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Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047
2008
Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 10-01-2008 and ending 09-30-2009

- B** Check if applicable:
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

C Name of organization: Chantilly Inc
 Doing Business As:
 Number and street (or P O box if mail is not delivered to street address) Room/suite: 14901 Braddock Road
 City or town, state or country, and ZIP + 4: Centreville, VA 20120

D Employer identification number: 54-0674309
E Telephone number: (703) 631-9560
G Gross receipts \$ 4,499,140

F Name and address of Principal Officer:
 MICHAEL HUDENBURG
 14901 Braddock Road
 Centreville, VA 20120

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 (If "No," attach a list See instructions)
H(c) Group Exemption Number ▶

I Tax-exempt status 501(c) (7) (Insert no) 4947(a)(1) or 527

J Web site: ▶ www.cngcc.org

K Type of organization Corporation trust association other ▶

L Year of Formation 1959 | **M** State of legal domicile VA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities CHANTILLY, INC PROVIDES RECREATIONAL AND SOCIAL FACILITIES FOR ITS MEMBERS		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	9
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	9
	5 Total number of employees (Part V, line 2a)	5	197
	6 Total number of volunteers (estimate if necessary)	6	9
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	115,862
b Net unrelated business taxable income from Form 990-T, line 34	7b	2,807	
Revenue	8 Contributions and grants (Part VIII, line 1h)	8	0
	9 Program service revenue (Part VIII, line 2g)	3,076,773	2,936,530
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	9,559	2,962
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	907,443	1,261,678
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,993,775	4,201,170
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	13
14 Benefits paid to or for members (Part IX, column (A), line 4)		14	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		2,128,745	2,159,607
16a Professional fundraising fees (Part IX, column (A), line 11e)		16a	0
b (Total fundraising expenses, Part IX, column (D), line 25 ⁰)			
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)		2,596,536	2,438,686
18 Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))		4,725,281	4,598,293
19 Revenue less expenses Subtract line 18 from line 12	-731,506	-397,123	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	20	5,878,511
	21 Total liabilities (Part X, line 26)	5,070,274	5,132,461
	22 Net assets or fund balances Subtract line 21 from line 20	808,237	443,983

Part II Signature Block

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

Signature of officer: ***** Date: 2010-08-05
 MICHAEL HUDENBURG PRESIDENT
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed
 Firm's name (or yours if self-employed), address, and ZIP + 4: RSM McGladrey Inc, 7200 Glen Forest Dr Ste 200, Richmond, VA 23226
 Preparer's PTIN (See Gen Inst): _____ EIN: _____ Phone no: (804) 282-2121

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

Part III Statement of Program Service Accomplishments (See the instructions.)

1 Briefly describe the organization's mission
CHANTILLY, INC OWNS AND OPERATES A 18-HOLE GOLF COURSE, TENNIS COURTS, A SWIMMING POOL AND A CLUBHOUSE FACILITY FOR ITS 409 MEMBERS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting or make significant changes in how it conducts any program services? Yes No
If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ including grants of \$) (Revenue \$)
THE CLUB PROVIDES RECREATIONAL AND SOCIAL FACILITIES FOR IT'S 409 MEMBERS, INCLUDING AN 18-HOLE GOLF COURSE, TENNIS COURTS, A SWIMMING POOL AND CLUBHOUSE FACILITIES








4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ *Must equal Part IX, Line 25, column (B).*

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		No
2	Is the organization required to complete Schedule B, Schedule of Contributors?		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> 		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> 		No
10	Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 		No
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i> 	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> 	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a	Did the organization maintain an office, employees, or agents outside of the U S ?		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? <i>If "Yes," complete Schedule F, Part I</i>		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i> 	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		No

Part IV Checklist of Required Schedules *(Continued)*

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	28b	No
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	No
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35	No
36 501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	
37 Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	No

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable		
	1a 9		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return		
	2a 197		
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		No
b	If "Yes," enter the name of the foreign country _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction</i> ?		
6a	Did the organization solicit any contributions that were not tax deductible?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<i>Organizations that may receive deductible contributions under section 170(c).</i>		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</i>		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	<i>Section 501(c)(7) organizations.</i> Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12	158,310	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	141,681	
11	<i>Section 501(c)(12) organizations.</i> Enter		
a	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
11a			
11b			
12a	<i>Section 4947(a)(1) non-exempt charitable trusts.</i> Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
12b			

