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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) The organization may have to use a copy of this return to satisfy state reporting requirements	OMB No 1545-0047 2010 Open to Public Inspection
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A For the 2010 calendar year, or tax year beginning 01-01-2010 and ending 12-31-2010		
B Check if applicable <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization TELLURIDE MOUNTAIN VILLAGE OWNERS ASSOCIATION Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 113 LOST CREEK LANE NO A City or town, state or country, and ZIP + 4 MOUNTAIN VILLAGE, CO 81435	D Employer identification number 84-0955189 E Telephone number (970) 728-1904 G Gross receipts \$ 6,079,389
	F Name and address of principal officer JONATHAN GREENSPAN 113 LOST CREEK LANE NO A MOUNTAIN VILLAGE, CO 81435	H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶
	I Tax-exempt status <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (4) ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
	J Website: ▶ WWW.TMVOA.ORG	
	K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
L Year of formation 1984		M State of legal domicile CO

Part I		Summary	
Activities & Governance	1 Briefly describe the organization’s mission or most significant activities TO PRESERVE AND PROMOTE A VITAL RESORT COMMUNITY FOR ITS MEMBERS, WITH ATTENTION TO CREATING A SUSTAINABLE VILLAGE WITH A VIBRANT ECONOMY PRIMARY AREAS OF FOCUS INCLUDE EVENT SPONSORSHIP, GONDOLA FUNDING, GRANT AWARDS, COMMUNITY RESEARCH, AND GUEST SERVICES FUNDING		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	7
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	3
	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	5
	6 Total number of volunteers (estimate if necessary)	6	0
	7a	0	
	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	0	0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,610,502	5,525,177
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	202,559	225,776
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	392,227	181,880
		5,205,288	5,932,833
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	601,134	95,000
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	348,995	287,543
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) <input type="checkbox"/> 0		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	6,530,693	4,415,961
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	7,480,822	4,798,504
	19 Revenue less expenses Subtract line 18 from line 12	-2,275,534	1,134,329
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	19,683,473	20,646,938
	21 Total liabilities (Part X, line 26)	1,544,726	1,527,589
	22 Net assets or fund balances Subtract line 21 from line 20	18,138,747	19,119,349

Part II	Signature Block
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	

Sign Here	<div>***** Signature of officer</div>	2011-05-10 Date		
	<div>JONATHAN GREENSPAN PRESIDENT Type or print name and title</div>			
Paid Preparer Use Only	Print/Type preparer's name DANIEL S VOGEL	Preparer's signature DANIEL S VOGEL	Date	Check if self-employed <input type="checkbox"/> PTIN
	Firm's name ▶ DALBY WENDLAND & CO PC			Firm's EIN ▶
	Firm's address ▶ P O BOX 430 GRAND JUNCTION, CO 81502			Phone no ▶ (970) 243-1921

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

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☐

1

Briefly describe the organization's mission

TO PRESERVE AND PROMOTE A VITAL RESORT COMMUNITY FOR ITS MEMBERS, WITH ATTENTION TO CREATING A SUSTAINABLE VILLAGE WITH A VIBRANT ECONOMY PRIMARY AREAS OF FOCUS INCLUDE EVENT SPONSORSHIP, GONDOLA FUNDING, GRANT AWARDS, COMMUNITY RESEARCH, AND GUEST SERVICES FUNDING

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 3,312,635 including grants of \$) (Revenue \$)

