

Short Form

Return of Organization Exempt From Income Tax

2014

Open to Public Inspection

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.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

A For the 2014 calendar year, or tax year beginning 12/01, 2014, and ending 11/30, 2015

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: BATTLEFIELD PARK SWIM & RACQUET CLU
 Number and street (or P.O. box, if mail is not delivered to street address): P O BOX 1784
 Room/suite:
 City or town, state or province, country, and ZIP or foreign postal code: PETERSBURG, VA 23805

D Employer identification number: 54-0628161
E Telephone number: 804-733-4511
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: ▶

J Tax-exempt status (check only one) – 501(c)(3) 501(c) (7) ◀ (insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other

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, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 112818

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

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	77616
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less: cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		
c	Less: direct expenses from gaming and fundraising events	6c		
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less: cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O)	8	35202	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶	9	112818	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	42045
	13	Professional fees and other payments to independent contractors	13	3138
	14	Occupancy, rent, utilities, and maintenance	14	14826
	15	Printing, publications, postage, and shipping	15	335
	16	Other expenses (describe in Schedule O)	16	59083
17	Total expenses. Add lines 10 through 16 ▶	17	119427	
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-6609
	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	-34161
	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 ▶	21	-40770

For Paperwork Reduction Act Notice, see the separate instructions.

Part II Balance Sheets (see the instructions for Part II)

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

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	1640	22 4482
23 Land and buildings	10474	23 7174
24 Other assets (describe in Schedule O)	193	24 193
25 Total assets	12307	25 11849
26 Total liabilities (describe in Schedule O)	46468	26 45554
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	-34161	27 -33705

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

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

What is the organization's primary exempt purpose? TO PROVIDE SAFE AND PLEASANT RECRE

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

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 TO PROVIDE SAFE AND PLEASANT RECREATIONAL FACILITIES FOR CLUB MEMBERS		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	
29		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a)		32

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 title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
TAMMY COLLINS PRESIDENT	1	0		
GLENDA HUNTER VICE PRESIDENT	1	0		
ELLEN WALTHALL SECRETARY	1	0		
SUSAN NELSON TREASURER	1	0		

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 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.
35a 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)?
35b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O
35c 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?
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year?
37a Enter amount of political expenditures, direct or indirect, as described in the instructions
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations. Enter:
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:
40b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ?
40c 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
40d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization
40e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?
41 List the states with which a copy of this return is filed
42a The organization's books are in care of OFFICERS Telephone no. (804) 733-4511 Located at PETERSBURG, PETERSBURG VA ZIP + 4 23805
42b 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)?
42c At any time during the calendar year, did the organization maintain an office outside the U.S.?
43 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
44a Did the organization maintain any donor advised funds during the year?
44b Did the organization operate one or more hospital facilities during the year?
44c Did the organization receive any payments for indoor tanning services during the year?
44d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments?
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?

	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	X

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

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	
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b If "Yes," was the related organization a section 527 organization?	49b	
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 title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

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 business address of each independent contractor	(b) Type of service	(c) Compensation

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 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	Date
	▶ TAMMY COLLINS - PRESIDENT	
	▶ Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name LIKA DOREEN CREEL	Preparer's signature	Date 03/01/16	Check <input checked="" type="checkbox"/> if self-employed	PTIN P00773879
	Firm's name ▶ DOREEN CREEL WOOD ACCOUNTING	Firm's EIN ▶ 20-0041080			
	Firm's address ▶ 1511 W CITY POINT ROAD HOPEWELL, VA 23860	Phone no. (804) 452-4442			

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Name of the organization

BATTLEFIELD PARK SWIM & RACQUET CLU

Employer identification number

54-0628161

FORM 990-EZ, PART I, LINE 8 - OTHER REVENUE:

DESCRIPTION	AMOUNT
PAVILLION RENTAL	1800
ADULT ROOM RENTAL	100
SNACK BAR SALES	15957
SWIM LESSONS	625
MEMBERSHIP SOCIALS	925
STOCK FEE	3550
SWIM TEAM PROGRAM	8462
GOLF TOURNAMENT	3783
TOTAL:	35202

FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES:

DESCRIPTION	AMOUNT
TAXES	9908
INSURANCE	9049
BANK CHARGES	324
SUPPLIES	1119
INTEREST	3190
DEPRECIATION (FORM 4562)	600
JANITORIAL	46
LAWNCARE	3000
PENALTIES AND FINES	362
REPAIRS AND MAINTENANCE	21229
SNACK BAR COST OF GOODS	9414
SECURITY	225

