

Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions)
All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form
The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2011 calendar year, or tax year beginning 07-01-2011, and ending 06-30-2012

- B Check if applicable: Address change, Name change, Initial return, Terminated, Amended return, Application pending

C Name of organization: Lahontan Audubon Society
Number and street (or P O box, if mail is not delivered to street address) Room/suite: PO Box 5406
City or town, state or country, and ZIP + 4: Incline Village, NV 894505406

D Employer identification number: 23-7181150
E Telephone number: (775) 832-9222
F Group Exemption Number

G Accounting method: Cash, Accrual, Other (specify)

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: www.nevadaaudubon.org

J Tax-Exempt status (check only one): 501(c)(3), 501(c), (insert no), 4947(a)(1), 527

K Check if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000

L 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, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ \$ 165,649

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

Table with 3 main sections: Revenue (lines 1-9), Expenses (lines 10-17), and Net Assets (lines 18-21). Includes sub-rows for detailed revenue and expense categories.

Part II **Balance Sheets**

Check if the organization used Schedule O to respond to any question in this Part II

(See the instructions for Part II)

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	211,595	22	192,150
23 Land and buildings		23	
24 Other assets (describe in Schedule O)	60,859	24	77,058
25 Total assets	272,454	25	269,208
26 Total liabilities (describe in Schedule O)	35,557	26	2,263
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	236,897	27	266,945

Part III **Statement of Program Service Accomplishments**

Check if the organization used Schedule O to respond to any question in this Part III

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

What is the organization's primary exempt purpose?
To conserve and improve habitat for birds and other wildlife in the state of Nevada and to educate the public with an emphasis on children about the importance of caring for our beautiful state

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28 See Additional Data Table

(Grants \$) If this amount includes foreign grants, check here **28a**

29

(Grants \$) If this amount includes foreign grants, check here **29a**

30

(Grants \$) If this amount includes foreign grants, check here **30a**

31 Other program services (describe in Schedule O)
(Grants \$) If this amount includes foreign grants, check here **31a**

32 Total program service expenses (add lines 28a through 31a) **32** 121,348

Part IV **List of Officers, Directors, Trustees, and Key Employees.** List each one even if not compensated (See the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
See Additional Data Table				

Part V Other Information (Note the statement requirements in the instructions for Part V.)

Check if the organization used Schedule O to respond to any question in this Part V

Form 990-EZ (2011) Part V Other Information. Questions 33-45b regarding significant activities, changes, income, political expenditures, loans, and controlled entities.

Table with columns for question number, Yes, and No. Contains responses for questions 33 through 45b.

Yes **No**

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

46		No
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Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.

All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52.

Check if the organization used Schedule O to respond to any question in this Part VI

Yes **No**

47 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

47		No
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48 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48		No
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49a Did the organization make any transfers to an exempt non-charitable related organization?

49a		No
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b If "Yes," was the related organization a section 527 organization?

49b		
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50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

52 Did the organization complete Schedule A? **NOTE:** All Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Yes No

Under penalties of perjury, I declare that 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. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	***** Signature of officer	2012-11-13 Date
	Jane Burnham President Type or print name and title	

Paid Preparer's Use Only	Preparer's signature ▶ Dave B Straley	Date 2012-11-13	Check if self-employed <input type="checkbox"/>	Preparer's taxpayer identification number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ Straley Perdue LLC PO Box 5406 Incline Village, NV 89450			EIN ▶ Phone no ▶ (775) 832-9222

May the IRS discuss this return with the preparer shown above? See instructions Yes No

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2011

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
Lahontan Audubon Society

Employer identification number

23-7181150

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
 (ii) a family member of a person described in (i) above?
 (iii) a 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						0

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV.) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** **Section C. Computation of Public Support Percentage**

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	0 %
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15	

16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization **b 33 1/3% support test—2010.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization **17a 10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization **b 10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization **18 Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	156,969	209,368	150,166	145,016	154,362	815,881
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	2,743	1,397	1,069	2,676	925	8,810
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	159,712	210,765	151,235	147,692	155,287	824,691
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						824,691

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	159,712	210,765	151,235	147,692	155,287	824,691
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,210	1,730	291	1,991		6,222
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	2,210	1,730	291	1,991		6,222
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0
13 Total support (Add lines 9, 10c, 11 and 12.)	161,922	212,495	151,526	149,683	155,287	830,913
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	99.250 %
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	98.920 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	0.750 %
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	1.080 %

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

Additional Data

Software ID: 11000218
Software Version: 2011.0.0
EIN: 23-7181150
Name: Lahontan Audubon Society

Form 990-EZ, Special Condition Description:

Special Condition Description

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for 501(c)(3) and 501(c)(4) organizations and 4947(a)(1) trusts; optional for others.)	
28 Nevada Important Bird Area Program Identify, conserve and restore a network of sites throughout Nevada that provide essential habitat for bird populations, developed 9 projects that attracted 500 volunteers (Grants \$ 126,000) If this amount includes foreign grants, check here . . . <input type="checkbox"/>	28a	108,302
29 This year we worked on filling our mobile classroom with 100 donated field guides, donated and purchased taxidermy mounts of the area birds With these materials we conducted 13 classroom visits, gave 14 public talks reaching 1330 (Grants \$ 8,000) If this amount includes foreign grants, check here . . . <input type="checkbox"/>	29a	5,305
30 Newsletter keeping the membership informed of field trips, programs and conservation issues Over 20 volunteer writers and editors put together an 8 to 12 page paper Mailed 7200 copies to 1200 members (Grants \$ 7,000) If this amount includes foreign grants, check here . . . <input type="checkbox"/>	30a	5,531
Held 8 General Meetings, educating and informing our membership attended by over 468 members and non members Conducted 25 Field Trips with 325 members and non mееbers attending (Grants \$) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		
Transportation Grants Provided transportation for 280 children and teachers so they could explore and learn about birds and habitats (Grants \$ 3,000) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		2,210

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Jacque Lowery PO Box 2304 Reno, NV 89505	President 010 00	0		
Alan Gubanich PO Box 2304 Reno, NV 89505	Vice President 010 00	0		
Jane Burnham PO Box 2304 Reno, NV 89505	Treasurer 010 00	0		
Laura Gibson PO Box 2304 Reno, NV 89505	Secretary 003 00	0		
Dave Straley PO Box 2304 Reno, NV 89505	Trustee 003 00	0		

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2011

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

Name of the organization
Lahontan Audubon Society

Employer identification number

23-7181150

Identifier	Return Reference	Explanation
Form 990-EZ Part III	1	To conserve and improve habitat for birds and other wildlife in the state of Nevada and to educate the public with an emphasis on children about the importance of caring for our beautiful state
		<p>Form 990-EZ, Part I, Line 10, Grants Paid Activity Education, Grantee Sun Valley Elementary School 5490 Leon Drive Sun Valley NV 89433, Cash Grant 800, Relationship Form 990-EZ, Part I, Line 10, Grants Paid Activity Education, Grantee Nancy Gomes Elementary School 3870 Limkin Street Reno NV 89508, Cash Grant 340, Relationship Form 990-EZ, Part I, Line 10, Grants Paid Activity Education, Grantee Nancy Gomes Elementary School 3870 Limkin Street Reno NV 89508, Cash Grant 135, Relationship Form 990-EZ, Part I, Line 10, Grants Paid Activity Education, Grantee Elmcrest Elementary School 855 McDonald Drive Reno NV 89503, Cash Grant 135, Relationship Form 990-EZ, Part I, Line 10, Grants Paid Activity Education, Grantee Alice Maxwell Elementary School 2300 N Rock Blvd Sparks NV 89431, Cash Grant 800, Relationship Form 990-EZ, Part I, Line 10, Grants Paid Activity Conservation, Grantee Marlana Martin PO Box 6886 Gardnerville NV 89460, Cash Grant 500, Relationship Form 990-EZ, Part I, Line 10, Grants Paid Activity Conservation, Grantee Greg Bryan HC 61 Box 6270 Austin NV 89310, Cash Grant 500, Relationship Form 990-EZ, Part I, Line 10, Grants Paid Activity Conservation, Grantee Daylon Boots HC 61 Box 6225 Austin NV 89310, Cash Grant 500, Relationship Form 990-EZ, Part I, Line 10, Grants Paid Activity Conservation, Grantee Darlene Dewey HC 61 Box 6270 Austin NV 89310, Cash Grant 500, Relationship Form 990-EZ, Part I, Line 10, Grants Paid Activity Conservation, Grantee Dayvin Jim HC 61 Box 6224 Austin NV 89310, Cash Grant 500, Relationship Form 990-EZ, Part I, Line 10, Grants Paid Activity Conservation, Grantee Dasha Jim HC 61 Box 6224 Austin NV 89310, Cash Grant 500, Relationship Form 990-EZ, Part I, Line 16, Other Expenses Travel 14,479 Form 990-EZ, Part I, Line 16, Other Expenses Meals and entertainment 2,597 Form 990-EZ, Part I, Line 16, Other Expenses Conferences, conventions, and meetings 470 Form 990-EZ, Part I, Line 16, Other Expenses Depreciation 1,441 Form 990-EZ, Part I, Line 16, Other Expenses Equipment rental and maintenance 310 Form 990-EZ, Part I, Line 16, Other Expenses Supplies 16,000 Form 990-EZ, Part I, Line 16, Other Expenses Licenses and Permits 328 Form 990-EZ, Part I, Line 16, Other Expenses Bank Fees 17 Form 990-EZ, Part I, Line 16, Other Expenses Dues and Subscriptions 321 Form 990-EZ, Part I, Line 16, Other Expenses Insurance 1,733 Form 990-EZ, Part I, Line 16, Other Expenses Office Expense 2,080 Form 990-EZ, Part I, Line 16, Other Expenses Speaker Fees 3,657 Form 990-EZ, Part I, Line 16, Other Expenses Special Events Fees 1,250 Form 990-EZ, Part I, Line 16, Other Expenses Volunteer Appreciation 231 Form 990-EZ, Part I, Line 20, Net Assets Depreciation not recorded on books 22 Form 990-EZ, Part I, Line 20, Net Assets Previous period account payable forgiven and added as income -4,221 Form 990-EZ, Part II, Line 24, Other Assets inventory Beginning of year 499, End of year 597 Form 990-EZ, Part II, Line 24, Other Assets Accounts Receivable Beginning of year 852, End of year 77 Form 990-EZ, Part II, Line 24, Other Assets Grants Receivable Beginning of year 53,087, End of year 71,382 Form 990-EZ, Part II, Line 24, Other Assets Total fixed assets Beginning of year 6,384, End of year 4,965 Form 990-EZ, Part II, Line 24, Other Assets Employee advance Beginning of year 37, End of year 37 Form 990-EZ, Part II, Line 26, Liabilities Accounts Payable Beginning of year 31,047, End of year 0 Form 990-EZ, Part II, Line 26, Liabilities Accounts Payable Credit Cards Beginning of year 4,129, End of year 833 Form 990-EZ, Part II, Line 26, Liabilities Payroll Liabilities Beginning of year 381, End of year 1,430 Form 990-EZ, Part III, Line 31 Held 8 General Meetings, educating and informing our membership attended by over 468 members and non members Conducted 25 Field Trips with 325 members and non members attending Grants and allocations 0, Program service expenses 0 Form 990-EZ, Part III, Line 31 Transportation Grants Provided transportation for 280 children and teachers so they could explore and learn about birds and habitats Grants and allocations 3,000, Program service expenses 2,210 Form 990-EZ Part III Section 1 Line 1 To conserve and improve habitat for birds and other wildlife in the state of Nevada and to educate the public with an emphasis on children about the importance of caring for our beautiful state</p>