TMVOA IS CONTRACTUALLY OBLIGATED TO FUND THE OPERATIONS AND MAINTENANCE COSTS OF THE FREE PUBLIC GONDOLA SERVICE BETWEEN THE TOWN OF MOUNTAIN VILLAGE AND THE TOWN OF TELLURIDE, AND THE REMOTE PARKING LOT IN THE TOWN OF MOUNTAIN VILLAGE TO THE TOWN OF MOUNTAIN VILLAGE CENTER ADDITIONALLY, TMVOA IS CONTRACTUALLY OBLIGATED TO FUND THE OPERATIONS AND MAINTENANCE COSTS OF THE FREE PUBLIC CHONDOLA SERVICE BETWEEN THE MEADOWS AND THE TOWN OF MOUNTAIN VILLAGE CENTER THE PRIMARY PURPOSES OF THE GONDOLA AND CHONDOLA ARE TO PROVIDE FREE PUBLIC TRANSPORTATION LINKS BETWEEN THE TWO TOWNS

4b

(Code) (Expenses \$ 513,386 including grants of \$ 95,000) (Revenue \$)

TMVOA FUNDS A GUEST SERVICE PROGRAM THAT PROVIDES INFORMATION AND ASSISTANCE TO THE PUBLIC REGARDING THE SERVICES, FACILITIES AND AMENITIES WITHIN AND RELATED TO TELLURIDE MOUNTAIN VILLAGE TMVOA PROVIDES FUNDING FOR A GROUP SALES PROGRAM THAT IS INTENDED TO INCREASE VISITORS AND GUESTS IN THE TELLURIDE MOUNTAIN VILLAGE IN ORDER TO INCREASE ECONOMIC ACTIVITY, VITALITY AND SUSTAINABILITY TMVOA PROVIDES GRANT FUNDING TO NONPROFIT ENTITIES WHO PROVIDE EVENTS, ACTIVITIES AND PROGRAMS BENEFITING THE PUBLIC AND THE TELLURIDE MOUNTAIN VILLAGE SUCH AS MOUNTAINFILM, SKI AND SNOWBOARD CLUB AND TELLURIDE AIDS BENEFIT

4c

(Code) (Expenses \$ 219,531 including grants of \$) (Revenue \$ 13,777)

TMVOA SPONSORS AND FUNDS EVENTS AND ACTIVITIES WITHIN THE TELLURIDE MOUNTAIN VILLAGE WHICH ARE OPEN TO THE PUBLIC AND ARE INTENDED TO FOSTER COMMUNITY GATHERINGS AND GENERATE ECONOMIC ACTIVITY, VITALITY AND SUSTAINABILITY, INCLUDING WITHOUT LIMITATION THE SUNSET CONCERT SERIES, TELLURIDE FESTIVAL OF THE ARTS, TELLURIDE GAY SKI WEEK AND NEW YEARS EVE FIREWORKS

4d

Other program services (Describe in Schedule O) See also Additional Data for Description














(Expenses \$ 70,987 including grants of \$) (Revenue \$)

4e

Total program service expenses \$ 4,116,539

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2	No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	No
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? <i>If "Yes," complete Schedule D, Part I</i> 	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i> 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> 	9	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> 	10	No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> 	11a	Yes
b	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? <i>If "Yes," complete Schedule D, Part VII.</i> 	11b	No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> 	11c	No
d	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? <i>If "Yes," complete Schedule D, Part IX.</i> 	11d	Yes
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 	11e	Yes
f	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 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i> 	11f	No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> 	12a	Yes
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i> 	12b	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	No
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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV

Checklist of Required Schedules (continued)

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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27	Yes	
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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/>			
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	15	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	Yes
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.	5	
2b	If at least 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 (see instructions).		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	No
4b	If "Yes," enter the name of the foreign country: _____ See instructions for 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	No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
5c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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	No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).			
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	No
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
7d	If "Yes," indicate the number of Forms 8282 filed during the year.		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9a	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a	
9b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter			
10a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11 Section 501(c)(12) organizations. Enter			
11a	Gross income from members or shareholders.	11a	
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
13c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	7		
b	Enter the number of voting members included in line 1a, above, who are independent	3		
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?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	15b		No
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure	
17	List the States with which a copy of this Form 990 is required to be filed
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. BRIANNE HOVEY 113 LOST CREEK LANE SUITE A MOUNTAIN VILLAGE, CO 81435 (970) 728-1904