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		Yes	No
1a	Enter the number of voting members of the governing body		9
1b	Enter the number of voting members that are independent		9
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?		No
6	Does the organization have members or stockholders?	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	Yes	
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	the governing body?	Yes	
8b	each committee with authority to act on behalf of the governing body?	Yes	
9a	Does the organization have local chapters, branches, or affiliates?		No
9b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13		No
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
13	Does the organization have a written whistleblower policy?		No
14	Does the organization have a written document retention and destruction policy?		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		
15a	The organization's CEO, Executive Director, or top management official?		No
15b	Other officers or key employees of the organization? Describe the process in Schedule O		No
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed <u>VA</u>
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> own website <input checked="" type="checkbox"/> another's website <input checked="" type="checkbox"/> upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization S MULLINS 14901 BRADDOCK ROAD CENTREVILLE, VA 20120 (703) 631-9560

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

* List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

* List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

* List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

* List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ANDY HEYE , CHAIRMAN	1 00	X						0	0	
MIKE HUDENBURG , PRESIDENT	1 00	X						0	0	
RICH BUCKNER , TREASURER	1 00	X						0	0	
ROY PINGITORE , SECRETARY	1 00	X						0	0	
JACK MARRIOTT , DIRECTOR	1 00	X						0	0	
NEAL ATKISSON , DIRECTOR	1 00	X						0	0	
PAUL ROBERTS , DIRECTOR	1 00	X						0	0	
FRANK GRACE , DIRECTOR	1 00	X						0	0	
MARK MACKMIN , DIRECTOR	1 00	X						0	0	
FARZIN MOBASSER , GENERAL MANAGER	40 00			X				154,394	0	
SHERRIE MULLINS , CONTROLLER	40 00			X				53,491	0	
RICHARD KENT , GOLF COURSE SUPERINTENDE	40 00				X			104,072	0	

Part VII Continued

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
1b Total							311,957	0	0	

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization **2**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
NV Pools Inc 14000 Thunderbolt Pl Ste E Chantilly, VA 20151	maintenance service/supplies	120,237

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization **1**

Part VIII Statement of Revenue

			(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . . 1a _____						
	b	Membership dues 1b _____						
	c	Fundraising events 1c _____						
	d	Related organizations . . . 1d _____						
	e	Government grants (contributions) 1e _____						
	f	All other contributions, gifts, grants, and similar amounts not included above 1f _____						
	g	Noncash contributions included in lines 1a-1f \$ _____ 1f						
	h	Total (Add lines 1a-1f) 1f _____						
Program Service Revenue	2a	MEMBERSHIP DUES Business Code 713,910	2,028,372	2,028,372				
	b	GOLF CART RENTALS/fees Business Code 713,910	430,141	385,047	45,094			
	c	PROSHOP INCOME Business Code 713,910	254,100	244,160	9,940			
	d	GOLF INCOME Business Code 713,910	158,626	138,223	20,403			
	e	SWIMMING AND TENNIS Business Code 713,910	65,291	61,061	4,230			
	f	All other program service revenue						
	g	Total. Add lines 2a-2f 1f \$ 2,936,530						
	Other Revenue	3	Investment income (including dividends, interest other similar amounts) 1f	4,986		4,986		
4		Income from investment of tax-exempt bond proceeds 1f						
5		Royalties 1f						
6a		(i) Real						
		b	(ii) Personal					
			Gross Rents					6,000
			Less rental expenses					3,488
Rental income or (loss)			2,512					
d		Net rental income or (loss) 1f	2,512		2,512			
7a		(i) Securities						
		b	(ii) Other					
			Gross amount from sales of assets other than inventory					
	Less cost or other basis and sales expenses		2,024					
Gain or (loss)	-2,024							
d	Net gain or (loss) 1f	-2,024		-2,024				
8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000 a							
	b	Less direct expenses . . . b _____						
		Net income or (loss) from fundraising events . . . 1f						
9a	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000 a							
	b	Less direct expenses . . . b _____						
		Net income or (loss) from gaming activities . . . 1f						
10a	Gross sales of inventory, less returns and allowances . . . a 600,028							
	b	Less cost of goods sold . . . b 292,458						
		Net income or (loss) from sales of inventory . . . 1f 307,570						
11a	Miscellaneous Revenue		Business Code					
	FIRE RECOVERY		713,910	751,543	751,543			
	INITIATION FEES		713,910	146,800	146,800			
	OTHER INCOME		713,910	41,743	41,743			
	All other revenue _____			11,510	11,510			
e	Total. Add lines 11a-11d 1f \$ 951,596							
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e 1f		4,201,170	4,087,332	115,862	-2,024		

