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SCANNED DEC 0 1 2010

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)

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 and ending For the 2009 calendar year, or tax year beginning D Employer identification number Check if applicable C Name of organization Please use IRS label or Addres change SUN COUNTRY JUNIOR GOLF FOUNDATION, print or Name change 85-0459137 type Doing Business As]initial retum Room/suite See Number and street (or P O box if mail is not delivered to street address) E Telephone number Specific 897-0864 Termin-ated 2316 SOUTHERN BLVD SE (505) Instruc-Amended 48,414 City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-RIO RANCHO, NM 87124 H(a) Is this a group return pending F Name and address of principal officer: JOHN SPEARY Yes X No for affiliates? SAME AS C ABOVE _Yes _ H(b) Are all affiliates included? I Tax-exempt status: X 501(c) (3 4947(a)(1) or If "No," attach a list. (see instructions)) (insert no.) J Website: ▶ H(c) Group exemption number ▶ K Form of organization X Corporation L Year of formation 1999 M State of legal domicile NM Trust Association Other -Part I Summary Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O Governance Check this box I 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) Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & ō 5 Total number of employees (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) Total gross unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T the 34 RECEIVED 7Ь **Prior Year Current Year** 5,060. 32,764. Contributions and grants (Part VIII, line 1h) SS 6,250. 15,320 NOV 12 2010 Program service revenue (Part VIII, line 2g) 2,400. Investment income (Part VIII, column (A), lines 3 4, and 7d) 7,000.Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c 11 Total revenue - add lines 8 through 11 (must equal Part VIII) column (A) Line 12) 20,380 48,414.2,350. 13 Grants and similar amounts paid (Part 1X, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 10,128. 52,675. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 12,478. 52,675. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 7,902. <4,261.> Revenue less expenses. Subtract line 18 from line 12 Assets or Balances **Beginning of Current Year** End of Year Total assets (Part X, line 16) 15,633. 391,126. 20 5,122 384,876. 21 Total liabilities (Part X, line 26) 10,511. 6,250. 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, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 11-3-2010 Sign Signature of officer Here JOHN SPEARY. EXECUTIVE DIRECTOR Type or print name and title Date Check if Preparer's identifying number (see instructions) Preparer's Paid signature employed > Preparer's

May the IRS discuss this return with the preparer shown above? (see instructions)

Firm's name (or

yours if self-employed),

address, and

Use Only

Yes Form 990 (2009)

EIN P

Phone no

		ment of Program Service								
		be the organization's mission: S	EE SC	HEDULE	0					
-										
		nization undertake any significant pi n 990 or 990-EZ?	rogram sei	rvices during th	ne year which w	ere not l	sted on			Yes X No
i	lf "Yes," desc	cribe these new services on Schedu			t aandusta			200		Yes X No
ı	if "Yes," desc	nization cease conducting, or make onbe these changes on Schedule O								Tes [TT] IAC
;	Section 501(c	exempt purpose achievements for c)(3) and 501(c)(4) organizations and others, the total expenses, and rev	d section 4	4947(a)(1) trust	s are required t	o report			i	
:	PROGRAM COMPETI	N COUNTRY JUNIOR G AS AND ACADEMIES T ITION IN ELEMENTAR	OLF F HAT I Y AND	NCLUDE MIDDLE	ON SUPPO GOLF INS	TRUC . AP	AFTER TION, PROXII	ETIQUE	GOLF	ND
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4b .	(Code:) (Expenses \$		including	grants of \$) (Revenue \$		
4c	(Code:) (Expenses \$		ıncludıng	grants of \$) (Revenue \$		
						-				
-										
	Other prograr (Expenses \$	m services. (Describe in Schedule C	rants of \$	768) (Reve	nue \$)		

			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_	Х	i
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Х
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		
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			Ï
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		X
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_		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			ĺ
	If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, IX, or X			
	as applicable	11	X	
•	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 167 If "Yes," complete Schedule D, Part VIII.	İ		
•	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.			
•	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.		1	
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	ļ	X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	ļ	ļ	 ,,-
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	Х
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	l		v
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			v
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	 	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	40		х
	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,			X
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	 	A
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		X
40	1c and 8a? If "Yes," complete Schedule G, Part II	18_	 	A
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		X
20	complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	 	X
20_	Und the dryamization operate one of more hospitals in Tes, complete ocheodie in		990	

Part IV Checklist of Required Schedules (continued)

		ĺ	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			١,,
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		ŀ	
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	}		
	Schedule J	23		X
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	1		
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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		Х
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		Х
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		Х
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		j	
	Schedule L, Part III	27		Х
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):	1		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
-	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	- 55		
٠.	If "Yes," complete Schedule N, Part I	31		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	-02		
•	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?	-33		
04	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	ļ	Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	34		
33	If "Yes," complete Schedule R, Part V, line 2	35	i	Х
36		_33		
50	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	20		Х
27	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	\dashv	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		ų,	
	Note. All Form 990 filers are required to complete Schedule O.	38	X 000 /	2022
		rorm	990 (2	2009).

