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### Form **990**

#### **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)

2009

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A	For the	2009 ca	lendar year, or tax year beginning $JUL 1, 2009$ and ending	JUN 30, 2010	
В	Check if applicabl	e Please	C Name of organization	D Employer identifi	cation number
	Addre	ss label or print or			
L	Name chang	e type	Doing Business As	59-1	111474
	linitial return	0	Number and street (or P.O. box if mail is not delivered to street address) Room/su	1	
	Termir ated	Instruc-		407-	847-4052
	Ameno		City or town, state or country, and ZIP + 4	G Gross receipts \$	715,311.
	Application	;a-	KISSIMMEE, FL 34742-1909	H(a) is this a group re	eturn
	pendu	F Nar	me and address of principal officer: STEVE WHALEY	for affiliates?	Yes X No
			ME AS C ABOVE	H(b) Are all affiliates inc	cluded? Yes No
			us: X 501(c) ( 5 ) ◀ (insert no.) 4947(a)(1) or 527	If "No," attach a	list. (see instructions)
			W.SILVERSPURSRODEO.COM	H(c) Group exemptio	n number 🕨
K	Form of	forganizatio	on: X Corporation	ear of formation: 1961 N	A State of legal domicile: FL
P	art I	Summ			
-0	1	Bnefly de	scribe the organization's mission or most significant activities: THE PRIM	ARY PURPOSE O	F SILVER
JUN 1 3 Redvernance		SPURS	S CLUB, INC. IS THE PRODUCTION OF RODEOS	. SILVER SPUR	S IS THE
ž	2	Check thi	is box 🕨 🔲 if the organization discontinued its operations or disposed of m	ore than 25% of its net as	ssets.
<b>2</b>	3	Number o	of voting members of the governing body (Part VI, line 1a)	3	11
2	4	Number o	of independent voting members of the governing body (Part VI, line 1b)	4	11
es	5	Total num	nber of employees (Part V, line 2a)	. 5	1
Z = 2	6	Total num	nber of volunteers (estimate if necessary)	6	300
	7a	Total gros	ss unrelated business revenue from Part VIII, column (C), line 12	7a	0.
Ŝ			ated business taxable income from Form 9901 line 34	7b	0.
			~ O	Prior Year	Current Year
٩	8	Contribut	tions and grants (Part VIII, line 1h) (5) MAY 1 8 2011	105,050.	96,500.
	9	Program	tions and grants (Part VIII, line 1h)	453,469.	495,550.
23			nt income (Part VIII, column (A), lines 3, 4, and 7d)	11,974.	109,338.
S.C. Revenue	11	Other rev	renue (Part VIII, column (A), lines 5, 6d, 8c, (G, 10c, and 11e)	17,311.	8,348.
<u> </u>	12	Total reve	enue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	587,804.	709,736.
من	13	Grants ar	nd similar amounts paid (Part IX, column (A), lines 1-3)	18,719.	14,561.
	14	Benefits	paid to or for members (Part IX, column (A), line 4)		
S	15	Salanes,	other compensation, employee benefits (Part IX, column (A), lines 5-10)	36,281.	36,923.
Expenses	16a	Professio	onal fundraising fees (Part IX, column (A), line 11e)		
Š	b	Total fund	draising expenses (Part IX, column (D), line 25)		, , , , , , , , , , , , , , , , , , ,
Ш	17	Other exp	penses (Part IX, column (A), lines 11a-11d, 11f-24f)	597,382.	607,518.
	18	Total exp	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)	652,382.	659,002.
	19	Revenue	less expenses. Subtract line 18 from line 12	<64,578.	> 50,734.
Sor	3		ļ	Beginning of Current Year	End of Year
Net Assets	20	Total ass	ets (Part X, line 16)	4,271,253.	4,313,000.
¥	21	Total liab	ulities (Part X, line 26)	26,596.	17,609.
			ts or fund balances. Subtract line 21 from line 20	4,244,657.	4,295,391.
Р	art II		ature Block		
		and comp	alties of perury, I declare that I have examined this return including accompanying schedules and statement the Declaration of preparer (other than office) is based on eliminormation of which preparer has any knowle	nts, and to the best of my knowled dge	ge and belief, it is true, correct,
				1.	1.
Sig	gn	775		<u>5</u> []	2/11
He	re	Sig.	nature of officer	uate *	1
			Monky Lamptor		
_		<del>                                     </del>	pe or print name and title		
Pa	id	Preparer'		self- (see in	er's identifying number structions)
_	eparer's	signature Firm's nam	03/11/2011	employed	
	e Only	yours if	RSM MCGDADAEI, INC.	EIN >	
	•••	self-emplo address, a			
_		ZIP + 4	ORLANDO, FL 32803	Phone no. ► 4	07-898-2727
Ma	y the I	<b>RS</b> discus	ss this return with the preparer shown above? (see instructions)		X Yes No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form **990** (2009)

) (Revenue \$

Form 990 (2009)

including grants of \$

(Expenses \$

Total program service expenses ▶ \$

4.

Form 990 (2009) SILVER SPURS CLUB, INC.

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<del></del>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
Ů	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
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	X	
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		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			7.
	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		Х
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		х
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		х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
••	as applicable	11	х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	•		· 4
	Part VI.		٠,	» 1
•	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		, ,	, 48
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total		٠	
	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	`	~_,, *	. 4
	Part X, line 16? If "Yes," complete Schedule D, Part IX.		. 44	,
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		N.A	
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			1
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.	٠	•	, ,
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		, ,	
404	Schedule D, Parts XI, XII, and XIII.	12	-	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  12A X			١٠ ﴿
13	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			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business.	140		<del></del> -
_	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		х
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		х
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		Х
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		Х
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		X
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	ļ	X
20_	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	<u> </u>	Х
		Form	<b>990</b> (	2009)

Form 990 (2009) SILVER SPURS CLUB, INC.