Name of the organization BATTLEFIELD PARK SWIM & RACQUET CLU	Employer identification number 54-0628161
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TELEPHONE	617
TOTAL:	59083

FORM 990-EZ, PART II, LINE 24 - OTHER ASSETS:

DESCRIPTION	BEGINNING	ENDING
PETTY CASH	193	193
TOTAL:	193	193

FORM 990-EZ, PART II, LINE 26 - TOTAL LIABILITIES:

DESCRIPTION	BEGINNING	ENDING
LOAN BALANCE	46468	45554
TOTAL:	46468	45554

Depreciation and Amortization
(Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.
▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

2014
Attachment
Sequence No. **179**

Name(s) shown on return BATTLEFIELD PARK SWIM & RACQUET CLU	Business or activity to which this form relates EXEMPT ORGANIZATION	Z 1	Identifying number 54-0628161
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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.

1 Maximum amount (see instructions)	1	
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2013 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12 ▶	13	

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.) (See instructions.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

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

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2014	17	575
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B—Assets Placed in Service During 2014 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property		177	7	HY	200 DB	25
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System

20a Class life						
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	600
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

STATEMENT OF DEPRECIATION FOR: SCHEDULE: Z-1
ATTACH TO: 54-0628161 BATTLEFIELD PARK SWIM & RACQUET CLU

Description of Property	Date Acquired	Cost or other Basis	Sec 179	Bonus Deprec	Basis	Accum Deprec	Method Used	Life or Rate	Deprec for 2014	ADS Deprec for 2014	Next Year's Deprec
BATH HOUSE	12/01/58	17845			17845	17845	SL	20.0			
PICNIC AREA	06/01/66	1227			1227		LAND				
SWIMMING POOL	07/15/69	52005			52005	52005	SL	25.0			
SWIMMING POOL AREA	05/31/76	9846			9846	9846	SL	18.0			
PICNIC PAVILLION	07/11/78	29084			29084	29084	SL	20.0			
STORAGE BUILDING A	04/01/82	2266			2266	2266	SL	20.0			
SNACK BAR ADULT RO	04/01/82	62100			62100	62100	SL	15.0			
CHAIRS AND TABLES	06/15/82	2048			2048	2048	SL	7.0			
BIKE RACK	08/16/82	270			270	270	SL	5.0			
ADULT POOL PAVILLI	12/23/82	8213			8213	8213	SL	7.0			
ADULT ROOM FURNITU	02/09/83	1157			1157	1157	SL	5.0			
2 BATH HOUSE AND S	04/12/84	26901			26901		SL	20.0			
STOVE AND MICROWAV	05/25/84	1195			1195	1195	SL	11.0			
TELESCOPE FURNITUR	02/22/85	4636			4636	4636	SL	5.0			
WATER COOLER	07/16/86	448			448	448	SL	3.0			
POOL IMPROVEMENT	01/01/88	200609			200609	200609	SL	20.0			
CEP POOL IMPROVEME	12/01/88	25762			25762	25762	SL	20.0			
TABLES	12/01/88	991			991	991	SL	5.0			
POOL LANE LINES	06/12/90	1909			1909	1909	MACRS	5.0			
LANE LINES	04/11/91	405			405	402	MACRS	5.0			
STARTING BLOCKS	04/11/91	529			529	529	SL	5.0			
DRIVEWAY PAVING	05/06/91	2756			2756	2756	MACRS	10.0			
TILE WORK	05/17/91	4575			4575	4575	MACRS	20.0			
LIGHTS	05/24/91	4579			4579	4579	SL	10.0			
CARPET	06/21/91	594			594	594	SL	10.0			
EXHAUST FANS	07/01/91	1035			1035	1035	SL	10.0			
150 CHAIRS	07/04/91	870			870	870	SL	5.0			
STARTING BLOCKS	05/18/92	3320			3320	3320	SL	5.0			
ICE MACHINE	05/21/92	1800			1800	1800	SL	5.0			
PH CONTROLLER	07/16/92	1207			1207	1207	MACRS	7.0			
PH CONTROLLER	07/16/92	1207			1207	1207	MACRS	7.0			
CHLORINE CONTROLLE	07/16/92	1283			1283	1283	MACRS	7.0			
CHLORINE CONTROLLE	07/16/92	1283			1283	1283	MACRS	7.0			
FEED UNIT	07/16/92	413			413	413	MACRS	7.0			
FEED UNIT	07/16/92	413			413	413	MACRS	7.0			
CHLORINE PUMP SMAL	07/16/92	254			254	254	MACRS	7.0			
CHLORINE PUMP LARG	07/16/92	449			449	449	MACRS	7.0			
SECURITY SYSTEM	10/17/92	1762			1762	1762	SL	5.0			
54 CHAIRS	07/01/93	1926			1926	1926	SL	5.0			
DIVING BOARD	05/12/94	1035			1035	1035	MACRS	7.0			
METAL FRAME DOOR	06/09/94	441			441	441	SL	7.0			
ROOF PUMP SHED	06/09/94	800			800	800	SL	15.0			
25 CHAIRS	05/05/95	1409			1409	1409	SL	5.0			
60 STRAP CHAIRS	05/05/95	877			877	877	SL	5.0			
MESH TENNIS WINDSC	07/11/95	948			948	948	SL	5.0			
POOL IMPROVEMENTS	11/01/95	26000			26000	26000	SL	15.0			
AWNINGS	06/19/96	2423			2423	2423	MACRS	15.0			
NON SLIP CARPET BA	08/12/96	1562			1562	1562	SL	5.0			
CARPET ADULT ROOM	08/12/96	1437			1437	1437	MACRS	5.0			
SOFA LOVE SEAT	03/19/97	593			593	593	MACRS	7.0			
SIDEWALK	05/28/97	1300			1300	1300	MACRS	10.0			
COUNTERS	06/01/97	1075			1075	1075	MACRS	7.0			
NEW ROOF	05/26/98	14337			14337	13913	MACRS	15.0			
RETILE WOMENS BATH	05/17/99	4535			4535	4267	MACRS	15.0			