1s. Enter the number reported in Box 3 of Form 1086, Annual Summary and Transmittal of U.S., Information Returns. Enter 4- of not applicable be Enter the number of Forms W20 ancluded in line 1a. Enter 4- if not applicable 1 bit 10 0 0 0 bit the organization comply with backup withholding rules for reportable payments to vendors and reportable garning (garnbling) with monitor of employees reported on Form W3, Transmittal of Wage and Tax Statements. 2a 0 0 1 if at least one is reported on line 2a, did the organization of Form W3, Transmittal of Wage and Tax Statements. 3a 1 if a 1 if	, _,	-1 eartomonio negerania en en mage ante ante en primario de la compania del la compania de la compania de la compania de la		Yes	No
U.S., Information Returns. Enter 0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaining (gambling) without process reported on Form W3, Transmittal of Wage and Tax Statements. [Gambling) without organization comply with backup withholding rules for reportable payments to vendors and reportable gaining (gambling) without organization process. The complete of the celebratory was ending with or within the year covered by this return. By It all least one is reported on line 28, did the organization file all required federal employment tax returns? Note. If the sum of lines 1s and 2 is igneater than 250, you may be required to e-file this return, (see instructions). By It if vess, has if filed a Form 990T for the year? If *Composition 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)? By It vess, 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. By Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicity and young contributions that were not tax deductible? By It vess, did the organization include with every solicitation an express statement that such contributions or grifs were not tax deductible? By It vess, did the organization noticity the donor of the value of the goods or services provided? By It vess, indicate the number of Forms 2822 filed during the year. By It vess, indicate the number of Forms 2822 filed during the year. By It vess, indicate the number of Forms 2822 filed during the year. By It vess, indicate the number of Forms 2822 filed during the year. By It vess, indicate the number of Forms 2822 filed during the year. By It vess, indicate the number of Forms 2822 filed during the year. B	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		res	NO
b Enter the number of Forms W2G included in line 1a. Enter 0-fi not applicable		i i			
Countries organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gamibing) winnings to prize winners? 2 Einter the number of employees reported on Form W/3, Transmittal of Wage and Tax Statements, filled for the calendar year ending with or within the year covered by this return 8 If at least one is reported on line 28, did the organization file afforting departed referred employment tax returns? Note, if the sum of lines 1s and 2 is ig greater than 250, you may be required to e-file this return. (see instructions) 8 Did the organization have unrised business greas income of \$1,000 or more dump the year covered by this return? 9 At any time duming the calendar year, did the organization have an interest in, or a singulative or other authority over, a firmancial account in a foreign country (such as a bank account, securities account, or other financial account)? 8 If Yes, and the tree organization as a bank account, securities account, or other financial account; 9 See the instructions for exceptions and fliging requirements for Form TD F 90-22.1. Peport of Foreign Bank and Financial Accounts. 9 Was the organization as party to a prohibited tax shelter transaction at any time during the tax year? 10 If Yes, and the organization file Form 8888-T, Desclosure by Tax-Exempt Entity Regarding Prohibited Tax, Shelter Transaction? 11 Yes, and the organization file Form 8888-T, Desclosure by Tax-Exempt Entity Regarding Prohibited Tax, Shelter Transaction file Form 8888-T, Desclosure by Tax-Exempt Entity Regarding Prohibited Tax, Shelter Transaction file Form 8888-T, Desclosure by Tax-Exempt Entity Regarding Prohibited Tax, Shelter Transaction file Form 8888-T, Desclosure by Tax-Exempt Entity Regarding Prohibited Tax, Shelter Transaction file Form 8888-T, Desclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transactions that was required to the file organization shelt was required to the Form 8889 as required to the file organization shelt was pay	b				
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2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements.	_		1c	Х]
filed for the calendary year endong with or within the year covered by this return b filed teast one is reported on line 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. (see instructions) 3b. Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b fil *Yeas*, has if filed a Form 990-17 or this year? if *Two, "provide an explanation in Schedule 0 b file any time during the calendar year, clid 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)? b file *Yeas*, enter the name of the foreign country *P See the instructions for exceptions and filing requirements for Form TD F90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization aparty to a prohibited tax sheller transaction at any time during the tax year? b Did sny taxable party notify the organization file form 8886-file because by Taxe-Exempt Entity Regarding Prohibited Tax. Shelter Transaction? 6a VX b If Yes, *Idd the organization have annual gross recepts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? b If Yes, *Idd the organization notify the donor of the value of the goods or services provided? c) Did the organization receive deductible contributions under section 170(c). b If Yes, *Idd the organization notify the donor of the value of the goods or services provided? c) Did the organization sells, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282? d) If Yes, *Idd the organization sells, exchange, or otherwise dispose of tangible personal property for which it was required? f) Did the organization sells, exchange, or otherwise dispose of tangible personal property f	2a				
b If a least one is reported on line 2a, did the organization file all required federal employment has returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file 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? 3b If "Yes," has it filed a Form 90°-17 for this year" If "No," provide an explanation in Schedule 0 3b A 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 accountly over, a financial account in a foreign country (such as a bank account, securities account, or other financial account) 5b If "Yes," enter the name of the foreign country. 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5c If "Yes," to line Saor 55, to file organization that if was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line Saor 55, to file organization that if was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line Saor 55, to file organization that organization shelt are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 5c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c If "Yes," did the organization notify the donor of the value of the goods or services provided? 5c If the organization that may receive deductible contributions under section 170(e). 8 Did the organization receive a payment in excess of \$76 made partly as a contribution and partly for goods and services provided to the payor? 8 Did the organization organization shall make a property		lacksquare			
Note. If the sum of lines 1a and 2 as greater than 250, you may be required to e-file this return. (See instructions) 3	b	•	2b		
3a Dist the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b If "Yes," has if filed a Form 990-T for this year? If "No." provide an explanation in Schedule O a 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 accountly? b If "Yes," aret 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. 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 shefter transaction? If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shefter transaction? If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shefter Transaction? b Dies 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? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? b If "Yes," did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the Form 8282? b If "Yes," indicate the number of Forms 8282 filed during the year Port of the Form 8282? f If "Yes," indicate the number of Forms 8282 filed during the year Port of the organization, during the year, receive any funds, directly or indirectly, to pay premiums an a personal benefit contract? If Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Provided for the organizatio					-
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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? 7h 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 Sponsoring organizations maintaining donor advised funds. 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? 9b Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. 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) 12a Section 4947(a)(1) non-exempt charitable trusts. 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		benefit contract?	7e		
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b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	12a	· · · · · · · · · · · · · · · · · · ·	12a		
		i l			
			Form	990	2009)

