to independent contractors. 14 Occupancy, rent, utilities, and maintenance. 15 Printing, publications, postage, and shipping. 16 Other expenses (describe in Schedule O). 17 Total expenses. Add lines 10 through 16. See Schedule 0 18 Excess or (deficit) for the year (subtract line 17 from line 9). 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return). 20 Other changes in net assets or fund balances (explain in Schedule O). 21 Net assets or fund balances at end of year. Combine lines 18 through 20.		С			
b Less: cost of goods sold. c Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a). 7c 6. 8 Other revenue (describe in Schedule O). 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8. 10 Grants and similar amounts paid (list in Schedule O). 11 Benefits paid to or for members. 12 Salaries, other compensation, and employee benefits. 13 Professional fees and other payments to independent contractors. 14 Occupancy, rent, utilities, and maintenance. 15 Printing, publications, postage, and shipping. 16 Other expenses (describe in Schedule O). 17 Total expenses. Add lines 10 through 16. 18 Excess or (deficit) for the year (subtract line 17 from line 9). 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return). 20 Other changes in net assets or fund balances (explain in Schedule O). 21 Net assets or fund balances at end of year. Combine lines 18 through 20.		d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6 d	
c Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a). 8 Other revenue (describe in Schedule O). 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8. 10 Grants and similar amounts paid (list in Schedule O). 11 Benefits paid to or for members. 12 Salaries, other compensation, and employee benefits. 13 Professional fees and other payments to independent contractors. 14 Occupancy, rent, utilities, and maintenance. 15 Printing, publications, postage, and shipping. 16 Other expenses (describe in Schedule O). 17 Total expenses. Add lines 10 through 16. 18 Excess or (deficit) for the year (subtract line 17 from line 9). 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return). 19 Other changes in net assets or fund balances (explain in Schedule O). 20 Other changes in net assets or fund balances (explain in Schedule O). 21 Net assets or fund balances at end of year. Combine lines 18 through 20.					
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10 Grants and similar amounts paid (list in Schedule O). 11 Benefits paid to or for members. 12 Salaries, other compensation, and employee benefits. 13 Professional fees and other payments to independent contractors. 14 Occupancy, rent, utilities, and maintenance. 15 Printing, publications, postage, and shipping. 16 Other expenses (describe in Schedule O). 17 Total expenses. Add lines 10 through 16. 18 Excess or (deficit) for the year (subtract line 17 from line 9). 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return). 20 Other changes in net assets or fund balances (explain in Schedule O). 21 Net assets or fund balances at end of year. Combine lines 18 through 20. 21 223,827.		8	Other revenue (describe in Schedule O)	8	
10 Grants and similar amounts paid (list in Schedule O). 11 Benefits paid to or for members. 12 Salaries, other compensation, and employee benefits. 13 Professional fees and other payments to independent contractors. 14 Occupancy, rent, utilities, and maintenance. 15 Printing, publications, postage, and shipping. 16 Other expenses (describe in Schedule O). 17 Total expenses. Add lines 10 through 16. 18 Excess or (deficit) for the year (subtract line 17 from line 9). 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return). 20 Other changes in net assets or fund balances (explain in Schedule O). 21 Net assets or fund balances at end of year. Combine lines 18 through 20. 21 223,827.		9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	46,704.
11 Benefits paid to or for members		10	Grants and similar amounts paid (list in Schedule O)	10	
12 Salaries, other compensation, and employee benefits 12 13 Professional fees and other payments to independent contractors 13 14 15 15 15 17 16 17 17 17 18 18 18 18 19 18 19 18 19 19		11	Benefits paid to or for members	11	
13 Professional fees and other payments to independent contractors. 14 Occupancy, rent, utilities, and maintenance. 15 Printing, publications, postage, and shipping. 16 Other expenses (describe in Schedule O). 17 Total expenses. Add lines 10 through 16. 18 Excess or (deficit) for the year (subtract line 17 from line 9). 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return). 20 Other changes in net assets or fund balances (explain in Schedule O). 21 Net assets or fund balances at end of year. Combine lines 18 through 20.		12	Salaries, other compensation, and employee benefits	12	
14 Occupancy, rent, utilities, and maintenance 14 9, 646. 15 Printing, publications, postage, and shipping 15 1, 762. 16 Other expenses (describe in Schedule O) 16 22, 741. 17 Total expenses. Add lines 10 through 16 17 34, 149. 18 Excess or (deficit) for the year (subtract line 17 from line 9) 18 12, 555. 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 211, 272. 20 Other changes in net assets or fund balances (explain in Schedule O) 20 21 Net assets or fund balances at end of year. Combine lines 18 through 20.	S				-
17 Total expenses. Add lines 10 through 16.	nse		Occupancy, rent, utilities, and maintenance		9,646.
17 Total expenses. Add lines 10 through 16.	be		Disting whilesting acctors and chinning	15	1,762.
17 Total expenses. Add lines 10 through 16	ũ		Other expenses (describe in Schedule O)	16	
18 Excess or (deficit) for the year (subtract line 17 from line 9)		17	Total expenses. Add lines 10 through 16	17	34,149.
Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		-	Excess or (deficit) for the year (subtract line 17 from line 9)	18	
21 Net assets or fund balances at end of year. Combine lines to through 20	ets	12.04			
21 Net assets or fund balances at end of year. Combine lines to through 20	55	19	figure reported on prior year's return)	19	211,272.
21 Net assets or fund balances at end of year. Combine lines to through 20	et A	20	Other changes in net assets or fund balances (explain in Schedule O)	20	-
	ž		Net assets or fund balances at end of year. Combine lines 18 through 20	21	223,827.
	BΔ				

