

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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)

OMB No 1545-0047

Open to Public Department of the Treasury > The organization may have to use a copy of this return to satisfy state reporting requirements Inspection For the 2009 calendar year, or tax year beginning 2009, and ending 20 09 Employer identification number C Name of organization Linderhof Country Please B Check if applicable :0347153 Doing Business As ☐ Address change label or print or Number and street (or P O box if mail is not delivered to street address) Telephone number Room/suite Name change type See Initial return Specific state or country, and ZIP + 4 ☐ Terminated nstruc Glen, 03838 tions G Gross receipts \$ Amended return F Name and address of principal officer. Application pending 1 No H(a) Is this a group return for affiliates? Yes H(b) Are all affiliates included? Yes No N/A Tax-exempt status 4947(a)(1) or **527** F→501(c) () (insert no) If "No." attach a list (see instructions) Website: ▷ H(c) Group exemption number ▷ Form of organization Corporation Trust Association Other L Year of formation M State of legal domicile Summary Briefly describe the organization's mission or most significant activities private golf course Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a), 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of employees (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 0 7a 0 7a Total gross unrelated business revenue from Part VIII, column (C), line 12. b Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year Contributions and grants (Part VIII, line 1h) . Program service revenue (Rart VIII, line 2g)
Investment income (Rart VIII, column (A), lines 3, 4, and 7d)
Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)
Total evenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)
Grants and similar amounts paid (Part IX, column (A), lines 1–3) 79258 72 954 989 763 11 2427 181010 Benefits paid to or for members (Part IX, column (A), line 4) Salaties, other compensation, employee benefits (Part IX, column (A), lines 5-10) 29 158 32 898 16a Professional fundraising fees (Part IX, column (A), line 11e) "如何" £ ... **b** Total fundraising expenses (Part IX, column (D), line 25) ▷ 314 33 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 65124 94 282 66 212 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 13,272 568 Beginning of Current Year End of Year Assets (Balance 20 Total assets (Part X, line 16) Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of penury, 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 Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature Here Type or print name and title Check if Preparer's Preparer's identifying number selfsignature (see instructions) employed > _ Paid Preparer's Firm's name (or yours Use Only if self-employed), address, and ZIP + 4



Phone no ▷ (

 ດ້າດ	(2009)

4e	Total program service expenses ▷ // ○ 2//
4d	Other program services. (Describe in Schedule O.) (Expenses \$ 35 450
	operation of private golf course
	MARRIE AF Drivate CALL CALLER
4c	(Code:) (Expenses \$ 18601 including grants of \$) (Revenue \$ 16.439)
	operation of private golf course
4b	(Code.) (Expenses \$ 29 2 9 1 including grants of \$) (Revenue \$ -0 -)
۰.	
	Operation of priest gore curity
	Operation of private gulf curise
4a	(Code:) (Expenses \$ 77019 including grants of \$) (Revenue \$ 16873)
	Section 501(c)(3) and 501(c)(4) organizations and section 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.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	services?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these new services on Schedule O.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	operation of private guit course
1	Briefly describe the organization's mission:
	Statement of Program Service Accomplishments

Pai	rt 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)? If "Yes," complete Schedule A	1_		V
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		レ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		V
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		V
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? If "Yes," complete Schedule C, Part III	5	N/	A
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		V
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		V
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		<u></u>
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? If "Yes," complete Schedule D, Part IV	9		V
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	N	A
0	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI			
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
0	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48° If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	. 4.2	Ž
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		~
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? If "Yes," complete Schedule F, Part II	15		_
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? If "Yes," complete Schedule F, Part III	16		_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		✓ —/
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<u> </u>

اغدا	Checklist of Required Schedules (Continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 19 if "Yes," complete Schedule I, Parts I and II.	21		~
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		V
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		V
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		/
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .	24b		<u></u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		~
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
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? If "Yes," complete Schedule L, Part I	25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		V
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? If "Yes," complete Schedule L, Part II .	26		V
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		~
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		V
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		~
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		-
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		~
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		/
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.	36		V
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		V
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	38		
	· · · · · · · · · · · · · · · · · · ·			