Page 6

Part VI 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

Sec	tion A. Governing Body and Management					
					Ye	s No
1a	Enter the number of voting members of the governing body	1a		7		
b	Enter the number of voting members that are independent	16	·	7 }		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	ıp wit	h any other			
	officer, director, trustee, or key employee?			_	2	X
3	Did the organization delegate control over management duties customarily performed by or under the	he dır	ect supervision			
	of officers, directors or trustees, or key employees to a management company or other person?			-	3	<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Fo		90 was filed?	<u> </u>	1	X
5	Did the organization become aware during the year of a material diversion of the organization's asse	ets?		_	5	X
6	Does the organization have members or stockholders?			<u> -</u>	5	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more more more more more more more	embe	ers of the			\ _V
	governing body?			<u></u> ⊢-	'a	X
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other pe			_7	b	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken	duni	ng the year			
	by the following:				١,,	1
а	The governing body?				a X	
ь	Each committee with authority to act on behalf of the governing body?			8	ь Х	+
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ache	d at the			· ·
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9	<u> X</u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	rever	ue Code)			. 1
10-	December of the second state of the second state of the second se			[4	Ye Da	s No X
	Does the organization have local chapters, branches, or affiliates?	char	stere affiliates	 ''	<i>/</i> a	 ^
D	If "Yes," does the organization have written policies and procedures governing the activities of such and branches to ensure their operations are consistent with those of the organization?	Cita	oters, armates,	14	ъ	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before f	filma	the form?	1		X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	9			-	1-7-
12a				11:	2a X	1
	Are officers, directors or trustees, and key employees required to disclose annually interests that co	uld a	ive rise	<u> </u>	-	+
_	to conflicts?	5		12	26 X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes	." describe			
	in Schedule O how this is done			1:	2c	X
13	Does the organization have a written whistleblower policy?			_1	3	X
14	Does the organization have a written document retention and destruction policy?			1	4	X
15	Did the process for determining compensation of the following persons include a review and approv	al by	ındependent	'		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	7				
а	The organization's CEO, Executive Director, or top management official			1	5a	X
b	Other officers or key employees of the organization			1:	5b	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			- 1		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement	with a			1
	taxable entity during the year?				6a	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-			n		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	ganiza	ation's			
	exempt status with respect to such arrangements?			10	6b	Ш
	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► NONE					
17		T /50	1/a\/2\a	م کی داداد داد		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	1 (50	1(c)(3)s only) av	allable for		
	public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	confli	ct of interest or	dicy and	inanor	J
13	statements available to the public.	JU1111	or or nitelest be	noy, and	manth	u
20	State the name, physical address, and telephone number of the person who possesses the books a	and re	ecords of the or	ganization	ı: •	
	SUN COUNTRY SECTION CONROLLER - 561.624.8400			3 A 2011 91		
	300 AVE OF CHAMPIONS #205, PALM BEACH GARDENS, FL	3	3418			
				Fo	rm 99	O (2009)

02-04-10

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.