Part IV | 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 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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 2? 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			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	:		
	Schedule J	23		X
24 <del>a</del>	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	04-		х
h	Schedule K. If "No", go to line 25  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
·	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		
	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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			4,5
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	ļ	X
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		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):	*		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	,	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
c	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		X
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			
0.4	contributions? If "Yes," complete Schedule M	30	<u> </u>	Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
	Schedule N, Part II	32		х
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		Х
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		X
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		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
<b></b>	If "Yes," complete Schedule R, Part V, line 2	36	-	<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		x
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	37	<del>                                     </del>	<u> </u>
<b></b>	Note. All Form 990 filers are required to complete Schedule O.	38	x	
	Treater, and each find and required to complete contents of			2000)

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Par	t V Statements Regarding Other IRS Filings and Tax Compliance		<u>-</u>	-30 -
			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	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		<b></b>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	. ~ .
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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		X
þ	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	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		
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		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			۱
	provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
¢	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			۱.,
	to file Form 8282?	_7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year		,	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			X
	benefit contract?	7e		X
† -	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		<del>  ^</del>
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		$\vdash$
П	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the	7h		<del> </del>
0	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			ĺ
	at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	-		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	30		<del>  -</del> -
	Initiation fees and capital contributions included on Part VIII, line 12			1
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
11	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?	12a	l	-
	The state of the s		L	

12b

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

1a Enter the number of voting members of the governing body b Enter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a material diversion of the organization's assets? 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?  b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?  8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year	11	2 3 4 5 6	Yes	X X X X X
b Enter the number of voting members that are independent  2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?  3 Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?  4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?  5 Did the organization become aware during the year of a material diversion of the organization's assets?  6 Does the organization have members or stockholders?  7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?  b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	11	3 4 5 6		X X X
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of officers, directors or trustees, or key employees to a management company or other person?  Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?  Did the organization become aware during the year of a material diversion of the organization's assets?  Does the organization have members or stockholders?  Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?  Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	-	4 5 6		X
<ul> <li>4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?</li> <li>5 Did the organization become aware during the year of a material diversion of the organization's assets?</li> <li>6 Does the organization have members or stockholders?</li> <li>7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?</li> <li>b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?</li> </ul>	-	4 5 6		X
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<ul> <li>6 Does the organization have members or stockholders?</li> <li>7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?</li> <li>b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?</li> </ul>	-	6 7a		
<ul> <li>7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?</li> <li>b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?</li> </ul>	- - - - - - - - - - - - - - - - - - -	7a		<u> </u>
governing body? <b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	- -			
<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	- -			
		7h		<u>X</u>
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year		7.0	eur er	X
		ξ,	2	gr.
by the following:		*****		
a The governing body?		8a	X	
b Each committee with authority to act on behalf of the governing body?	-	8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		_		v
organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		<u> </u>
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)				
10a. Doos the accompanion have lead shorters because or officiency	r	40-	Yes	No X
10a Does the organization have local chapters, branches, or affiliates?	}	10a		
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,		106		I
and branches to ensure their operations are consistent with those of the organization?  11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	ŀ	10b 11	X	
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.	}	- 11		×Z
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	ŀ	≪ 12a	X	Seile
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise		120		
to conflicts?		12b	х	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	<u> </u>			
in Schedule O how this is done		12¢	х	
13 Does the organization have a written whistleblower policy?	<u> </u>	13	X	
14 Does the organization have a written document retention and destruction policy?		14	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent	Ī			
persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		- · · ·		
a The organization's CEO, Executive Director, or top management official		15a	X	
b Other officers or key employees of the organization		15b	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)				5.4
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		,	13.2	
taxable entity during the year?	ļ	16a		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	ו	•		
in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's		-	303	
exempt status with respect to such arrangements?		16b		
Section C. Disclosure				
17 List the states with which a copy of this Form 990 is required to be filed ► NONE		_		
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available in the management of the section of the	allable i	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, conflict of interest pol	ıcy, an	id fina	incial	
statements available to the public.		ト		
State the name, physical address, and telephone number of the person who possesses the books and records of the org HEATHER BLANDFORD - 407-847-4052	janizati	ion: 🕨	_	
1875 E. IRLO BRONSON MEMORIAL HWY, KISSIMMEE, FL 34744				

## Part VIII 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 employee."
- 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)		(C)					(D)	(E)	(F)
Name and Title	Average hours	Position (check all that apply)					ΙΛΛ	Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated E		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
ALAN KELLEY									_	_
TREASURER	5.00	X		X	<u> </u>	Ļ	<u> </u>	0.	0.	0.
HENRY KEMPFER		l			ŀ				_	
VICE PRESIDENT	5.00	X	L	X		<u> </u>	L	0.	0.	0.
DAVE PARTIN		l				ŀ			_	
DIRECTOR	5.00	Х				lacksquare	L	0.	0.	0.
STEVE WHALEY									_	
PRESIDENT	5.00	X	L_	Х		_	<u> </u>	0.	0.	0.
CLAY TYSON					l	ŀ			_	_
DIRECTOR	5.00	X			L	<u> </u>	<u> </u>	0.	0.	0.
DEBRA PACE		l					ĺ		_	
DIRECTOR	5.00	X	L	<u> </u>	<u> </u>			0.	0.	0.
RICK BOOTH		l					l			_
VICE PRESIDENT	5.00	X	1_	X	_	L	L_	0.	0.	0.
JODIE OVERSTREET		١,,		,,		l			0	
SECRETARY	5.00	I X		X	-	╙	<u> </u>	0.	0.	0.
ANN MARIE GREER DIRECTOR	5.00	Į.		į				0.	0.	0.
STEVE KNOWLES	3.00	₽	├			-		· · · · · · · · · · · · · · · · · · ·	0.	0.
DIRECTOR	5.00	X					İ	0.	0.	0.
SCOTT RAMSEY	- 3100	<del> </del>	t	-	┢	<del>                                     </del>	┢	<del></del>		
DIRECTOR	5.00	x						0.	0.	0.
HEATHER BLANDFORD		Ε-	<del>                                     </del>	$\vdash$	┢	H	H	1		
CONTROLLER	40.00	l		x				36,923.	0.	0.
		<del> </del>	┢			t		1		
							Г			
					1			-		
		L	L	L	L	L		L		
					$\Gamma$					
					L		L			
		ŀ	1			1				