Part IX Statement of Functional Expenses

**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	311,957			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,431,758			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	20,982			
9	Other employee benefits	257,022			
10	Payroll taxes	137,888			
11	Fees for services (non-employees)				
a	Management				
b	Legal	6,902			
c	Accounting	35,936			
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	10,203			
13	Office expenses	117,289			
14	Information technology	17,838			
15	Royalties				
16	Occupancy	266,440			
17	Travel				
18	Payments of travel or entertainment expenses for any Federal, state or local public officials				
19	Conferences, conventions and meetings				
20	Interest	264,947			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	600,185			
23	Insurance	86,056			
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	GOLF COURSE MAINTENANCE	385,539			
b	PROSHOP COST OF SALES	248,074			
c	POOL OPERATIONS	161,827			
d	GOLF OPERATIONS	116,578			
e	FOOD AND BEVERAGE EXP	52,339			
f	All other expenses	68,533			
25	Total functional expenses. Add lines 1 through 24f	4,598,293			
26	Joint Costs. Check <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	512,378	1	298,354
	2 Savings and temporary cash investments	375,224	2	297,790
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	436,371	4	474,520
	5 Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i>		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	208,702	8	128,663
	9 Prepaid expenses and deferred charges	6,227	9	40,267
	10a Land, buildings, and equipment cost basis			
		10a 10,862,528		
	b Less accumulated depreciation <i>Complete Part VI of Schedule D</i>			
		10b 6,525,678	4,339,609	10c 4,336,850
	11 Investments—publicly traded securities		11	
	12 Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>		12	
	13 Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i>		13	
14 Intangible assets		14		
15 Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i>		15		
16 Total assets. Add lines 1 through 15 (must equal line 34)	5,878,511	16	5,576,444	
Liabilities	17 Accounts payable and accrued expenses	428,100	17	366,031
	18 Grants payable		18	
	19 Deferred revenue	29,374	19	75,746
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability <i>Complete Part IV of Schedule D</i>		21	
	22 Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i>		22	
	23 Secured mortgages and notes payable to unrelated third parties	4,400,000	23	4,400,000
	24 Unsecured notes and loans payable		24	
	25 Other liabilities <i>Complete Part X of Schedule D</i>	212,800	25	290,684
	26 Total liabilities. Add lines 17 through 25	5,070,274	26	5,132,461
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	808,237	27	443,983
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	808,237	33	443,983	
34 Total liabilities and net assets/fund balances	5,878,511	34	5,576,444	

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> cash <input checked="" type="checkbox"/> accrual <input type="checkbox"/> other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
2b	Were the organization's financial statements audited by an independent accountant?	Yes	
2c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	If "Yes," did the organization undergo the required audit or audits?		

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2008

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Name of the organization

Chantilly Inc

Employer identification number

54-0674309

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate contributions, aggregate grants, aggregate value, and questions about donor advisement.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 3 columns: Line number, Description, and Held at the End of the Year. Rows include purpose of easements, number of easements, acreage, and monitoring details.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 3 columns: Line number, Description, and Amount. Rows include questions about reporting art and historical treasures.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a Public exhibition, b Scholarly research, c Preservation for future generations, d Loan or exchange programs, e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Trust, Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain why in Part XIV and complete the following table

Table with 2 columns: Description (1c-1f) and Amount

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

Table with 6 columns: (a) Current Year, (b) Prior Year, (c) Two Years Back, (d) Three Years Back, (e) Four Years Back. Rows 1a-1g.

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment, b Permanent endowment, c Term endowment

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

Table with 3 columns: Description (3a(i), 3a(ii), 3b), Yes, No

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Table with 5 columns: Description of investment, (a) Cost or other basis (Investment), (b) Cost or other basis (other), (c) Depreciation, (d) Book value. Rows 1a-1e and Total.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	4,201,170
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,598,293
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-397,123
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	32,869
9	Total adjustments (net) Add lines 4 - 8	9	32,869
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-364,254

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	4,499,140
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	295,946
e	Add lines 2a through 2d	2e	295,946
3	Subtract line 2e from line 1	3	4,203,194
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	-2,024
c	Add lines 4a and 4b	4c	-2,024
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	4,201,170

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	4,896,263
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	297,970
e	Add lines 2a through 2d	2e	297,970
3	Subtract line 2e from line 1	3	4,598,293
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	4,598,293