- 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.
 - List all of the organization's current key employees. See instructions for definition of "key employees."
- 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, and 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.

(A)	(B)			(O Pos	C)			(D) Reportable	(E)	(F) Estimated
Name and Title	Average hours	(c				ı ∶app	ly)	compensation	Reportable compensation	amount of
	per week	Individual trustee or director	institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
MATT WILLIAMS										
DIRECTOR	4.00	X	_	<u>L</u>	<u> </u>	<u> </u>	_	0.	0.	0.
GRANT DALPES			ŀ							
DIRECTOR	2.00	X	<u> </u>			_	<u> </u>	0.	0.	0.
GLENN DENNEY			1	l	1		ŀ			
DIRECTOR	2.00	X			_			0.	0.	0.
DONNIE TORRES	1 2 20	.,								
DIRECTOR	2.00	X	<u> </u>	-				0.	0.	0.
ROB LOWRY	2 00			х				0.	_	0
PRESIDENT DONNA SAUVE	3.00	-	-	<u> ^</u>		-		0.	0.	0.
SECRETARY	2.00	ļ		X				0.	0.	0.
PATRICK HANLON	2.00	┼╌	├	^		┢╌	 	0.		<u></u>
VICE PRESIDENT	2.00			Х				0.	0.	0.
JOHN SPEARY		 		 		-	-			
EXECUTIVE DIRECTOR	5.00	_		х				0.	0.	0.
		_			_	_	_			
			<u> </u>			_			·	
		ļ 								
		-		-		-				
		_	-	_	_	-				
			_							
		_					_			
	<u> </u>	_		<u> </u>						

Form 990 (2009)

Part VII Section A. Officers, Directors, To	rustees, Key E	mple	yee			ligh	est	1		$\overline{}$			
(A)	(B)				C)			(D)	(E)	1		(F)	
Name and title	Average	/ /		Pos		app	kΛ	Reportable compensation	Reportable compensation	.		mated ount c	
	hours per	<u> </u>	Tieci	الله	liiai	apr	,,,,	from	from related	ĺ	0	ther	
	week	Individual trustee or director			ļ	page		the organization	organizations (W-2/1099-MiS		comp	ensat m the	
		nstee	fuste	İ	18	bens	ļ	(W-2/1099-MISC)	(,, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	"	orga	nizatio	on
		dral tr	institutional frustee		Key employee	34 50				1		relate	
		Indiv	fustif	Officer	Key	Highest compensated employee	Fom				organ	nizatio	ns
											-		
		 	-	-		-	-			\dashv			
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			-	-		-	-			\rightarrow			
			<u></u>										
1b Total						<u> </u>		0.	000	0.			0.
2 Total number of individuals (including but compensation from the organization	not limited to ti	nose	IIST	ed a	DOV	e) Wi	no re	eceived more than \$100	,000 in reportable	3			0
				-		-					Ţ	Yes	No
3 Did the organization list any former office			, ke	у еп	nplo	yee,	or h	nighest compensated er	nployee on		_		v
line 1a? If "Yes," complete Schedule J for 4 For any individual listed on line 1a, is the			hmn	ene:	atior	anı	d otl	her compensation from	the organization	-	3		X
and related organizations greater than \$1	-		-					•	ine organization		4		X
5 Did any person listed on line 1a receive of				from	any	/ นกเ	elat	ed organization for serv	ices rendered to	[
the organization? If "Yes," complete Sche Section B. Independent Contractors	dule J for such	pers	on					·			5		<u>X</u>
Complete this table for your five highest of	ompensated in	depe	ende	ent c	onti	racto	ors t	hat received more than	\$100,000 of com	pensa	tion fro		
the organization. NONE				_			1	400					
(A) Name and busines	s address							(B) Description of s	ervices	Cc	(C) ompens		ı
							\dashv						
							}						
							\dashv						
			_										
							T						
2 Total number of independent contractors	(including but s	ot b	mit o	d to	tho	ما می		l ahove) who received ~	ore then				
\$100,000 in compensation from the organ		, O (1)		J (0)			ore man				
										F	orm 9	90 (2	009)