Form 990 (2009) SILVER SI	PURS CLU	JB,	<u>, ]</u>	INC	3.				59-11	1147	/4 F	age 8
Part VIII Section A. Officers, Directors, Tru (A) Name and title	(B) Average			(C Pos	C) ition	1		( <b>D)</b> Reportable	(E) Reportable		(F) Estimat	ted
	hours per week	individual trustee or director	Institutional frustee	all		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC	C) C	amount other ompens from the organizati and rela organizati	r sation he ation ated
						:						
1b Total								36,923.		0.		0.
Total     Total number of individuals (including but recompensation from the organization)	ot limited to th	nose	liste	ed a	bov	e) wi	no r	<del>'</del>				(
<ul> <li>Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s</li> <li>For any individual listed on line 1a, is the sign of solution organizations greater than \$15</li> </ul>	uch individual um of reportab	le co	omp	ensa	atior	n and	d ot	her compensation from		<u>~</u>		X
and related organizations greater than \$15  Did any person listed on line 1a receive or a the organization? If "Yes," complete School Section B. Independent Contractors	accrue compe	nsat	ion 1						rices rendered to	a.º	5	X
Complete this table for your five highest countries the organization.	mpensated in	depe	ende	ent c	ont	racto	ors 1		\$100,000 of comp	ensatio		
Name and business KENT CUSTOM HOMES, INC.				יי ר				Description of s			(C) npensati	
P.O. BOX 700355, SAINT C	LOUD, F	<u> </u>	34	//(	<u> </u>			CONSTRUCTION			204,8	376
	· · · · · · · · · · · · · · · · · · ·											
2 Total number of independent contractors (	including but r	not li	mite	ed to	tho	se li	sted	d above) who received r	nore than		A 10 10 10 10 10 10 10 10 10 10 10 10 10	

1

\$100,000 in compensation from the organization

Form 990 (2009)

932009 02-04-10 Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).							
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses			
1	Grants and other assistance to governments and							
	organizations in the U.S. See Part IV, line 21	14,561.						
2	Grants and other assistance to individuals in							
-	the U.S. See Part IV, line 22							
3	Grants and other assistance to governments,							
٠	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,	36,923.						
_	trustees, and key employees	30,323.	<del></del>		···			
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							
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):							
а	Management	34,353.						
b	Legal	537.						
C	Accounting	1,775.						
d	Lobbying							
е	Professional fundraising services. See Part IV, line 17			7.5				
f	Investment management fees							
g	Other	26,339.			_			
12	Advertising and promotion	99,453.						
13	Office expenses	10,599.						
14	Information technology							
15	Royalties							
16	Occupancy							
17	Travel	3,043.						
18	Payments of travel or entertainment expenses							
	for any federal, state, or local public officials							
19	Conferences, conventions, and meetings							
20	Interest	20.						
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	25,143.						
23	Insurance	25,588.			<u> </u>			
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	PRIZES & AWARDS	98,313.			<u> </u>			
h	LIVESTOCK EXPENSE	63,146.						
6	CONCESSIONS	33,253.		<u> </u>				
d	STALLS	28,908.						
e	MATERIALS AND SUPPLIES	20,540.		<u> </u>				
f	All other expenses	136,508.						
-	Total functional expenses. Add lines 1 through 24f	659,002.						
25	Joint costs. Check here J If following	033,002.						
26								
	SOP 98-2. Complete this line only if the organization							
	reported in column (B) joint costs from a combined							
	educational campaign and fundraising solicitation			1				

5, 5,

Form 990 (2009)
Part X Balance Sheet

			(A) Beginning of year		( <b>B)</b> End of year
	1	Cash - non-interest-bearing	118,807.	1	104,484.
	2	Savings and temporary cash investments	568,433.	2	415,267.
1	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
l		employees, and highest compensated employees. Complete Part II			
- 1		of Schedule L		5	The safe to the same special
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
Ì		Part II of Schedule L	Table And the second se	6	The second secon
တ္က	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
¥	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
l			257.		J
	b	basis. Complete Part VI of Schedule D  Less: accumulated depreciation  10a 4,173, 10b 380,	108. 2,968,478.	10c	3,793,149.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
ļ	13	Investments - program-related. See Part IV, line 11		13	
l	14	Intangible assets		14	
- 1	15	Other assets. See Part IV, line 11	615,535.	15	100.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,271,253.	16	4,313,000.
	17	Accounts payable and accrued expenses	15,789.	17	8,257.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employe	1		
ja		highest compensated employees, and disqualified persons. Complete P	art 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	10.00	24	0 250
	25	Other liabilities. Complete Part X of Schedule D	10,807.		9,352.
	26	Total liabilities. Add lines 17 through 25	26,596.	26	17,609.
		Organizations that follow SFAS 117, check here   and com	plete		•
Ses		lines 27 through 29, and lines 33 and 34.			and the second of the second o
lan	27	Unrestricted net assets		27	
Bal	28	Temporanly restricted net assets		28	<u> </u>
pu.	29	Permanently restricted net assets		29	
Ę		Organizations that do not follow SFAS 117, check here	na		
SO		complete lines 30 through 34.	0.		0.
Net Assets or Fund Balance	30	Capital stock or trust principal, or current funds	0.	30	0.
As	31	Paid-in or capital surplus, or land, building, or equipment fund	4,244,657		4,295,391.
Ne.	32	Retained earnings, endowment, accumulated income, or other funds	4,244,657		4,295,391.
_	33	Total hebition and not appets/fund helphoop	4,271,253		4,313,000.
	34	Total liabilities and net assets/fund balances	* 1811,233	<u> </u>	Form <b>990</b> (2009)

5.

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		*	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b		Х
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		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both:			l
	Separate basis Consolidated basis Both consolidated and separate basis			
За	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		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			l
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		L

#### SCHEDULE C (Form 990 or 990-EZ)

**Political Campaign and Lobbying Activities** 

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public. Inspection\*

Schedule C (Form 990 or 990-EZ) 2009

Department of the Treasury Internal Revenue Service

Complete if the organization is described below.