Check if Schedule O contains a response to any question in this Part VII ☐

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

Form **990** (2010)

Part VII

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization	0
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Section B. Independent Contractors

Form **990** (2010)

Part VIII

Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f					
	Program Service Revenue			Business Code			
2a		REAL EST TRANSFR ASSMT	531390	4,322,698	4,322,698		
b		OWNER ASSESSMENTS	531390	1,202,479	1,202,479		
c							
d							
e							
f		All other program service revenue					
g		Total. Add lines 2a-2f		5,525,177			
Other Revenue		3		Investment income (including dividends, interest and other similar amounts)			
	4		Income from investment of tax-exempt bond proceeds . .	225,776			225,776
	5		Royalties				
	6a	(i) Real		(ii) Personal	181,198		181,198
		327,754					
		146,556					
		181,198					
	b		Less rental expenses				
	c		Rental income or (loss)				
	d		Net rental income or (loss)				
	7a	(i) Securities		(ii) Other			
	b		Less cost or other basis and sales expenses				
	c		Gain or (loss)				
	d		Net gain or (loss)				
	8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a			
	b		Less direct expenses	b			
	c		Net income or (loss) from fundraising events . .				
	9a		Gross income from gaming activities See Part IV, line 19 . .	a			
	b		Less direct expenses	b			
	c		Net income or (loss) from gaming activities . .				
10a		Gross sales of inventory, less returns and allowances . .	a				
b		Less cost of goods sold	b				
c		Net income or (loss) from sales of inventory . .					
		Miscellaneous Revenue	Business Code				
11a		MISCELLANEOUS	900099	682	682		
b							
c							
d		All other revenue					
e		Total. Add lines 11a-11d		682			
12		Total revenue. See Instructions		5,932,833	5,525,859	0	406,974

Part IX

Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	95,000	95,000		
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	61,161		61,161	
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	170,168	65,000	105,168	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	10,347	3,900	6,447	
9	Other employee benefits	28,354	9,451	18,903	
10	Payroll taxes	17,513	6,774	10,739	
a	Fees for services (non-employees)				
	Management				
b	Legal	154,033	22,617	131,416	
c	Accounting	33,879		33,879	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	81,565		81,565	
g	Other	15,017		15,017	
12	Advertising and promotion				
13	Office expenses	19,418		19,418	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	46,398	46,398		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	110,832		110,832	
23	Insurance	11,171	1,764	9,407	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	GONDOLA OPERATIONS	3,203,713	3,203,713		
b	SPECIAL EVENTS	219,531	219,531		
c	GUEST SERVICES PROGRAM	180,673	180,673		
d	GROUP SALES FUNDING	168,738	168,738		
e	ASSOCIATION DUES	52,457		52,457	
f	All other expenses	118,536	92,980	25,556	
25	Total functional expenses. Add lines 1 through 24f	4,798,504	4,116,539	681,965	0
26	Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			676,063	1	542,134
	2	Savings and temporary cash investments			10,432	2	1,466,227
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			101,971	4	162,842
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			127,891	9	92,887
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	7,006,205			
	b	Less: accumulated depreciation	10b	1,745,374	5,476,676	10c	5,260,831
	11	Investments—publicly traded securities			12,033,742	11	11,875,293
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			1,256,698	15	1,246,724
	16	Total assets. Add lines 1 through 15 (must equal line 34)			19,683,473	16	20,646,938
Liabilities	17	Accounts payable and accrued expenses			697,862	17	702,895
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities. Complete Part X of Schedule D			846,864	25	824,694
	26	Total liabilities. Add lines 17 through 25			1,544,726	26	1,527,589
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			18,138,747	27	19,119,349
	28	Temporarily restricted net assets				28	
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			18,138,747	33	19,119,349
	34	Total liabilities and net assets/fund balances			19,683,473	34	20,646,938