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
Part XI, Line 8 - Other Adjustments		AUDIT ADJUSTMENT 32869
Part XII, Line 2d - Other Adjustments		COST OF GOODS SOLD INCLUDED IN EXPENSES ON FINANCIAL STATEMENTS 292458 RENTAL HOUSE EXPENSES INCLUDED IN EXPENSES ON FINANCIAL STATEMENTS 3488
Part XII, Line 4b - Other Adjustments		Loss on sale of asset included in expenses on financial statements -2024
Part XIII, Line 2d - Other Adjustments		COST OF GOODS SOLD INCLUDED IN EXPENSES ON FINANCIAL STATEMENTS 292458 RENTAL HOUSE EXPENSES INCLUDED IN EXPENSES ON FINANCIAL STATEMENTS 3488 Loss on sale of asset included in expenses on financial statements 2024
		Part X Text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 In December 2008, the FASB provided for a deferral of the effective date of FIN 48 for certain nonpublic enterprises to annual financial statements for fiscal years beginning after December 15, 2008 The Club has elected this deferral and accordingly will be required to adopt FIN 48 in its 2010 annual financial statements Prior to adoption of FIN 48, the Club will continue to evaluate its uncertain tax positions and related income tax contingencies under existing guidance for liabilities and contingencies, which requires the Club to accrue for losses it believes are probable and can be reasonably estimated Management is currently assessing the impact of FIN 48 on its financial position and results of operations and does not expect the adoption of FIN 48 to have a material effect on its financial statements

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2008

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

Department of the Treasury
Internal Revenue Service

Name of the organization
Chantilly Inc

Employer identification number
54-0674309

Part I Questions Regarding Compensation

	Yes	No
1a		
1b		
2		
3		
4a		No
4b		No
4c		No
5a		
5b		
6a		
6b		
7		
8		

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items

<input type="checkbox"/> First class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)

b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a

a Receive a severance payment or change of control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.

5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

b Any related organization?

If "Yes," to line 5a or 5b, describe in Part III

6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

a The organization?

b Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

7 For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
FARZIN MOBASSER	(i)	154,394					154,394	
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE O
(Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization
Chantilly Inc

Employer identification number

54-0674309

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		<p>Classes of Members Class A - Class A members possess the privilege of full use of all the facilities of the Club Week Day - Week day members possess the privilege of full use of all the facilities of the Club on week days only No weekend or holiday play is allowed For purposes of the rules, a Weekday member's privileges are equivalent to a Class A member, with the exception of weekend and holiday play Class C - Class C members possess the privilege of full use of all the facilities of the Club, except its golfing facilities Junior Executive - Junior executives, members under the age of 30, possess the privilege of full use of the facilities For purposes of the rules a Junior executives privileges are equivalent to Class A family member Clubhouse - Clubhouse members possess the privilege of full use of the clubhouse facilities Golfing, swimming, and tennis are not permitted under this class of membership Corporate - Corporate membership provides the first corporate member and up to three other corporate members, the privileges of full use of all the facilities of the Club identical with Class "A" members with one exception For purposes of establishing a tee time on weekends or holidays, only one (1) tee time will be granted for the Corporate membership Effective September 1990, Corporate membership is limited to ten (10) separate entities Types of Membership - Family - Family memberships are required of Class A and Class C members who are married or heads of households Family memberships consist of the member, the spouse of the member and any unmarried person under 21 years of age or any full time student age 25 or younger who is related to or under the guardianship of the member and whose principal place of residence is the same as the member Such unmarried persons who meet the above and are listed on the Application for Membership are herein referred to as "dependents" Spouses are not required to reside in the same residence as the member In general, spouses and dependents enjoy the same rights and privileges as the Member except as otherwise controlled and limited by these rules A written request by a single (unmarried or divorced) member may be presented to the Board of Directors for the purpose of recognizing an Approved Guest To be considered for approval, the guest must be of the opposite sex and domiciled with the requesting member Only one guest per member, per year may be requested The Board of Directors shall review and approve applications on a case by case basis The guest will be allowed to use the Club facilities to the extent of the member's classification without being assessed fees normally associated with such privileges, except that the approved guest will be allowed to play golf without payment of greens fees only if playing with their designating member At all other times, the approved guest must pay standard guest greens fees The designating member will be responsible for all fees incurred by the approved guest The approved guest can play in tournaments, which allow guests The approved guest's dependents will not qualify as the designating members dependents The designating member will be assessed dues at the normal rate Any "grandfathered" single rate status will be eliminated immediately upon approval of a request under this policy Single - Single memberships are provided for unmarried persons and for married persons who do not reside in a common domicile or maintain a common residence with the spouse (This class of membership is no longer available to new applicants) Special Senior - Any member upon reaching the 65th birthday may, upon written application, be granted such membership if age and years as a member of Chantilly total 90 Monthly dues will be reduced to 75 percent of the monthly rate in effect for their particular class of membership at the time each monthly payment is due This type of membership is available only to active resident members Special Dependent - A dependent living under the same roof as a Class A or Class C family member and who has reached the age of 18 and not more than 25, may upon written application be accepted for membership with all the privileges of the parent member The dues and other fees for such membership are noted in the attached "Schedule of Charges" The parent member will be held responsible for any obligations incurred by the dependent under this type of membership Upon reaching age 25, member must convert to Junior executive membership, or terminate Survivor - Following the death of a member, the surviving spouse may, within sixty days of the death of the member, choose one of the following options (1) become a Class A or Class C member and pay full dues or (2) continue with spouse privileges and pay one-third of the then current dues for whichever class the survivor selected (Class A or C) with no monthly food minimum Survivor membership terminates upon remarriage Non-Resident - Members changing their principal place of residence to a point outside a 100 mile radius of the Club may apply in writing to the Board of Directors for Non-Resident status, reduced dues and the suspension of any minimum charges A Non-Resident member is one who spends no more than thirty (30) days in one calendar year within a 100-mile radius of the Club Non-Residents may use the golf facilities six times on one specific month and thereafter once per month at no charge The non-resident may use the golf facilities at other times with the payment of the then current guest green fees</p>