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

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

<ul> <li>Section 501(c)(4), (5), or (6) organ</li> </ul>	izations: Complete Part III.			
Name of organization			Empl	oyer identification number
SILVE	R SPURS CLUB, INC.	•		59-1111474
Part   Complete if the	organization is exempt un	der section 501(c	e) or is a section 527 o	rganization.
1 Provide a description of the organization	anization's direct and indirect politi	ical campaign activities	s in Part IV.	
2 Political expenditures			▶ \$	
3 Volunteer hours				
Part I-B Complete if the	organization is exempt un	der section 501(c	:)(3).	
1 Enter the amount of any excise	tax incurred by the organization ur	nder section 4955	▶\$	
2 Enter the amount of any excise			55 ▶\$	
3 If the organization incurred a se	ction 4955 tax, did it file Form 4720	0 for this year?		Yes No
4a Was a correction made?		•		Yes No
<b>b</b> If "Yes," describe in Part IV.				
Part I-C Complete if the	organization is exempt un	der section 501(c	), except section 501(	c)(3).
1 Enter the amount directly exper	ded by the filing organization for s	ection 527 exempt fun	ction activities > \$	
2 Enter the amount of the filing or	ganization's funds contributed to c	other organizations for		
exempt function activities			▶\$	
3 Total exempt function expenditu	ures. Add lines 1 and 2. Enter here	and on Form 1120-PO	•	
line 17b			▶\$	
4 Did the filing organization file Fo	•			Yes No
5 Enter the names, addresses and				
	ter the amount paid from the filing		· ·	
	delivered to a separate political org	•	eparate segregated fund or	a political action committee
	ded, provide information in Part IV	<del></del>	<del></del>	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
			filing organization's funds. If none, enter -0	contributions received and promptly and directly
			Tarido: Il riorio, critor o .	delivered to a separate
		į		political organization.  If none, enter -0
				ii none, enter -o
<del></del>				
				<u> </u>
		+		
				<del> </del>
	1			

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

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Schedule C (Form 990 or 990-EZ) 2009	SILVER SPU	RS CLUB, IN	rC.	59-:	1111474 Page 2
Part II-A Complete if the org		mpt under section	on 501(c)(3) and fil	ed Form 5768	
(election under sec	tion 501(h)).				
A Check 🕨 🖳 if the filing organiza	ition belongs to an affi	liated group.			·
B Check 🕨 📖 if the filing organiza	tion checked box A a	nd "limited control" pr	ovisions apply.	·	
	ts on Lobbying Expe ditures" means amou		)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infli	uence public opinion (	grass roots lobbying)			
b Total lobbying expenditures to infli	uence a legislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add I	ines 1a and 1b)				
d Other exempt purpose expenditure	es				
e Total exempt purpose expenditure	es (add lines 1c and 1c	i)			
f Lobbying nontaxable amount. Ent	er the amount from the	e following table in bo	th columns.		
If the amount on line 1e, column (a) o	or (b) is: The lob	bying nontaxable am	ount is:		
Not over \$500,000	20% of	the amount on line 1e	·]		
Over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the exc	cess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000 \$175,00	00 plus 10% of the exc	cess over \$1,000,000		
Over \$1,500,000 but not over \$17	,000,000 \$225,00	00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
g Grassroots nontaxable amount (er	•				
h Subtract line 1g from line 1a. If zer					
i Subtract line 1f from line 1c. If zero	ř			<del> </del>	<u> </u>
j If there is an amount other than ze		line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this					Yes No
•	zations that made a s	* *	· Section 501(h) n do not have to comp es 2a through 2f on pa		
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	( <b>d)</b> 2009	(e) Total
2a Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount	*				
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					<u> </u>
(150% of line 2d, column (e))	1				
				(	<del> </del>
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

59-1111474 Page 3

Schedule C (Form 990 or 990-EZ) 2009 SILVER SPURS CLUB, INC. 59-111147

[Part II-B] Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

_		(8	1)	(k	(b)		
		Yes	No	Amo	ount		
1	During the year, did the filing organization attempt to influence foreign, national, state or						
	local legislation, including any attempt to influence public opinion on a legislative matter						
	or referendum, through the use of:						
а	Volunteers?						
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
	Media advertisements?			ļ			
	Mailings to members, legislators, or the public?						
e	Publications, or published or broadcast statements?						
7	Grants to other organizations for lobbying purposes?  Direct contact with legislators, their staffs, government officials, or a legislative body?						
g	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	-					
i	Other activities? If "Yes," describe in Part IV	-					
	Total. Add lines 1c through 1i			<u> </u>			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
	If "Yes," enter the amount of any tax incurred under section 4912						
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				·· · · · · -		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			,			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ection			
	501(c)(6).						
				Yes	No		
1	Were substantially all (90% or more) dues received nondeductible by members?		1	Х			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?  t III-B   Complete if the organization is exempt under section 501(c)(4), section 501(		3	<u> </u>	Х		
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes."  Dues, assessments and similar amounts from members	ert III-A, li	ne 3 is a	nswered			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ical	<del>-</del> -				
	expenses for which the section 527(f) tax was paid).						
а	Current year		2a				
b	Carryover from last year		2b				
С	Total		2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess					
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political					
	expenditure next year?		4	ļ			
5	Taxable amount of lobbying and political expenditures (see instructions)		5				
Par							
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; a ny additional information.	nd Part II-B,	line 1i. Als	o, complete	this part		
			<del></del>				
			<del></del>				
	· · · · · · · · · · · · · · · · · · ·						

#### Schedule D

(Form 990)

5 . V.

Department of the Treasury Internal Revenue Service

## Supplemental Financial Statements ▶ Complete if the organization answered "Yes," to Form 990,

➤ 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

2009
Open to Public and Inspection (\*\*)

Name of the organization

SILVER SPURS CLUB, INC.