STATEMENT OF DEPRECIATION FOR: SCHEDULE: Z-1
ATTACH TO: 54-0628161 BATTLEFIELD PARK SWIM & RACQUET CLU

Description of Property	Date Acquired	Cost or other Basis	Sec 179	Bonus Deprec	Basis	Accum Deprec	Method Used	Life or Rate	Deprec for 2014	ADS Deprec for 2014	Next Year's Deprec
WOMENS BATH FIXTUR	06/14/99	1293			1293	1216	MACRS	15.0			
POOL FURNITURE	07/15/99	1668			1668	1668	MACRS	7.0			
NEW BRIDGE	08/06/99	12000			12000	12000	MACRS	10.0			
ELECTRICAL UPGRADE	06/16/00	10849			10849	10529	MACRS	15.0	320	320	
POOL FURNITURE	06/16/00	910			910	910	MACRS	7.0			
RESURFACE TENNIS C	07/11/00	47000			47000	47000	MACRS	10.0			
NEW PUMP	08/10/01	3328			3328	3328	MACRS	7.0			
FREEZER SNACKBAR	07/19/02	489		147	342	489	MACRS	7.0			
WINDOW UNIT EXHAUS	08/13/02	882		265	617	882	MACRS	7.0			
FREEZER SNACK BAR	06/12/03	470			470	470	MACRS	7.0			
POOL FURNITURE	07/20/03	402			402	402	MACRS	7.0			
POOL FURNITURE	05/29/04	946			946	946	MACRS	7.0			
CHAIR	06/14/04	235			235	235	MACRS	7.0			
POOL FURNITURE	07/09/04	356			356	356	MACRS	7.0			
PUMP	09/10/04	1764			1764	1764	MACRS	7.0			
POOL FURNITURE	03/11/05	2470			2470	2470	MACRS	7.0			
TABLES AND CHAIRS	05/31/08	794			794	688	MACRS	7.0	35	35	35
FRYER	05/31/08	648			648	561	MACRS	7.0	29	29	29
DIVING BOARD	12/30/10	2144			2144	1474	MACRS	7.0	191	191	191
POOL FURNITURE	06/01/15	177			177		MACRS	7.0	25	25	43
TOTALS :		626769		412	626357	596509			600	600	298
LAND :		1227			1227						
TOTALS - LAND :		625542		412	625130	596509			600	600	298