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,932,833
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,798,504
3	Revenue less expenses Subtract line 2 from line 1	3	1,134,329
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	18,138,747
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-153,727
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	19,119,349

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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 separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
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		

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

2010

Open to Public
Inspection

Name of the organization TELLURIDE MOUNTAIN VILLAGE OWNERS ASSOCIATION	Employer identification number 84-0955189
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(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 advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit	<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically importantly land area
☐ Preservation of a certified historic structure

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
2a	Total number of conservation easements
2b	Total acreage restricted by conservation easements
2c	Number of conservation easements on a certified historic structure included in (a)
2d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► _____

4

Number of states where property subject to conservation easement is located ► _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it 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 the year ► \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization’s financial statements that describes the organization’s accounting for conservation easements

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

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, 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

► \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

► \$ _____

b

Assets included in Form 990, Part X

► \$ _____

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance				
b	Contributions				
c	Investment earnings or losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

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

(i)

unrelated organizations

(ii)

related organizations

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

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

Part VI

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

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		396,722		396,722
b Buildings		5,987,050	1,407,560	4,579,490
c Leasehold improvements		333,959	156,450	177,509
d Equipment		52,400	42,731	9,669
e Other		236,074	138,633	97,441
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				5,260,831

Part XI

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	5,932,833
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,798,504
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,134,329
4	Net unrealized gains (losses) on investments	4	-153,727
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 - 8	9	-153,727
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	980,602

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	6,093,167
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	13,778
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	146,556
e	Add lines 2a through 2d	2e	160,334
3	Subtract line 2e from line 1	3	5,932,833
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	5,932,833

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	4,958,838
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	13,778
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	146,556
e	Add lines 2a through 2d	2e	160,334
3	Subtract line 2e from line 1	3	4,798,504
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	4,798,504

Part XIV

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS		DIRECT RENTAL EXPENSES
PART XIII, LINE 2D - OTHER ADJUSTMENTS		DIRECT RENTAL EXPENSES

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
TELLURIDE MOUNTAIN VILLAGE OWNERS ASSOCIATION

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

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

OMB No 1545-0047

2010

Open to Public
Inspection

Employer identification number
84-0955189

Part I

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?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed. ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) MOUNTAINFILM LTDPO BOX 1088 TELLURIDE, CO 81435	84-1271056	501(C)(3)	20,000				SPONSORSHIP OF FESTIVAL EVENTS IN MV
(2) TELLURIDE AIDS BENEFITPO BOX 3819 TELLURIDE, CO 81435	84-1553698	501(C)(3)	15,000				SUPPORT OF TAB EVENT IN MV
(3) NATIONAL FILM PRESERVE LTD800 JONES STREET BERKELEY, CA 94710	23-7426302	501(C)(3)	30,000				GONDOLA COSTS FOR BLUEGRASS FESTIVALSUPPORT OF FESTIVAL EVENTS IN MV
(4) TELLURIDE SOCIETY FOR JAZZPO BOX 2132 TELLURIDE, CO 81435	84-1171778	501(C)(3)	5,000				SUPPORT OF FESTIVAL EVENTS IN MV
(5) TELLURIDE MOUNTAIN VILLAGE TENNIS CLUBPO BOX 2437 TELLURIDE, CO 81435	27-5255512	501(C)(4)	15,000				CONTRIBUTION TO RESURFACING OF TENNIS COURTS
(6) TELLURIDE SKI & SNOWBOARD CLUBPO BOX 2824 TELLURIDE, CO 81435	84-1152879	501(C)(3)	10,000				SUPPORT OF TSSC RACES THROUGHOUT WINTER

2

Enter total number of section 501(c)(3) and government organizations

6

3

Enter total number of other organizations

0

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 Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
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Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
TELLURIDE MOUNTAIN VILLAGE OWNERS ASSOCIATION