Employer identification number 59-1111474

Pai	t la Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, Iin	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	writing that the assets held in donor adv	rised funds
	are the organization's property, subject to the organization's	s exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor	advisors in writing that grant funds can b	e used only
	for chantable purposes and not for the benefit of the donor	or donor advisor, or for any other purpos	e conferring
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990,	
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or	pleasure) Preservation of an h	istorically important land area
	Protection of natural habitat		ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	ified conservation contribution in the for	n of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic st	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06	2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by t	he organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	asement is located >	_
5	Does the organization have a written policy regarding the pe	enodic monitoring, inspection, handling o	f
	violations, and enforcement of the conservation easements	rt holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, and enforcing conservation easements	during the year
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	ng the year > \$
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 17	70(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		└─ Yes └─ No
9	In Part XIV, describe how the organization reports conservation	tion easements in its revenue and expen	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describe	s the organization's accounting for
	conservation easements.		
Pa	t III Organizations Maintaining Collections of		Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no	•	
	treasures, or other similar assets held for public exhibition, e	•	public service, provide, in Part XIV, the text o
	the footnote to its financial statements that describes these		
þ	If the organization elected, as permitted under SFAS 116, to	·	
	or other similar assets held for public exhibition, education,	or research in furtherance of public servi	ce, provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financ	cial gain, provide
	the following amounts required to be reported under SFAS	116 relating to these items:	
	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		<b>▶</b> \$

		<u>SPURS CLUB</u>								Page 2
Par	t III Organizations Maintaining C	collections of A	rt, Hist	torical Tr	easures, c	or Othe	er Simila	ar Asse	ts (contil	nued)
3	Using the organization's acquisition, accessi	on, and other record	is, check	any of the	following tha	t are a s	ignificant i	use of its	collection	items
	(check all that apply):									
а	Public exhibition	d	ı 🔲 ı	Loan or exc	hange progra	ams				
b	Scholarly research	е	. 🗀 (	Other						
С	Preservation for future generations			**	,					
4	Provide a description of the organization's co	ollections and explai	n how th	ey further tl	he organizati	on's exe	mpt purpo	se in Par	t XIV.	
5	During the year, did the organization solicit of	r receive donations	of art, his	stoncal trea	sures, or oth	er sımılaı	rassets			
	to be sold to raise funds rather than to be mi	aintained as part of t	the organ	nization's co	ollection?				Yes	☐ No
Par	t IV: Escrow and Custodial Arran	gements. Comple	ete if org	anızatıon ar	nswered "Yes	s" to For	m 990, Pa	rt IV, line	9, or	
	reported an amount on Form 990, Pa	rt X, line 21.	-							
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	s or other as	sets not	ıncluded			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing t	table:						
		•	•						Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						11			
2a	Did the organization include an amount on F	orm 990. Part X. line	21?				<u> </u>		Yes	No
	If "Yes," explain the arrangement in Part XIV	,								•
Par			swered	"Yes" to Fo	rm 990, Part	IV, line 1	10.			
		(a) Current year	(b) P	nor year	(c) Two year	rs back	(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance				-					
b	Contributions				.7		ŧ ' -			
С	Net investment earnings, gains, and losses				· · · · · · · · · · · · · · · · · · ·		<del> </del>	***************************************		-
d	Grants or scholarships						~	,	4	
е	Other expenditures for facilities				, ,	~				y.
	and programs				, **; * .	7 (****) 14 (* )		5 > " , ;	4 T 2 1 S	`` <i>``</i> ,'
f	Administrative expenses									
g	End of year balance	-			٠,	ж.,	,			,
2	Provide the estimated percentage of the year	r end balance held	as:		<u> </u>					
а	Board designated or quasi-endowment		%							
b	Permanent endowment ▶	%	_							•
C	Term endowment	<del></del>								
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	ınd admınıste	ered for t	he organiz	ation		
	by:	J					Ū		Γ	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	on Sched	dule R?					3b	
4	Describe in Part XIV the intended uses of the	•								
Pai	t VI Investments - Land, Building				, Part X, line	10.				
	Description of investment	(a) Cost or o			or other		ccumulate	ed	(d) Book	value
	·	basis (investi			(other)		preciation		, ,	
	Land			2,87	7,191.				2,87	7,191.
	Buildings				9,815.		9	08.		3,907.
c	Leasehold improvements							-		
ď	Equipment	-		1	6,453.		14,3	93.		2,060.
	Other				9,798.		364,8			4,991.
	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, colun	· · · · · · · · · · · · · · · · · · ·						3,149.

Part VII	Investments - Other Securities. Se	ee Form 990, Part X, II	ne 12.		
	(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua st or end-of-year mar	
Financial d	lenvatives				
Closely-he	ld equity interests				
Other					
		ļ			
					<del></del>
					<del>_</del>
		<del> </del>			
	<del></del>				
	<del> </del>				
Total (Col.)	(b) must equal Form 990, Part X, col (B) line 12.)				-
Part VI	II Investments - Program Related.	See Form 990 Part X	line 13		
	(a) Description of investment type	(b) Book value		(c) Method of valua	
<u>-</u>					
	<del></del>				······································
-					
				··· = · ·	
					<del></del>
	(b) must equal Form 990, Part X, col (B) line 13.)	1-			, , ,
Part IX	<u> </u>	e 15. ) Description		<del></del>	(b) Book value
	, (a,	Description			(b) Book value
				· · · · · · · · · · · · · · · · · · ·	
					<del>.</del>
		<del></del>			
		· · · · · ·			
	lumn (b) must equal Form 990, Part X, col (B) lin		<del></del>		<u> </u>
Part X	Other Liabilities. See Form 990, Part X	, line 25.	(h) A	T	
1.	(a) Description of liability		(b) Amount	-	•
	COME taxes TAX PAYABLE		9,352.		
SALES	_ TRA FATABLE		9,332.		
	<u> </u>			1	
				1	
				†	
				1	
				1	
				1	
				1	
Total, (Co	lumn (b) must equal Form 990, Part X, col (B) lir	ne 25)	9,352.	]	