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

2011

Attachment Sequence No 179

Department of the Treasury Internal Revenue Service (99)

See separate instructions. Attach to your tax return.

Table with 3 columns: Name(s) shown on return, Business or activity to which this form relates, Identifying number.

Part I Election to Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

Table with 5 rows for election details: 1 Maximum amount, 2 Total cost, 3 Threshold cost, 4 Reduction in limitation, 5 Dollar limitation.

Table with 13 rows for depreciation calculations: 6-13 (a) Description of property, (b) Cost, (c) Elected cost, 7-13 (a) Description of property, (b) Cost, (c) Elected cost.

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)

Table with 4 rows for special depreciation: 14-16 (a) Description of property, (b) Cost, (c) Elected cost.

Part III MACRS Depreciation (Do not include listed property.)

Section A

Table with 2 rows for MACRS deductions: 17 MACRS deductions, 18 Grouping election.

Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction.

Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

Table with 3 rows for alternative depreciation: 20a Class life, b 12-year, c 40-year.

Part IV Summary (see instructions)

Table with 3 rows for summary: 21 Listed property, 22 Total, 23 For assets shown above.

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation/deduction, (i) Elected section 179 cost.

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) **25**

26 Property used more than 50% in a qualified business use

Table for line 26 with columns: Utility Trailer for, 2010-11-10, 100 000 %, 7,093, 7,093, 05 0, S/L-HY, 1,419.

27 Property used 50% or less in a qualified business use

Table for line 27 with columns: %, S/L -.

28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 **28** 1,419

29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 **29**

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table for Section B with columns (a) through (f) for Vehicle 1 through 6. Rows include 30-33 (miles driven) and 34-36 (availability and use).

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

Table for Section C with columns Yes/No. Rows include 37-41 (policy statements and requirements).

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles

Part VI Amortization

Table for Section VI with columns (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year.

42 Amortization of costs that begins during your 2011 tax year (see instructions)

Table for line 42 with columns (a) through (f).

43 Amortization of costs that began before your 2011 tax year **43**

44 Total. Add amounts in column (f) See the instructions for where to report **44**