Employer identification number
84-0955189

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ▶ \$ _____										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance
(1) TELLURIDE SKI AND GOLF LLC	3 BOARD MEMBERS ARE OFFICERS OF TSG	40,000

Part IV

Business Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

Part V

Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
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Additional Data

Software ID:

Software Version:

EIN: 84-0955189

Name: TELLURIDE MOUNTAIN VILLAGE OWNERS ASSOCIATION

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction \$	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
TELLURIDE SKI & GOLF LLC (TSG)	3 BOARD MEMBERS ARE OFFICERS OF TSG	3,992	SKI PASSES FOR EMPLOYEES		No
TELLURIDE SKI & GOLF LLC (TSG)	3 BOARD MEMBERS ARE OFFICERS OF TSG	78,636	ASSESSMENT PAID TO TMVOA FOR ALL TSG OWNED PROPERTIES IN MOUNTAIN VILLAGE		No
TELLURIDE SKI & GOLF LLC (TSG)	3 BOARD MEMBERS ARE OFFICERS OF TSG	5,300	SUNSET CONCERT SERIES MAINTENANCE		No
TELLURIDE SKI & GOLF LLC (TSG)	3 BOARD MEMBERS ARE OFFICERS OF TSG	3,041,911	GONDOLA OPERATIONS AND MAINTENANCE		No
					No
TELLURIDE SKI & GOLF LLC (TSG)	3 BOARD MEMBERS ARE OFFICERS OF TSG	158,443	CHONDOLA OPERATIONS AND MAINTENANCE		No
TELLURIDE SKI & GOLF LLC (TSG)	3 BOARD MEMBERS ARE OFFICERS OF TSG	0	OPERATIONS AND MANAGEMENT OF STATION RECREATION		No
TELLURIDE SKI & GOLF LLC (TSG)	3 BOARD MEMBERS ARE OFFICERS OF TSG	20,000	THREE PARTY AGREEMENT INCLUDING TSG AND TOWN OF MOUNTAIN VILLAGE TO FUND AND MANAGE PARKING ON TOWN OF MOUNTAIN VILLAGE STREETS AND FACILITIES, TMVOA REMOVED FROM AGREEMENT IN MID YEAR 2010, FUNDING IS IN-KIND		No
THE PEAKS RESORT	1 BOARD MEMBER IS A MEMBER OF THE OWNERSHIP GROUP	65,863	PEAKS RESORT ASSESSMENTS PAID TO TMVOA FOR PROPERTY OWNED BY THE PEAKS RESORT		No

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization TELLURIDE MOUNTAIN VILLAGE OWNERS ASSOCIATION	Employer identification number 84-0955189
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Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2		BUSINESS RELATIONSHIPS AMONG DIRECTORS AND OFFICERS HAVE BEEN DISCLOSED BY TMVOA BOARD MEMBERS AS FOLLOWS DAVE RILEY, JEFF PROTEAU AND DANIEL ZEMKE (CLASS D BOARD MEMBERS) ARE ALL EMPLOYED BY AND OFFICERS OF TELLURIDE SKI & GOLF, LLC (TSG) TSG HAS CONTRACTUAL AND OTHER RELATIONSHIPS WITH THE PEAKS RESORT, FOR WHICH KEVIN JONES (CLASS B BOARD MEMBER) IS A MEMBER OF THE OWNERSHIP GROUP TSG HAS CONTRACTUAL AND OTHER RELATIONSHIPS WITH SUNRISE INC, FOR WHICH JONATHAN GREENSPAN (CLASS C BOARD MEMBER) IS THE OWNER TSG HAS CONTRACTUAL AND OTHER RELATIONSHIPS WITH THE TOWN OF MOUNTAIN VILLAGE, FOR WHICH JONATHAN GREENSPAN (CLASS C BOARD MEMBER) IS ON THE TOWN COUNCIL SUNRISE INC PROVIDES SNOW REMOVAL TO DAVE RILEY'S HOME