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. 932053 02-01-10

	dule D (Form 990) 2009 SILVER SPURS CLUB, INC.				59-111	1474 Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Audit	ed Fina	ancial S	Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1_1_		
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3		
4	Net unrealized gains (losses) on investments			4		
5	Donated services and use of facilities			5		
6	Investment expenses			6		
7	Pnor penod 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		iah Da	10	Dotum	
	Reconciliation of Revenue per Audited Financial Stateme	HILS AA	illi nev	renue p	····	
1	Total revenue, gains, and other support per audited financial statements				1	<del></del>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	الما	1			
a	Net unrealized gains on investments	2a				
b	Donated services and use of facilities	2b				
С	Recovenes of prior year grants	2c				
d	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 Vill, line 12, but not on line 1:		1		7.2	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4b				
С	Add lines 4a and 4b				4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	V	Mith Ex		5	
	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents v	VILLI EX	penses		
1	Total expenses and losses per audited financial statements				1 2	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1	l			
a	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
C	Other losses	2c			```	
d	Other (Describe in Part XIV.)	2d	<u> </u>			
е	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:	1 9	1		- J	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4b	l			
_C	Add lines 4a and 4b				4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)				5	<u> </u>
		II less s	10.000	Dod N	lines the search Obj. D	ant V. Inna. 4: David
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II					
X, III	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp	olete tris	s part to	provide a	iny additional infol	mation.
					-	
						·
					<del></del> -	
						<del> </del>
					<del></del>	

SCHEDULE (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047

١,

Open to Public

Employer identification number 59-1111474

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

INC.

SILVER SPURS CLUB,

	[ 	A Yes No	V, line 21, for any	•	(h) Purpose of grant or assistance					Schedule I (Form 990) 2009
	istance, and the select		izations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	(Form 99U) if additional	(g) Description of non-cash assistance					
	ty for the grants or ass		Janization answered "Y	art iv and schedule I-I	(f) Method of valuation (book, FMV, appraisal, other)					
	grantees' eligibilit	o to	Complete if the org	nan \$5,000. Use P	(e) Amount of non-cash assistance					
	or assistance, the	etal Lode at sparie	e United States. (	t received more to	(d) Amount of cash grant					for Form 990.
	amount of the grants	torse to consolitation	d Organizations in th	box if no one recipie	(c) IRC section if applicable				ganizations	see the Instructions
nd Assistance	o substantiate the	stance?	Governments and	55,000 Check this	(b) EIN				nd government or	ction Act Notice,
Rent   General Information on Grants and Assistance	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	criteria used to award the grants or assistance?	art III	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part in and Schedule 1-1 (Form 990) if additional space is needed	1 (a) Name and address of organization or government				2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations	a

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Page 2

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Schedule I (Form 990) 2009 SILVER SPURS CLUB, INC.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(f) Description of non-cash assistance									
(e) Method of valuation (book, FMV, appraisal, other)				additional information					
(d) Amount of non- cash assistance		1		line 2, and any other				:	
(c) Amount of cash grant				n required in Part I,					
(b) Number of recipients				le the information					
(a) Type of grant or assistance				Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information					

#### SCHEDULE O (Form 990)

#### Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service 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

Name of the organization

SILVER SPURS CLUB, INC.

Employer identification number 59-1111474

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

LARGEST RODEO EAST OF THE MISSISSIPPI AND IS ANNUALLY RANKED AMONG THE

TOP 50 EVENTS SANCTIONED BY THE PROFESSIONAL RODEO COWBOYS ASSOCIATION.

PRESENTLY, THE SILVER SPURS CLUB HAS 361 MEMBERS, OF WHICH 45 ARE CLUB

FOUNDERS AND MANY ARE STILL PERFORMING IMPORTANT ROLES IN THE CLUB AND

THE COMMUNITY. ALTHOUGH THE RODEO HAS GROWN INTO A LARGE BUSINSESS AS

ONE OF OSCEOLA COUNTY'S PREMIER EVENTS, THE WORK CONTINUES TO BE DONE

BY CLUB MEMBERS, THEIR FAMILIES, AND VOLUNTEERS. THE SILVER SPURS

RIDING CLUB, ALONG WITH ITS UNCOMPROMISING LOVE OF ANIMALS, LAND, AND

THE OUTDOORS, IS PRESERVING AN AMERICAN TRADITION THAT HAS BEEN PASSED

DOWN FOR GENERATIONS.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS REVIEWED BY THE PRESIDENT OF THE ORGANIZATION.

FORM 990, PART VI, SECTION B, LINE 12C: EACH DIRECTOR, PRINCIPAL OFFICER

AND MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED POWERS ANNUALLY

SIGNS A STATEMENT WHICH AFFIRMS SUCH PERSON HAS RECEIVED A COPY OF THE

CONFLICTS OF INTEREST POLICY, HAS READ AND UNDERSTANDS THE POLICY, HAS

AGREED TO COMPLY WITH THE POLICY, AND UNDERSTANDS THE ORGANIZATION IS

CHARITABLE AND IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST

ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS

TAX-EXEMPT PURPOSES. IN ADDITION, TO ENSURE THE ORGANIZATION OPERATES IN A

MANNER CONSISTENT WITH CHARITABLE PURPOSES AND DOES NOT ENGAGE IN

ACTIVITIES THAT COULD JEOPARDIZE ITS TAX-EXEMPT STATUS, PERIODIC REVIEWS

SHALL BE CONDUCTED.

#### SCHEDULE O (Form 990)

\* ,

### **Supplemental Information to Form 990**

Department of the Treasury Internal Revenue Service 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

Name of the organization

SILVER SPURS CLUB, INC.

Employer identification number 59-1111474

FORM	990,	PART	VI,	SECT	rion	В,	LINE	15:	COMPEN	SATI	ON IS	BROUG	ЭНТ	TO I	HE	
GOVER	NING	BOAR	D BY	THE	сом	MIT	ree.	THE	GOVERN	ING 1	BOARD	THEN	MAK	ES A	1	
DECIS	ION V	VITH '	THE (	GENEF	RAL I	мемі	BERSH:	IP G	IVING F	INAL	APPRO	OVAL.				
FORM	990,	PART	VI,	SECT	rion	C,	LINE	19:	COPIES	ARE	AVAII	LABLE	то	THE	PUBLI	C
UPON I	REQUI	EST.														
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	<del>.</del>															

## 4562

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

## Depreciation and Amortization (Including Information on Listed Property)

Including information on Listed Pro
 See separate instructions.
 ► Attach to your

Business or activity to which this form relates

OMB No 1545-0172 2009

Attachment Sequence No 67 Identifying number

SILVER SPURS CLUB, INC.