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	U.S. Information Returns. Enter -0- if not applicable	7.8		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	$\overline{\mathcal{N}}$	A
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax ,			
b	Statements, filed for the calendar year ending with or within the year covered by this return 2a 6 6 16 16 16 16 16 16 16 16 16 16 16 16	2b	ン	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		~
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	N	$A_{}$
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)?	4a		V
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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		-
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5</u> b		1
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c	N/	4
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		V
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	N/	4
7	Organizations that may receive deductible contributions under section 170(c).			
а	and the second s	7-		
h	and services provided to the payor?	7a 7b	h(/	4
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		70/	['-
	required to file Form 8282?	7c	Z. 32". Z.	V
	If "Yes," indicate the number of Forms 8282 filed during the year			
	benefit contract?	7e	_	1
Ţ	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 7g		- L
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	19		<u> </u>
	required?	7h		-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		2000	
a	Did the organization make any taxable distributions under section 4966?	9a		-
ь	Did the organization make a distribution to a donor, donor advisor, or related person?.	9b	- 232	1
0	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	透 營		
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	8 3	(in 1/2)	と記述
11	Section 501(c)(12) organizations. Enter	\$ 3.	. ',",3	
a	Gross income from members or shareholders	₹ °	`, .]	لا يار ا ا
	Gross income from other sources (Do not net amounts due or paid to other sources against	124 C 4		
	amounts due or received from them)	5	, , , , , , , , , , , , , , , , , , ,	والمنتا
≱a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b NA	12a	· 👌	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Part VI

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body	1.35		
b	Enter the number of voting members that are independent	h	10 mm	7.0
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2.3		
	any other officer, director, trustee, or key employee?	2		<u> レ</u>
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? .	3		
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		<u></u>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	_5		
6	Does the organization have members or stockholders?	6		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			_
	of the governing body?	7a		
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		, à.,	1. 4
	the year by the following	· 34	3 F	72
а	The governing body?	8a	/	
	Each committee with authority to act on behalf of the governing body?	8b	/	
9	Is there any officer, director, 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	9a		
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte	ernal		
Rev	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			ļ
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	NA	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11		
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990	The Break		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			,
	describe in Schedule O how this is done	12c	N/	<i>P</i>
13	Does the organization have a written whistleblower policy?	13		
14	Does the organization have a written document retention and destruction policy?	14		-
15	Did the process for determining compensation of the following persons include a review and approval by		. 5-	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	<u> </u>	4
b	Other officers or key employees of the organization	15b	N/	<i>H</i>
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		<u></u>	ur̂.≛s
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			ليُـــــا
	with a taxable entity during the year?	16a		
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	, č.	į. Ka	4. 4
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		513	لنحنيز
<u>C</u>	the organization's exempt status with respect to such arrangements?	16b	W/	4
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▷ <u>NH</u>	-	· -	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(or	:)(3)s (only)	
	available for public inspection. Indicate how you make these available. Check all that apply			
4-	Own website Another's website V Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	erest	
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds of	the	
	organization. D Inderhot Country Club PO Box 610 Glen NH 03834 603.343.9	07Y		
	KATAY KARISE 107 Olay Are Waven RI 62885 401:247:	7557	•	

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. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- o List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - o List all of the organization's current key employees. See instructions for definition of "key employee"
- o 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
- e List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- o 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 co	(B)	arry (Junt	311L (C		Jei, U	1160	(D)	(E)	(F)
Name and Title	Average	Positi	ion (c	•	•	that ap	ply)	Reportable	Reportable	Estimated
•	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Jack Jakutis President	0							0	0	0
Frank Greham V. Presidant	/							1	J	
Kothy Rapise Treasurer										
Elaini Zaino Secretary									7	
Tony Antosiewicz duector										
Mary Borin director									1	
Shaun Collins director										
Fria Dussault director										1
Carl Farmen director							-			
Michael Hagginis director										
Corinne goodvin direct										
Don goodwii director										
Den Ratalic director										
Beb Zain director										
		-								<u> </u>
							 			<u> </u>