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		TMVOA HAS FOUR CLASSES OF MEMBERSHIP CLASS A RESIDENTIAL, CLASS B LODGING, CLASS C COMMERCIAL, AND CLASS D MOUNTAIN SPECIAL MEMBER THERE ARE 2,468 RESIDENTIAL SITES, 830 5 LODGING SITES, AND 197 COMMERCIAL SITES THERE ARE NO SITES WITH CLASS D MOUNTAIN SPECIAL MEMBER EACH SITE WITHIN TMVOA IS CATEGORIZED INTO A SITE DEPENDING UPON THE ZONING CLASSIFICATION OF EACH SITE AS SET FORTH IN THE TOWN OF MOUNTAIN VILLAGE LAND USE CODE (EXCEPT FOR CLASS D) CLASS D IS GRANTED A SPECIAL MEMBERSHIP UNDER THE TMVOA GOVERNING DOCUMENTS

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		THE 7 MEMBERS OF THE BOARD OF DIRECTORS OF TMVOA ARE ELECTED OR APPOINTED AS FOLLOWS 2 CLASS A RESIDENTIAL DIRECTORS ARE ELECTED BY THE RESIDENTIAL CLASS EACH RESIDENTIAL SITE IS ALLOCATED ONE VOTE 1 CLASS B LODGING DIRECTOR IS ELECTED BY THE LODGING CLASS EACH LODGING SITE THAT HAS BEEN CERTIFIED FOR OCCUPANCY IS ALLOCATED ONE VOTE 1 CLASS C COMMERCIAL DIRECTOR IS ELECTED BY THE COMMERCIAL CLASS VOTES IN THE COMMERCIAL CLASS ARE ALLOCATED BY SQUARE FOOTAGE EACH 250 SQUARE FEET OF COMMERCIAL SPACE IS ALLOCATED 1 VOTE ONLY COMMERCIAL SPACE THAT HAS BEEN CONSTRUCTED AND IS OCCUPIED IS ALLOWED TO VOTE VACANT COMMERCIAL SPACE IS NOT ALLOCATED A VOTE IF A COMMERCIAL SPACE IS OCCUPIED BY A LESSEE, THE LESSEE IS ALLOCATED THE VOTE RATHER THAN THE OWNER OF THE COMMERCIAL SPACE 3 CLASS D DIRECTORS ARE APPOINTED BY TELLURIDE SKI & GOLF COMPANY, LLC

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		A REVIEW OF THE 990 IS PERFORMED BY THE FINANCE COMMITTEE AND IS THEN SENT TO THE BOARD OF DIRECTORS FOR FINAL APPROVAL BEFORE SIGNING AND MAILING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION'S ATTORNEY MONITORS THE TRANSACTIONS BEING DISCUSSED AT BOARD MEETINGS QUESTIONNAIRES ARE DISTRIBUTED TO BOARD MEMBERS TO ASSIST IN THE DETERMINATION OF THE EXISTENCE OF POSSIBLE CONFLICTS OF INTEREST

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	ALL GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS ARE POSTED ON THE WEBSITE

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -153,727

Additional Data

Software ID:
Software Version:
EIN: 84-0955189
Name: TELLURIDE MOUNTAIN VILLAGE OWNERS ASSOCIATION

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services			
(Code) (Expenses \$	70,987 including grants of \$) (Revenue \$
TMVOA PROVIDES GRANT FUNDING TO VARIOUS ENTITIES TO SUPPORT FESTIVALS AND EVENTS THAT GENERATE ECONOMIC VITALITY AND SUSTAINABILITY FOR THE GENERAL TELLURIDE COMMUNITY AND TELLURIDE MOUNTAIN VILLAGE, INDLUDING WITHOUT LIMITATION THE BLUEGRASS, BLUES AND BREWS, AND YOGA FESTIVALS			