QNA

STATEMENT OF STATE DEPRECIATION FOR:
 BATTLEFIELD PARK SWIM & RACQUET CLU 54-0628161 SCHEDULE: Z-1

TO BE USED ONLY IF STATE DOES NOT ALLOW SPECIAL DEPRECIATION

Description of Property	Date Acquired	Cost or other Basis	Sec 179	Bonus Deprec	Basis	Accum Deprec	Method Used	Life or Rate	Deprec for 2014	ADS Deprec for 2014	Next Year's Deprec
BATH HOUSE	12/01/58	17845			17845	17845	SL	20.0			
PICNIC AREA	06/01/66	1227			1227		LAND				
SWIMMING POOL	07/15/69	52005			52005	52005	SL	25.0			
SWIMMING POOL AREA	05/31/76	9846			9846	9846	SL	18.0			
PICNIC PAVILLION	07/11/78	29084			29084	29084	SL	20.0			
STORAGE BUILDING ADD	04/01/82	2266			2266	2266	SL	20.0			
SNACK BAR ADULT ROOM	04/01/82	62100			62100	62100	SL	15.0			
CHAIRS AND TABLES	06/15/82	2048			2048	2048	SL	7.0			
BIKE RACK	08/16/82	270			270	270	SL	5.0			
ADULT POOL PAVILLION	12/23/82	8213			8213	8213	SL	7.0			
ADULT ROOM FURNITURE	02/09/83	1157			1157	1157	SL	5.0			
2 BATH HOUSE AND STO	04/12/84	26901			26901		SL	20.0			
STOVE AND MICROWAVE	05/25/84	1195			1195	1195	SL	11.0			
TELESCOPE FURNITURE	02/22/85	4636			4636	4636	SL	5.0			
WATER COOLER	07/16/86	448			448	448	SL	3.0			
POOL IMPROVEMENT	01/01/88	200609			200609	200609	SL	20.0			
CEP POOL IMPROVEMENT	12/01/88	25762			25762	25762	SL	20.0			
TABLES	12/01/88	991			991	991	SL	5.0			
POOL LANE LINES	06/12/90	1909			1909	1909	MACRS	5.0			
LANE LINES	04/11/91	405			405	402	MACRS	5.0			
STARTING BLOCKS	04/11/91	529			529	529	SL	5.0			
DRIVEWAY PAVING	05/06/91	2756			2756	2756	MACRS	10.0			
TILE WORK	05/17/91	4575			4575	4575	MACRS	20.0			
LIGHTS	05/24/91	4579			4579	4579	SL	10.0			
CARPET	06/21/91	594			594	594	SL	10.0			
EXHAUST FANS	07/01/91	1035			1035	1035	SL	10.0			
150 CHAIRS	07/04/91	870			870	870	SL	5.0			
STARTING BLOCKS	05/18/92	3320			3320	3320	SL	5.0			
ICE MACHINE	05/21/92	1800			1800	1800	SL	5.0			
PH CONTROLLER	07/16/92	1207			1207	1207	MACRS	7.0			
PH CONTROLLER	07/16/92	1207			1207	1207	MACRS	7.0			
CHLORINE CONTROLLER	07/16/92	1283			1283	1283	MACRS	7.0			
CHLORINE CONTROLLER	07/16/92	1283			1283	1283	MACRS	7.0			
FEED UNIT	07/16/92	413			413	413	MACRS	7.0			
FEED UNIT	07/16/92	413			413	413	MACRS	7.0			
CHLORINE PUMP SMALL	07/16/92	254			254	254	MACRS	7.0			
CHLORINE PUMP LARGE	07/16/92	449			449	449	MACRS	7.0			
SECURITY SYSTEM	10/17/92	1762			1762	1762	SL	5.0			
54 CHAIRS	07/01/93	1926			1926	1926	SL	5.0			
DIVING BOARD	05/12/94	1035			1035	1035	MACRS	7.0			
METAL FRAME DOOR	06/09/94	441			441	441	SL	7.0			
ROOF PUMP SHED	06/09/94	800			800	800	SL	15.0			
25 CHAIRS	05/05/95	1409			1409	1409	SL	5.0			
60 STRAP CHAIRS	05/05/95	877			877	877	SL	5.0			
MESH TENNIS WINDSCRE	07/11/95	948			948	948	SL	5.0			
POOL IMPROVEMENTS	11/01/95	26000			26000	26000	SL	15.0			
AWNINGS	06/19/96	2423			2423	2423	MACRS	15.0			
NON SLIP CARPET BATH	08/12/96	1562			1562	1562	SL	5.0			
CARPET ADULT ROOM	08/12/96	1437			1437	1437	MACRS	5.0			
SOFA LOVE SEAT	03/19/97	593			593	593	MACRS	7.0			
SIDEWALK	05/28/97	1300			1300	1300	MACRS	10.0			
COUNTERS	06/01/97	1075			1075	1075	MACRS	7.0			
NEW ROOF	05/26/98	14337			14337	13913	MACRS	15.0			
RETILE WOMENS BATHRO	05/17/99	4535			4535	4267	MACRS	15.0			