Page 2

	Check if the organization used School	edule O to respond to any qu	uestion in this Part II.			X			
				(A) Beginning of ye	ar	(B) End of year			
22	Cash, savings, and investments	, savings, and investments							
23	Land and buildings	Coo Cobodul		61,320					
24	Other assets (describe in Schedule O)	see schedul	e.u[121,682					
25	Total assets		[211,272	. 25				
26	Total liabilities (describe in Schedule O)	[0	. 26	0.			
27	Net assets or fund balances (line 27 of			211,272	. 27	223,827.			
Par	t III Statement of Program Service Ac	ccomplishments (see the inst	tructions for Part III)			Expenses			
What	Check if the organization used Sc	hedule O to respond to any	question in this Part	III X	(Red	uired for section 501			
wnat	is the organization's primary exempt purpose? See	Schedule O			(c)(3)) and 501(c)(4)			
mea	ribe the organization's program service a sured by expenses. In a clear and concise fited, and other relevant information for e	e manner, describe the servi	its three largest proces provided, the nu	ram services, as		nizations; optional thers.)			
bene	fited, and other relevant information for e	each program title.							
28	Siuslaw Rod & Gun Club is								
	variety of shooting event	<u>s_and_range_facil:</u>	<u>ities to its </u>	members					
	(Grants \$) If th	is amount includes foreign g			00				
29	(Giants \$	is amount includes foreign g	rants, check here		28 a	30,513.			
23									
	(Grants \$) If th	is amount includes foreign g	rants check here		29 a				
30					29 a				
	(Grants \$) If th	is amount includes foreign g	rants, check here		30 a				
31	Other program services (describe in Sch	nedule O)							
	(Grants \$) If th	is amount includes foreign g	rants, check here	▶ □	31 a				
32	Total program service expenses (add lin	nes 28a through 31a)			32	30,513.			
Par	t IV List of Officers, Directors,	Trustees, and Key Emp	loyees (list each one e	ven if not compensated - s	ee the	instructions for Part IV)			
	Check if the organization used Sc	hedule O to respond to any	question in this Part	V		L			
	(A) Managara de Pilla	(b) Average hours per	(c) Reportable compensat	on (d) Health benefits contributions to emplo	5,	(e) Estimated amount of			
	(a) Name and title	week devoted to position	(Forms W-2/1099-MISC) (if not paid, enter -0-)	benefit plans, and defe	erred	other compensation			
Tor	ry Harpole			compensation					
	sident	25).	0.	0			
	shall Gunderson			, · · · · · · · · · · · · · · · · · · ·	0.	0.			
	e President	3	().	Ο.	0.			
	ce_Mower		`	· ·	٠.	0.			
	retary	5).	0.	0.			
	ne_Harpole					· ·			
	asurer	15	().	0.	0.			
				1	- 1				