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		<p>Board of Directors The control and management of the Corporation shall be entrusted to a Board of Directors consisting of nine (9) members One of those members serves as Chairman (see Section 2(B) of this Article) The qualifications for Directors, each of whom shall serve without remuneration, shall be as prescribed in the Articles of Incorporation No officer (except for the Chairman of the Board, the President, the Secretary and the Treasurer), appointees (except those appointed by the Board) or employee of the Corporation shall be a Director Powers and Duties of the Board The Board of Directors shall manage the business, property and affairs of the Corporation Subject to any statutory or Articles of Incorporation requirement for stockholder action, the Board of Directors shall exercise all such powers and do all such lawful acts and things necessary or convenient to effect any or all of the purposes for which the Corporation was organized and protect the financial and other interest of the general ownership This management shall include, without in any way being limited to the establishment of operating and membership rules as described in Article VII, the review with the right of approval or disapproval of all appointments by the President or the Executive Vice President and Vice Presidents or Chairmen in lieu thereof if necessary, the review with right of approval or disapproval of all plans, programs and budgets submitted by the President, the review with the right of approval or disapproval of all applications involving the purchase, assignment, or transfer of stock in Chantilly, Inc (except as otherwise provided herein) and applications for membership in the Club or actions changing or altering the status thereof, and the right to terminate without notice and in its sole discretion any appointment of any officer of Chantilly, Inc , or of any other appointment or employment of any person or persons of the Corporation The Board of Directors, through its Chairman, may appoint from the active membership of the Club provided they are stockholders of Chantilly, Inc , to serve at the pleasure of the Board, such committees or study groups as the Board shall deem necessary, except as may be otherwise provided herein in Article III, Section 4 Such committees report to the Board through their Chairmen The position of Club Manager, Golf Professional, Tennis Professional, Course Superintendent, and Swimming Pool Manager of the Corporation shall be filled or vacated only by resolution of the Board although operational supervision of such offices rests with the President Unless approved by the Board of Directors, persons occupying these or other positions for remuneration (employees) may not, at the same time, possess membership in the Chantilly National Golf & Country Club</p>

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7b		SEE EXPLANATIONS TO THE PRECEEDING QUESTIONS

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		THE RETURN REVIMED BY THE CONTROLLER OF THE CLUB AND A MEMBER OF THE BOARD BEFORE IT'S FILING

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		UPON REQUEST

Additional Data

Software ID:
Software Version:
EIN: 54-0674309
Name: Chantilly Inc

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
a MEMBERSHIP DUES	713,910	2,028,372	2,028,372		
b GOLF CART RENTALS/fees	713,910	430,141	385,047	45,094	
c PROSHOP INCOME	713,910	254,100	244,160	9,940	
d GOLF INCOME	713,910	158,626	138,223	20,403	
e SWIMMING AND TENNIS	713,910	65,291	61,061	4,230	