				JUNIOR GO	LF FOUNDAT	ION, INC.	85-0459	137 Page 9
Pa	rt VII	Statement of Rever	nue					(0)
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1 a	Federated campaigns	1a					
gra	b	•	1b					
fts,	С	•	1c					
<u>.g's</u>	ď	· ·	1d		,			
Siris	e	• `						
le cri	f	All other contributions, gifts, gran similar amounts not included abo		32,764.				
들히	9			027,010				
Contributions, gifts, grants and other similar amounts	_	Total. Add lines 1a-1f		>	32,764.			
				Business Code				
8	2 a			900099	3,750.	3,750.		
و چَ	b	SPONSORSHIP REV	/ENUE	900099	2,500.			2,500.
Program Service Revenue	c							
Rev	d							
ĕ	е			ļ				
_	1 -	All other program service reve	enue		6,250.			
-	<u>9</u>	Total. Add lines 2a-2f Investment income (including	dividends inter		0/230:			
İ	J	other similar amounts)	orriderids, inter	►				
ŀ	4	Income from investment of ta	x-exempt bond	proceeds ►				
	5	Royalties		_ _			-	
l			(i) Real	(ii) Personal				
	6 a	Gross Rents						
l	b	•		 				
1	c	` '	L					
Į		Net rental income or (loss) Gross amount from sales of	(i) Consumtion	(1) Other				
l	1 0	assets other than inventory	(i) Securities	(ii) Other 2,400.				
1	Ь	Less: cost or other basis		7200				
İ		and sales expenses						
	С	Gain or (loss)		2,400.				
	d	Net gain or (loss)		•	2,400.	2,400.	······································	······································
Other Revenue	8 a	Gross Income from fundraisin including \$contributions reported on line	of					
Æ		Part IV, line 18	a 10,1.000	,]				
ţ.	ь	Less: direct expenses	t					
0	С	Net income or (loss) from fund	draising events					
	9 a	Gross income from gaming a	ctivities. See					
1		Part IV, line 19	а					
i		Less: direct expenses	t	L				
- 1		Net income or (loss) from gan						
1	10 a	Gross sales of inventory, less						
	h	and allowances Less: cost of goods sold	a b					
		Net income or (loss) from sale		` 				
1	<u>_</u>	Miscellaneous Revenu		Business Code				
	11 a	DETICALISMENT		900099	7,000.	7,000.		
	b							
	С					-		
Í	d				7,000.			
	e 12	Total. Add lines 11a-11d Total revenue See instructions		▶	48,414.	13,150.	0.	2,500.
93200 02-04		. C.u C. C					•1	Form 990 (2009)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp				(D).
	not include amounts reported on lines 6b, 3b, 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				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	1			
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)		-		
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management				
b	Legal				
c	Accounting				
d	Lobbying Professional fundraising converse See Part IV line 17			an in a november	· · · · · · · · · · · · · · · · · · ·
e 4	Professional fundraising services See Part IV, line 17 Investment management fees				
f	Other				
9 12	Advertising and promotion				
13	Office expenses	99.		99.	
14	Information technology				
15	Royalties			-	
16	Occupancy	117.	88.	29.	<u> </u>
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	6,067.	4,550.	1,517.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,929.	3,697.	1,232.	
23	Insurance	935.	701.	234.	· 12'·· 12'11 2'9211 - 12 111 11 1
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)				
а	OTHER PROFESSIONAL SERV	35,681.	35,681.		
b	EQUIPMENT RENTAL & MAIN	3,186.	2,390.	796.	
c	TOURNAMENT OPERATIONS	1,507.	1,507.		
d	TOURNAMENT PRIZES	126.	126.		
e	PROMOTIONAL COSTS	28.	28.		
f	All other expenses				
25_	Total functional expenses. Add lines 1 through 24f	52,675.	48,768.	3,907.	0.
26	Joint costs. Check here ▶ ☐ 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				
93201	0 02-04-10				Form 990 (2009)

Form 990 (2009)

34

Total liabilities and net assets/fund balances

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form 990 (2009)

3a

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Act and OMB Circular A-133?