Page 3

rai	the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V			
	Did the organization engage in any significant activity not previously reported to the IRS?		Yes	No
	If 'Yes,' provide a detailed description of each activity in Schedule O	33		X
	Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions.	34		Х
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35 a		v
į.	of Yes' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O.	35 b		<u>X</u>
		33 D		
	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III	35 c		X
	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		X
	Enter amount of political expenditures, direct or indirect, as described in the instructions 237a 0.	37 b		
	Did the organization file Form 1120-POL for this year?	3/10	2.5 HF	X
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38 a	A STATE OF	X
L	amount involved			
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on line 9			
	Gross receipts, included on line 9, for public use of club facilities			
40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: N/A			
	section 4911 \(\begin{array}{c} 0. \); section 4912 \(\begin{array}{c} 0. \); section 4955 \(\begin{array}{c} 0. \); section 4955 \(\begin{array}{c} 0. \); section 4958 \(\begin{array}{c} 0. \); sectio			
Ľ	benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been	and Applications	ACC pet Mayor someon	aren milder unspired
	reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	40 b	en is the former.	Chr. Chr. M
C	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed			
,	by the organization.	100		
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T.	40 e		X
	Shorter transactions in 100, complete commence in the contract of the contract			
41	List the states with which a copy of this return is filed None			
42 a	List the states with which a copy of this return is filed ► None The organization's books are in care of ► Randall J. Pilcher Located at ► 87842 Sandrift St. Florence OR Telephone no. ► 541-9 ZIP + 4 ► 97439		987_ Yes	No
42 a	List the states with which a copy of this return is filed None The organization's books are in care of Randall J. Pilcher Located at 87842 Sandrift St Florence OR 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)?			<u> </u>
42 a	List the states with which a copy of this return is filed ► None The organization's books are in care of ► Randall J. Pilcher Located at ► 87842 Sandrift St. Florence OR Telephone no. ► 541-9 ZIP + 4 ► 97439			No
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42 a	The organization's books are in care of Randall J. Pilcher Located at 87842 Sandrift St Florence OR 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)? See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filling Form 990-EZ in lieu of Form 1041 — Check here.	42 b	Yes	No X X
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42 a b c c c c c c c c c c c c c c c c c c	The organization's books are in care of Randall J. Pilcher Located at 87842 Sandrift St. Florence OR 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)? See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here	42 b 42 c 44 a 44 b	Yes	No X N/A N/A No X
42 a b c c c c c c c c c c c c c c c c c c	The organization's books are in care of ► Randall J. Pilcher Telephone no. ► 541-9 Located at ► 87842 Sandrift St Florence OR All the organization are under 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)? See the instructions for exceptions and filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country ► Section 4947(a)(1) nonexempt charitable trusts filling Form 990-EZ in lieu of Form 1041 — Check here. and enter the amount of tax-exempt interest received or accrued during the tax year. A Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ. Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.	42 b 42 c	Yes	No X X N/A N/A No X
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42 a b b c c c c c c c c c c c c c c c c c	The organization's books are in care of ► Randall J. Pilcher Telephone no. ► 541-9 Located at ► 87842 Sandrift St Florence OR ZIP + 4 ► 97439 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)? See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here. and enter the amount of tax-exempt interest received or accrued during the tax year. At the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ. Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ. Did the organization receive any payments for indoor tanning services during the year? If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O. Did the organization have a controlled entity within the meaning of section 512(b)(13)?	42 b 42 c 44 a 44 b 44 c	Yes	No X N/A N/A No X
42 a b b c c c c c c c c c c c c c c c c c	The organization's books are in care of ► Randall J. Pilcher Telephone no. ► 541-9 Located at ► 87842 Sandrift St Florence OR ZIP + 4 ► 97439 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)? See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here	42 b 42 c 44 a 44 b 44 c 44 d	Yes	No X N/A N/A No X X