FORM 990 PAGE 10

990

59-1111474

P	art   Election To Expense Certain Property	Under Section 1	79 Note: If yo	u have any list	ed pro	operty,	complete Pa	rt V b	efore y	ou complete Part I.
_	Maximum amount See the instructions f	or a higher limit	for certain b	usinesses					1	250,000.
	Total cost of section 179 property placed	•							2	
	Threshold cost of section 179 property b	,		•					3	800,000.
4	Reduction in limitation Subtract line 3 fro			er -O-					4	<del></del>
5	Dollar limitation for tax year Subtract line 4 from line 1		•		ınstruct	ions			5	
6	(a) Description of prop	-		(b) Cost (busine			(c) Elec	ted cos	:	
					•					
7	Listed property. Enter the amount from li	ne 29				7				
	Total elected cost of section 179 proper		sın column (d	c), lines 6 and	7 '				8	
	Tentative deduction. Enter the smaller of	•		-,,					9	
	Carryover of disallowed deduction from I		008 Form 45	62					10	
	Business income limitation. Enter the sm	•			o) or li	ne 5			11	
	Section 179 expense deduction. Add line		•		•				12	
	Carryover of disallowed deduction to 20	•			<b>•</b>	13			<u> </u>	
	te: Do not use Part II or Part III below for I									· · · · · · · · · · · · · · · · · · ·
P	art II Special Depreciation Allowan	ce and Other D	epreciation	(Do not includ	le liste	ed prop	perty.)			
	Special depreciation allowance for qualif			·		<del></del>			1	
•	the tax year	, (		- p p , , p			<b>-</b>		14	
15	Property subject to section 168(f)(1) elec	tion							15	
	Other depreciation (including ACRS)								16	19,498.
	art III   MACRS Depreciation (Do not	include listed pr	operty)(See	nstructions )	•					· · · · · · · · · · · · · · · · · · ·
		<del></del>	Se	ection A		-				<del> </del>
17	MACRS deductions for assets placed in	service in tax ye	ears beginnir	ng before 2009	)				17	4,737.
	If you are electing to group any assets placed in service	•	•	•		heck here	• ▶ [			*
	Section B - Assets F							ciatio	n Syst	em
	(a) Classification of property	(b) Month and year placed in service	(business/ii	r depreciation nvestment use instructions)		Recovery period	(e) Convent	on (f)	Method	(g) Depreciation deduction
198	a 3-year property							$\top$		
	b 5-year property									
	c 7-year property							_		
	d 10-year property						1	$\top$		
	e 15-year property						· · · · · · ·			
_1	<del></del>						1			
_	g 25-year property				2	5 yrs.		T	S/L	
		/			_	'.5 yrs.	ММ	T	S/L	
	h Residential rental property	1				.5 yrs.			S/L	
_		06/10	8	49,815.		9 yrs.	MM	$\neg$	S/L	908.
i	i Nonresidential real property	/					ММ		S/L	
	Section C - Assets PI	aced in Service	During 200	9 Tax Year Us	ing th	ne Alte	rnative Dep	reciat	ion Sys	stem
20	a Class life								S/L	
	b 12-year				1	2 yrs.		$\top$	S/L	
_	c 40-year	,				0 yrs.	MM		S/L	
P	Part IV Summary (See instructions.)					-		-		<del></del>
21	Listed property. Enter amount from line	28							21	-
	Listed property. Litter amount nominite								<b>—</b>	<del> </del>
	• •	4 through 17, lin	nes 19 and 2	0 in column (a)	, and	line 21				
	Total. Add amounts from line 12, lines 1	-							22	25,143.
22	• •	of your return. P	artnerships a	and S corporat					22	25,143.

Form 4562 (2009) SILVER SPURS CLUB, INC. 59-1111474 Page 2 Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, completeonly 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? 」Yes J No (b) Date (i) Elected (c) (e) (f) (a) Type of property (g) (d) Business/ investment use percentage Basis for depre Cost or Recovery Method/ Depreciation placed in (business/investment section 179 (list vehicles first ) other basis period Convention deduction service use only) cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25 26 Property used more than 50% in a qualified business use: % % 27 Property used 50% or less in a qualified business use:

% %

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1

%

29

S/L ·

S/L ·

S/L -

28

#### Section B - Information on Use of Vehicles

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

30	Total business/investment miles driven during the	(a Veh		(b Veh	-	(c Veh		(d) Vehicle		(e) Vehicle		(1 Veh	-
31	year (do not include commuting miles)  Total commuting miles driven during the year				-			·					
	Total other personal (noncommuting) miles				• •								
33	Total miles driven during the year. Add lines 30 through 32	<u>-</u>											
34	Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35	Was the vehicle used primarily by a more than 5% owner or related person?												
36	ls another vehicle available for personal use?		_										

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

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

37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	Yes	<u>No</u>
	employees?		
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your		
	employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39	Do you treat all use of vehicles by employees as personal use?		
40	Do you provide more than five vehicles to your employees, obtain information from your employees about		
	the use of the vehicles, and retain the information received?		
41	Do you meet the requirements concerning qualified automobile demonstration use?		
	Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.		