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

TINITOD COTE BOILDANTON

OMB No 1545-0047

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection

Name of the organization

Employer identification number 05 0450127

TNO

		SUN CUC	MIKI JUNIUR	GODE	T OOND	ALIUN	, INC	· •	00	1-0433	<u> 13/</u>	_
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st complet	te this par	t.) See inst	tructions.				
The organ	zation is not a	a private foundation	because it is: (For lines	1 through	11, check	only one t	oox.)					
1 🔲	A church, co	nvention of churche	s, or association of chur	ches desc	nbed in se	ction 170	(b)(1)(A)(i)).				
2	A school des	cribed in section 17	70(b)(1)(A)(ii). (Attach Sc	hedule E)								
3 🔲	A hospital or	a cooperative hosp	ital service organization	described	ın section	170(b)(1)	(A)(iii).					
4	A medical res	search organization	operated in conjunction	with a hos	pital desci	nbed in se	ection 170	(b)(1)(A)(i	ii). Enter th	ne hospital	's nam	e,
	city, and stat	te:										
5	An organizati	on operated for the	benefit of a college or u	niversity o	wned or op	perated by	/ a governi	mental un	ıt describe	d in		
	section 170	(b)(1)(A)(iv). (Compl	ete Part II.)									
6 🔲	A federal, sta	ate, or local governm	nent or governmental uni	t describe	d in sectio	n 170(b)(1)(A)(v).					
7 🗀	An organizati	on that normally red	ceives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general p	ublic desc	rıbed ır	n
	section 170	(b)(1)(A)(vi). (Comple	ete Part II.)									
8 🗀	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 X	An organizati	on that normally red	ceives: (1) more than 33	1/3% of its	support f	rom contr	ibutions, n	nembersh	ip fees, an	d gross red	ceipts f	from
	activities rela	ited to its exempt fu	nctions - subject to certa	aın exceptı	ons, and (2	2) no more	e than 33 1	1/3% of its	s support f	rom gross	invest	ment
	income and i	unrelated business t	axable income (less sec	tion 511 ta	x) from bu	sinesses	acquired b	y the orga	anization a	fter June 3	0, 197	5.
	See section	509(a)(2). (Complete	e Part III.)									
10	An organizat	ion organized and o	perated exclusively to te	st for publ	ıc safety. S	See sec tio	on 509(a)(4	4).				
11 🔲	An organizati	ion organized and o	perated exclusively for tl	he benefit	of, to perfo	orm the fu	nctions of,	, or to carr	y out the p	ourposes o	f one o	or
	more publicly	y supported organiz	ations described in secti	on 509(a)(1) or section	on 509(a)(2	2). See se o	ction 509	(a)(3). Che	ck the box	that	
	describes the	e type of supporti <u>ng</u>	organization and compl	ete lines 1	1e through	11h.						
	a Type I	l b∟	Type II (с 📖 Тур	e III • Func	tionally in	tegrated		d L	Type III · C	Other	
e	By checking	this box, I certify that	at the organization is not	controlled	directly o	r indirectly	by one or	r more dis	qualified p	ersons oth	er than	n
	foundation m	nanagers and other t	than one or more publict	y supporte	ed organiza	itions des	cribed in s	ection 50	9(a)(1) or s	ection 509	(a)(2).	
f	If the organiz	ation received a wri	tten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				_
	supporting o	rganization, check t	his box									_
9	-		organization accepted a			-						
			directly controls, either a	lone or tog	ether with	persons	described	ın (II) and I	(III) below,	<u></u>	Yes	No
	_	- •	upported organization?							11g(i)	\vdash	
		•	n described in (i) above?							11g(ii)	 	
			a person described in (i)							11g(iii)		
h	Provide the f	ollowing information	about the supported or	ganization	(s).							
			(iii) Type of	1		 		(1) (
• •	of supported	(ii) EIN	(iii) Type of organization		organization sted in your		u notify the tion in col	(vi) is organizati	on in col	(vii) Am		f
orga	nızatıon		(described on lines 1-9		document?		r support?	(i) organiz U S	ed in the	sup	port	
			above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No			
			(oce managerone))	103	110	163	140	163	140			
		}			1]					
		-		 	 				 			
		}		1			}					
									 			
				ł	}		l		1 1			
· · · - · ·				 _				<u> </u>				
			}									
Total .		Í	1	1	I		[1	1			

Form 990 or 990-EZ.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2009

	Schedule A	(Form	990 or	990-EZ)	2009
--	------------	-------	--------	---------	------

17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009 SUN COUNTRY JUNIOR GOLF FOUNDATION, INC.85-0459137 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I) Section A. Public Support (c) 2007 (e) 2009 (a) 2005 (d) 2008 Calendar year (or fiscal year beginning in) **(b)** 2006 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 3,934. 13,767. 10,458 5,060. 32,764. 65,983. include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 6,180 15,680 15,320 6,250. 57,250. 13,820 organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 26,138. 20,380. 17,754. 19,947. 39,014. 123,233. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 30,000. 30,000. 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year 30,000 30,000. c Add lines 7a and 7b 93,233 8 Public support (Subtract line 7c from line 6) Section B. Total Support (c) 2007 (d) 2008 Calendar year (or fiscal year beginning in) (a) 2005 **(b)** 2006 (e) 2009 (f) Total 17,754 19,947 26,138 20,380 39,014 123,233. 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties 51 149 164 2,400 2,764. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 51 149. 164 2,400. 2,764. c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 17,805. 20,096. 26,302. 20,380. .414. 13 Total support (Add lines 9, 10c, 1.1, and 12) 997. 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)	15	74.00 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	99.63 %
Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	2.19 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	.37 %