Form 9	90-EZ (2019) Siuslaw Rod & Gun (Club				93-60	3154	6	Р	age 4	
									Yes	No	
С	old the organization engage, directly or indire andidates for public office? If 'Yes,' complete	ctly, in political campa e Schedule C, Part I	ign activities	s on behalf o	of or in o	opposition to		46		X	
Part \	VI Section 501(c)(3) Organization All section 501(c)(3) organization for lines 50 and 51.		uestions 4	47-49b an	d 52, a	and comple	te the	table	es		
	Check if the organization used Schedu	le O to respond to any	question in	this Part VI.						. П	
	id the organization engage in lobbying activities omplete Schedule C, Part II							47	Yes	No	
	s the organization a school as described in s							47			
	id the organization make any transfers to an							49 a			
	'Yes,' was the related organization a section			30				49 b			
	omplete this table for the organization's five hig mployees) who each received more than \$100,0						key				
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable (Forms W-2	e compensation 2/1099-MISC)	contribu	Health benefits, utions to employee plans, and deferred ompensation	(e) E	Estimate her com			
							×				
									×		
- F T	otal number of other employees paid over \$	100,000									
51 C	omplete this table for the organization's five high compensation from the organization. If there is	hest compensated indepe	endent contra	actors who ea	ch recei	ived more than	\$100,00	00 of			
	(a) Name and business address of each independent of	ontractor		(b) Type	of service		(c) Comp	ensation	1	
	otal number of other independent contractors										
C	id the organization complete Schedule A? Normpleted Schedule A						▶[Yes		No	
Under per true, corre	nalties of perjury, I declare that I have examined this return, ect, and complete. Declaration of preparer (other than office	, including accompanying sche er) is based on all information of	dules and stater of which prepare	ments, and to the er has any know	e pest of n	ny knowledge and	belief, it is	·			
	Signature of officer				Date	-					
Sign Here	Randall Pilcher				- 5 33	surer - 2	surer - 2023				
	Type or print name and title Print/Type preparer's name	Preparer's signature		Date			PTIN				
	Wendy Esgate	Wendy Esgate				Check if self-employed	P021	6105	3		
Paid		mendy boyate				,	- 244	. 02101033			
Prepar Use On	-	N				Firm's EIN	46-	1949	182		

TEEA0812L 08/23/19

EUGENE, OR 97402

BAA

Phone no. 541-607-3383

Form 990-EZ (2019)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Inspection

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Siuslaw Rod & Gun Club

Employer identification number

93-6031546

Form 990-EZ - Explanation of Amended Return

During tax year 2022, the organization discovered misappropriation of funds dating back to 2015.

As a result of this discovery, the organization has corrected its books and records for tax years 2015 - 2021. Per discussion with the IRS, the organization is amending its Form 990-EZ return of organization exempt from income tax for tax years 2015 - 2021 to reflect its corrected financial statements. This amendment effects parts I, III, V and related schedules.

Form 990-EZ, Part I, Line 16 Other Expenses

Bank Fees	\$	20.
Depreciation		7,956.
Equipment Rental		
Events		1,044.
Fees, Dues, & Subscriptions		
Insurance		4,234.
Interest		
Office Expenses		1,104.
Repairs & Maintenance		3,941.
Supplies	_	2,231.
Total	\$	22,741.

Form 990-EZ, Part II, Line 24 Other Assets

	<u>Beginning</u>	Ending
Furniture and Fixtures Inventories Machinery and Equipment Receivables-Officers, Directors, Etc	46,198. 12,174. 62,339.	62,474. 10,999.

Form 990-EZ, Part III - Organization's Primary Exempt Purpose

To provide shooting events and range facilities for club members