Pa	t VII Section A. Officers, Directors, Tru	ıstees, Key	/ Emp	loy	ees,	an	d Hig	hes	t Compensate	d Employees (co	ontinued)
	(A)	(B)			((C)			(D)	(E)	(F)
	Name and title	Average	Positi	ion (d	chec	k all	that ap			Reportable	Estimated
		hours per week	or o	ins	Officer	<u>&</u>	em	Former	compensation from	compensation from related	amount of other
			Individual trustee or director	itut	cer	Key employee	hest	mer	the	organizations	compensation from the
			tor	ona		탕	8 6		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
			rust	ź		yee	m pg				and related
			8	Institutional trustee	Ì		Highest compensated employee				organizations
						ļ	图				
					ļ	<u> </u>	<u> </u>				<u> </u>
							}				
		 .	ļ	-			ļ	-			
					-	-					
			 	-	<u> </u>						
-											
			 	一				-			
			†	1							
				1		1					
	4.4.										
										l.	
					ļ						
	• • • • • • • • • • • • • • • • • • • •										
				<u> </u>	L	L					
							:				
		L						<u> </u>			
	Total							<u> </u>	<u> </u>		<u> </u>
2	Total number of individuals (including but in reportable compensation from the organization)	not limited	to the	ose	liste	ed a	above	e) Wh	no received m	ore than \$100,0	100 in
	reportable compensation from the organiza	20011									Yes No
_											Tes No
3	Did the organization list any former office							oye	e, or highest c	compensated	3 ~
	employee on line 1a? If "Yes," complete S										3 -
4	For any individual listed on line 1a, is the										
	the organization and related organizations individual.	greater tha	iii Di:	ט,ט)UU ?	11	res,	COI	прівте Эспеац	ile J for such	4 4
5	Did any person listed on line 1a receive	or accrue	com	Sen	eatio	on i	from	anv		anization for	
•	services rendered to the organization? If "	Yes," comp	olete	Sch	edu	ile J	l for s	uch	person .		5
Sec	ction B. Independent Contractors										
1	Complete this table for your five highest co	ompensate	d ind	epe	nde	nt c	contra	cto	rs that receive	d more than \$1	00,000 of
	compensation from the organization										
	(A)	Janaa.							(B)		(C)
	Name and business add	oress						<u> </u>	Description of s	ervices	Compensation
	N/I*							ļ .			
								ļ			
											·
								 			
	Total number of independent assets: /							<u>. </u>			
_	Total number of independent contractors (in more than \$100,000 in compensation from	ncluding bi	ut not lizatio	. IIM on Þ	iited •	το	ınose	IIST	ea above) who	received	

Par	t VII	Statement of Re	venue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
grants mounts	1a b	Federated campaigns Membership dues	4	139642				
ns, gifts similar a	d e	Fundraising events . Related organizations Government grants (contr	1d					
Contributions, gifts, grants and other similar amounts	f	All other contributions, gifts, gand similar amounts not include Noncash contributions include		Age.				
ပို့ န်	h	Total. Add lines 1a-1f		. ⊳	139642		4217	
<u> </u>				Business Code			100	
Program Service Revenue	2a	Clubhouse		16439				
æ	b	GOLF		16873				
<u> </u>	С	<i>J</i>						
Sen	d							
æ	е							
iĝo.	f	All other program servi	ce revenue .	L				
_ <u>~</u> _	g	Total. Add lines 2a-2f		<u> Þ</u>	33312		37 C 27 L 4	
	3	Investment income (incother similar amounts) Income from investment of		>	399			399
	5	Royalties		nd proceeds > > (II) Personal				
	6a	Gross Rents					F 15 15 15	
	b	Less rental expenses						
		Rental income or (loss)						
	ď	Net rental income or (lo	oss)	▷				
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(II) Other				
		Less. cost or other basis and sales expenses					en.	
ø.	d	Gain or (loss) Net gain or (loss) .		>				
Revenue	8a	Gross income from events (not including \$ of contributions reported See Part IV, line 18						
ē			a	·				
Other		Less direct expenses Net income or (loss) fro		events >			(1,000 (3,00) (3,000 (3,00) (3,000 (3,00) (3,000 (3,00) (3,000 (3,00) (3,000 (3,00) (3,000 (3,00) (3,00) (3,00) (3,000 (3,00) (3	
	1	Gross income from gam See Part IV, line 19	ning activities					
	b	Less direct expenses	. b		Transfers.			
	С	Net income or (loss) fro	om gaming acti	vities . >				
		Gross sales of invereturns and allowances	а					
		Less. cost of goods so			THE COURT OF THE PARTY OF THE P	200 B	74.25	
	ြင	Net income or (loss) from		- 	3427	2427		
	<u></u>	Miscellaneous Reve	enue 	Business Code	Same to the first of the same	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	With the same of the same of	
	11a	•	•••••					
	b	•••••		-	ļ			
	C	*** ··						
	1	All other revenue .		L	 	() () () () () () () () () ()		75 0 - 23, 231
		Total. Add lines 11a-17 Total revenue. See ins			10000	2422		2.00
				<u> </u>	175 780	1 8721		359