19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

istructio	ns	
hedule /	A (Form 990	or 990-EZ\ 2009

 $\triangleright [X]$

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization Employer identification number SUN COUNTRY JUNIOR GOLF FOUNDATION, INC. 85-0459137

Pai	1 Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advi-	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose	e conferring
	Impermissible private benefit?		Yes No
Pat	† If Conservation Easements. Complete if the org	anization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or p	leasure) Preservation of an hi	storically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		F
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06	2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by th	e organization during the tax
	year ►	_	
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and o		
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 170	
_	and section 170(h)(4)(B)(ii)?		└ Yes └ No
9	In Part XIV, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	the organization's accounting for
Do	conservation easements III Organizations Maintaining Collections of	Art Historical Transuras or C	ther Similar Accets
	Complete if the organization answered "Yes" to Form	•	Aller Ollilliai Assets.
	Complete in the organization anothered Tee to Form	000, , at 11, mile 0.	
1a	If the organization elected, as permitted under SFAS 116, not	to report in its revenue statement and h	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	the footnote to its financial statements that describes these		is its service, provide, in a director, the text of
b	If the organization elected, as permitted under SFAS 116, to		oce sheet works of art, historical treasures
-	or other similar assets held for public exhibition, education, o		
	these items:	rescaled in random service	of provide the following difficulties relating to
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financia	
-	the following amounts required to be reported under SFAS 1:		
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
	Assets included in Form 990, Part X		▶ \$
			-
			

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Schedule D (Form 990) 2009

Sched	dule D (Form 990) 2009 SUN COU	NTRY JUNIO	R GO	LF FOU	NDATIO	N, II	NC.	85-04	5913	7 р	age 2
	t 手 Organizations Maintaining C										
3	Using the organization's acquisition, accessi										
	(check all that apply):										
а	Public exhibition	d		Loan or exc	hange progra	ams					
b	Scholarly research	е			- , -						_
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	ey further t	he organizati	on's exe	mpt purp	ose in Par	XIV		
	During the year, did the organization solicit o										
	to be sold to raise funds rather than to be m								Yes _		No
	t IV Escrow and Custodial Arran					s" to For	m 990, Pa	art IV, line	9, or		
<u> </u>	reported an amount on Form 990, Pa		_								
1a	Is the organization an agent, trustee, custod		lary for	contribution	ns or other as	sets not	ıncluded				
	on Form 990, Part X?		•						Yes		No
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing t	able.							
_		•	-						Amoun	<u> </u>	
c	Beginning balance						1c				
	Additions during the year						1d				
	Distributions during the year						1e		-		_
f	Ending balance						1f				
	Did the organization include an amount on F	orm 990. Part X. line	21?						Yes		No
	If "Yes," explain the arrangement in Part XIV										
Par		f the organization an	swered	"Yes" to Fo	orm 990, Part	IV, line 1	10.				
<u> </u>	<u> </u>	(a) Current year		rior year	(c) Two year			ears back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions									,	
	Net investment earnings, gains, and losses										
	Grants or scholarships				, , , , , , , , , , , , , , , , , , ,		, 11 115 1				
	Other expenditures for facilities						***************************************			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	and programs					- 1					
f	Administrative expenses							************		*******	
	End of year balance				1	-1					٠,
2	Provide the estimated percentage of the year	r end balance held a	as:								
	Board designated or quasi-endowment	,,	%								
	Permanent endowment ▶	%	<u> </u>								
	. "-	%									
	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	and administe	ered for t	he organi	zation			
	by:	•					•			Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organization	s listed as required o	n Sched	dule R?					3b		
4	Describe in Part XIV the intended uses of the	· ·					_				
Par	t VI Investments - Land, Building), Part X, line	10.					
	Description of investment	(a) Cost or o	ther	(b) Cost	t or other	(c) A	ccumulate	ed	(d) Boo	k valu	ie
	,	basis (investr	ment)	basis	(other)	de	preciation	,			
1a	Land					. ,					
b	Buildings			39	4,330.		4,9	29.			01.
С	Leasehold improvements				1,725.					1,7	25.
ď	Equipment										
	Other										
Total	l. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colur	nn (B), line	10(c))			>	39	1, 1	26.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 SUN COUNTRY			FOUNDATION,	INC.	85-0459137	Page 3
Part VII Investments - Other Securities. Se	e Form 990, Part X,	, line 12.				
(a) Description of security or category	(b) Book valu	16	· ·		of valuation:	
(including name of security)	(b) BOOK Vaid		Cost or end-of-year market value			
Financial derivatives						
Closely-held equity interests	<u></u>					
Other						
					······································	
						