Part VI	Amortization					
	(a) Description of costs	(b) Date amortization begins	(C) Amortizable amount	(d) Code section	(e) Amortization period or percentag	(f) Amortization for this year
42 Amort	ization of costs that begins during y	our 2009 tax year:				
					1	
43 Amort	tization of costs that began before ye	our 2009 tax year			4	3
44 Total.	Add amounts in column (f). See the	instructions for whe	ere to report		4	4

#### Form **8868**

(Rev. January 2011)
Department of the Treasury
Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

•	are filing for an Automatic 3-Month Extension, comple are filing for an Additional (Not Automatic) 3-Month Ex	form).	Form).					
-	complete Part II unless you have already been granted a				m 8868.			
	nic filing (e-file). You can electronically file Form 8868 if y					oration		
	to file Form 990-T), or an additional (not automatic) 3-mo			•	•			
	o file any of the forms listed in Part I or Part II with the ex				•			
	I Benefit Contracts, which must be sent to the IRS in pap	•	•					
	w irs gov/efile and click on e-file for Chanties & Nonprofits		(000 117011 20 110110), 11 07 11101 0 0 0 1 1110			····,		
Part I			bmit original (no copies needed)	_	<del></del>			
	ration required to file Form 990-T and requesting an autor			nlete				
Part I or			one of the second of the secon	pioto	•	. 🗇		
	corporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to request ar	exten	sion of time			
to file in	come tax returns.			1				
Type or	Name of exempt organization	Employer identification number						
print	SILVER SPURS CLUB, INC.	59-1111474						
File by the due date fo filing your	date for Number, street, and room or suite no. If a P.O. box, see instructions.							
return See instruction	In See							
Enter th	e Return code for the return that this application is for (file	e a separa	te application for each return)			01		
Applica	tion	Return	Application	Application				
ls For		Code	Is For			Return Code		
Form 99	0	01	Form 990-T (corporation)			07		
Form 990-BL		02	Form 1041-A					
Form 990-EZ		03	Form 4720					
Form 990-PF		04	Form 5227			10		
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 6069			11		
Form 990-T (trust other than above)		06	Form 8870			12		
	HEATHER BLANDFO		1 01111 0070			1		
	books are in the care of $\blacktriangleright$ 1875 E. IRLO Blocks hone No. $\blacktriangleright$ 407-847-4052			SIM	MEE, FL 34	744		
-		4L - 11-	FAX No. >					
	organization does not have an office or place of business							
	s is for a Group Return, enter the organization's four digit							
box 🕨	If it is for part of the group, check this box				ers the extension is	for.		
_	equest an automatic 3-month (6 months for a corporation FEBRUARY 15, 2011, to file the exemp				The extension			
ıs	for the organization's return for:							
	calendar year or		TID: 20 2010					
•	X tax year beginning JUL 1, 2009	, an	d ending JUN 30, 2010		<u> </u>			
2 If	the tax year entered in line 1 is for less than 12 months, o  Change in accounting period	heck reas	on: Initial return Fina	al retur	n			
	this application is for Form 990-BL, 990-PF, 990-T, 4720, onrefundable credits. See instructions.	or 6069, e	nter the tentative tax, less any	3a	\$	0.		
_	this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			<u>_</u>		
	stimated tax payments made. Include any prior year over	_		3b	\$	0.		
_	alance due. Subtract line 3b from line 3a. Include your pa							
	using EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.		
	. If you are going to make an electronic fund withdrawal			8879-	EO for payment ins	tructions.		

orm 8868 (Rev. 1-2011)					Page 2				
If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this bo	X	<b>&gt;</b>	X				
lote: Only complete Part II if you have already been granted an a	utomatic	3-month extension on a previously filed	Form I	3868.					
If you are filing for an Automatic 3-Month Extension, complet	te only Pa	rt I (on page 1).							
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the original (no c	opies n	eeded).					
Type or Name of exempt organization	Name of exempt organization								
rint SILVER SPURS CLUB, INC.	5	9-1111474							
Number, street, and room or suite no. If a P.O. box, see instructions.  P.O. BOX 421909									
City, town or post office, state, and ZIP code. For a formstructions  KISSIMMEE, FL 34742-1909	oreign add	dress, see instructions.							
RIDDIMINI, III 34,42 1303		<del></del>							
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			0 1				
Application	Return	Application			Return				
s For		Is For	587	201 E 2 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	Code				
Form 990			gr.		新混合?				
-orm 990-BL		Form 1041-A			08				
Form 990-EZ		Form 4720			09				
Form 990-PF		Form 5227		***	10				
Form 990-T (sec 401(a) or 408(a) trust)		Form 6069			11				
Form 990-T (trust other than above)	06	Form 8870			12				
STOP! Do not complete Part II if you were not aiready granted					<del></del>				
The books are in the care of 1875 E. IRLO BI	RONSO		SSIM	MEE, FL 34	./44				
Telephone No. ► 407-847-4052		FAX No. >		<del></del>					
If the organization does not have an office or place of business				<b>&gt;</b>					
If this is for a Group Return, enter the organization's four digit									
pox 🕨 📖 . If it is for part of the group, check this box 🕨 📖			l memb	ers the extension is	for.				
4 I request an additional 3-month extension of time until		15, 2011							
5 For calendar year, or other tax year beginning	JUL 1	, 2009 , and ending	JUN	30, 2010					
6 If the tax year entered in line 5 is for less than 12 months, c			Final r	eturn					
Change in accounting period	Change in accounting period								
7 State in detail why you need the extension	State in detail why you need the extension								
ADDITIONAL TIME IS NEEDED TO 1	FILE A	AN ACCURATE AND COMI	LET	E TAX RETU	RN.				
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any				0				
nonrefundable credits. See instructions.	<del></del>		8a	\$	0.				
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	•		13						
tax payments made. Include any prior year overpayment all	lowed as a	a credit and any amount paid	\ <u>`</u>		^				
previously with Form 8868.			8b	\$	0.				
c Balance due. Subtract line 8b from line 8a. Include your pa	•	th this form, if required, by using	1		•				
EFTPS (Electronic Federal Tax Payment System). See instr			8c	\$	0.				
_		nd Verification							
Inder penaities of perjury, I declare that I have examined this form, includ t is true, correct, and complete, and that I am authorized to prepare this fo	ing accomp orm.	panying schedules and statements, and to th	e best o	f my knowledge and b	elief,				
2 2	C.P.	7	Dat-	<b>▶</b> 02/08/2	011				
Illie - Illie	<u> </u>	<u> </u>	vate	<b>-</b> 02/_00/2	·				

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