	990 (2009)				
Pa	rt IX Statement of Functional Expense				
	Section 501(c)(3) and 50				(O) === 4 (D)
	All other organizations must complete co		(B)	(C)	(C), and (D).
	o not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	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			138 6 1 2 3 2	* * * * * * * * * * * * * * * * * * * *
5	Compensation of current officers, directors, trustees, and key employees				
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 .	29 241	29241		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	3657	3657		
11	Fees for services (non-employees):				
а	Management			1.22	
b	Legal	1493		1493	
	Accounting	1000		1000	
	Lobbying	<u> </u>	\$63-170 . "1 DMARKS" ? :	1 907, 403 N.S. 888/201	
	Professional fundraising services. See Part IV, line 17		\$150 × 300 \$20		
f	3				
	Other	100		1.00	•
12	Advertising and promotion	2801		801	
13	Office expenses	- 2 801	 	<u> </u>	
14 15	Information technology Royalties				
16	Occupancy	14379	14379		
17	Travel		//		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization.				
23	Insurance	10505	10505		
24	Other expenses Itemize expenses not covered above (Expenses grouped together	100			
	and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	Paol	1774	1774		
b	Clubhouse	18601	18601		
С	Golf	27015	17019		
d	R+M	5/35	5135	 	
е				 	
	All other expenses	1,	11.0.1	 	
25 26	Total functional expenses. Add lines 1 through 24f Joint costs. Check here ▷ ☐ if following	166212	160311	5901	
0	SOP 98-2. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				

`Pa	irt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	32651	1	7787
	2	Savings and temporary cash investments	23032	2	13131
	3	Pledges and grants receivable, net		_3_	
	4	Accounts receivable, net	195	4	252-
	5	Receivables from current and former officers, directors, trustees, key		437. 439	A Safet Della Della
		employees, and highest compensated employees. Complete Part II of Schedule L		رِيْ مِنْ 5	Story of the story
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
S	_			7	
Assets	7	Notes and loans receivable, net	1/33	8	2487
As	8 9	Prepaid expenses and deferred charges	1725	9	
	10a	Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D			
	Ь	Less: accumulated depreciation 10b	502574	10c	502574
	11	investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	559585	16	586231
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
_		persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties .		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D	1741	25	1820
	26	Total liabilities. Add lines 17 through 25	1741	26	1820
nces		Organizations that follow SFAS 117, check here ▷ □ and complete lines 27 through 29, and lines 33 and 34.		, 4,	The state of the s
ala	27	Unrestricted net assets		27	
8	28	Temporarily restricted net assets		28	
Ĕ	29	Permanently restricted net assets	المراجع المراج	29	9101 - 1 X 30 T T T T T T T T T T T T T T T T T T
or Fund Balan		Organizations that do not follow SFAS 117, check here ▷ □ and complete lines 30 through 34.		\$6. 3	
ets	30	Capital stock or trust principal, or current funds .	563100	30	563700
SS	31	Paid-in or capital surplus, or land, building, or equipment fund	4337	31	20 737
Net Assets	32	Retained earnings, endowment, accumulated income, or other funds	(9593)	32	(26)
Se l	33	Total net assets or fund balances	357 844	33	584 411
	34	Total liabilities and net assets/fund balances	559585	34	586 231

Pa	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other	138	, ,	145
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	4		
	Schedule O.	·	2	a
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	<u>2a</u>		V
b	Were the organization's financial statements audited by an independent accountant?	2b		1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		_,	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	NI	7
	If the organization changed either its oversight process or selection process during the tax year, explain in		۹ ش	Park 1
	Schedule O.		1 m 3	3. 3
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		[]	۶۰ م ما
	issued on a consolidated basis, separate basis, or both	· 13		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
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?	3a	ווען	4
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			1 12-
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	N	r

Form **990** (2009)