						
	ļ					
	ļ				 .	
	-					
			·····			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)	<u> </u>		······································			••••
Part VIII Investments - Program Related. S	ee Form 990, Part X	X, line 13.				
(a) Description of investment type	(b) Book value	ıe	· · · · · · · · · · · · · · · · · · ·		of valuation: ear market value	
					eal market value	
					·	
					·	
					· · · · · · · · · · · · · · · · · · ·	
	 	-+				
						
						
Total. (Col (b) must equal Form 990, Part X, col (B) line 13)				······································	······································	
Part IX Other Assets. See Form 990, Part X, line	15.	. —			······································	
······································	Description				(b) Book va	lue
	-					
· · · · · · · · · · · · · · · · · · ·						
Total. (Column (b) must equal Form 990, Part X, col (B) line					<u> </u>	
Part X Other Liabilities. See Form 990, Part X,	line 25.	1	(h) Amount			
1. (a) Description of liability		 '	(b) Amount			
Federal income taxes LOANS PAYABLE - LT		 	239,511.			
LOANS PAYABLE - CURRENT		 	7,555.			
DUE TO SUN COUNTRY SECTION OF	THE PGA	 -	62,542.			
DOL TO BON COOMINI BECTION OF	Int run	 	02,342.			
		 				
		 -				
		+				
		 				
		+				
Total. (Column (b) must equal Form 990, Part X, col (B) line	25.)		309,608.			
2. FIN 48 Footnote. In Part XIV, provide the text of the foo				hat reports t	the organization's liability	

Schedule D (Form 990) 2009

uncertain tax positions under FIN 48.

	dule D ⁵ (Form 990) 2009 SUN COUNTRY JUNIOR GOLF FOU			85-04591	37 Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to A	Audited Fin	nancial State	ements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		
2	Total expenses (Form 990, Part IX, column (A), line 25)				
3					
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		
9	Total adjustments (net). Add lines 4 through 8		9		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		10		
Par	t XII Reconciliation of Revenue per Audited Financial Statemen	its with Re	evenue per F	T	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	l _ l			
a	Net unrealized gains on investments	2a		4	
ь	Donated services and use of facilities	2b		-{	
C	Recoveries of prior year grants	2c		4	
đ	Other (Describe in Part XIV.)	2d		-	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	ایا			
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 5	
5 Do	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) * XIII Reconciliation of Expenses per Audited Financial Statemen	nte With F	vnenses ner		
	Total expenses and losses per audited financial statements	IIIG WILL	xperises per	1	
1 2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			- 	
a	Donated services and use of facilities	2a		1 1	
_	Prior year adjustments	2b		1	
b	Other losses	2c		1	
d	Other (Describe in Part XIV.)	2d		-	
	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	· · · · · · · · · · · · · · · · · · ·
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV.)	4b		7 1	
c	Add lines 4a and 4b	L	<u> </u>	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	
Pa	t XIV Supplemental Information				
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comple				
				,	

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

SUN COUNTRY JUNIOR GOLF FOUNDATION, INC.

Employer identification number 85-0459137

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO PROMOTE JUNIOR GOLF TO YOUTH OF ALL AGES AND GENDERS IN THE REGION
BOTH THROUGH EDUCATION AND COMPETITION.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO PROMOTE JUNIOR GOLF TO YOUTH OF ALL AGES AND GENDERS IN THE REGION
BOTH THROUGH EDUCATION AND COMPETITION.
FORM 990, PART VI, SECTION B, LINE 11: THE EXECUTIVE DIRECTOR OF THE SUN
COUNTRY JUNIOR GOLF FOUNDATION REVIEWS THE COMPLETED 990 RETURN FOR
COMPLETENESS AND ACCURACY PRIOR TO FILING.
990 PAGE 6, PART VI, QUESTION 15:
ALL PERSONS ARE VOLUNTEERS OF THE ASSOCIATION AND ARE NOT PAID EMPLOYEES.
FORM 990, PART VI, SECTION C, LINE 19: THE FOUNDATION MAKES ITS FINANCIAL
STATEMENTS AND OTHER GOVERNING DOCUMENTS AVAILABLE AT THE PUBLIC'S REQUEST
BY CONTACTING THE SUN COUNTRY JUNIOR GOLF FOUNDATION OFFICE.