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Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2011

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)
▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities,
and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions)
All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000
at the end of the year may use this form
▶ The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2011 calendar year, or tax year beginning **APRIL 1**, 2011, and ending **MARCH 31**, 2012

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization: **REGENCY SQUARE CLUSTER ASSOCIATION**
 Number and street (or P O box, if mail is not delivered to street address) Room/suite: **PO BOX 3115**
 City or town, state or country, and ZIP + 4: **RESTON, VA 20195-1115**

D Employer identification number: **23-7112323**
E Telephone number: **703-481-2224**
F Group Exemption Number: ▶

G Accounting Method: Cash Accrual Other (specify) ▶

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ **www.rsca-va.org**

J Tax-exempt status (check only one) – 501(c)(3) 501(c)(4) ◀ (insert no) 4947(a)(1) or 527

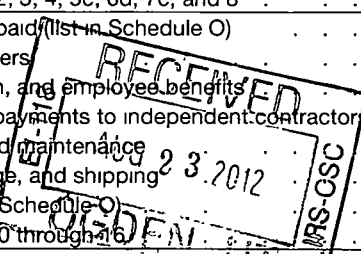
K Check if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ **103612**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.)

Check if the organization used Schedule O to respond to any question in this Part I

Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received	1			-0-
2	Program service revenue including government fees and contracts	2			100
3	Membership dues and assessments	3			102622
4	Investment income	4			890
5a	Gross amount from sale of assets other than inventory	5a			-0-
b	Less cost or other basis and sales expenses	5b			-0-
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c			-0-
6	Gaming and fundraising events				
a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a			-0-
b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b			-0-
c	Less: direct expenses from gaming and fundraising events	6c			-0-
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d			-0-
7a	Gross sales of inventory, less returns and allowances	7a			-0-
b	Less cost of goods sold	7b			-0-
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c			-0-
8	Other revenue (describe in Schedule O)	8			-0-
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9			103612
10	Grants and similar amounts paid (list in Schedule O)	10			-0-
11	Benefits paid to or for members	11			-0-
12	Salaries, other compensation, and employee benefits	12			3300
13	Professional fees and other payments to independent contractors	13			906
14	Occupancy, rent, utilities, and maintenance	14			3178
15	Printing, publications, postage, and shipping	15			227
16	Other expenses (describe in Schedule O)	16			48332
17	Total expenses. Add lines 10 through 16	17			55943
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18			47669
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19			157575
20	Other changes in net assets or fund balances (explain in Schedule O)	20			-0-
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21			205244



SCANNED SEP 17 2012

57P

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		✓

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

	Yes	No
47		

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

	Yes	No
48		

49a Did the organization make any transfers to an exempt non-charitable related organization?

	Yes	No
49a		

b If "Yes," was the related organization a section 527 organization?

	Yes	No
49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

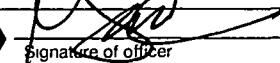
(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

52 Did the organization complete Schedule A? **Note** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ▶ Yes No

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

	AUG 14, 2012
Signature of officer	Date

 GEORGE C ROYAL TREASURER
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶	Firm's EIN ▶		Phone no ▶	
Firm's address ▶				

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

Supplemental Information to Form 990 or 990-EZ

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization
REGENCY SQUARE CLUSTER ASSOCIATION

Employer identification number
23-7112323

STATEMENT 1

LINE 16 OTHER EXPENSES

WEB SITE	\$ 219
COMMON LAND - CONTRACT.....	\$ 25,892
COMMON LAND - NON-CONTRACT.	\$ 1,195
DISPOSAL	\$ 17,461
INSURANCE	\$ 1,881
LICENSES AND PERMITS.	\$ 123
MISCELLANEOUS.	\$ 271
SNOW REMOVAL.....	\$ 1,000
STREETS MAINTENANCE	\$ 290
TOTAL OTHER EXPENSES.	\$ 48,332

STATEMENT 2

PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE

Regency Square Cluster Association is a membership organization formed in 1971 to own and maintain common green areas, streets, and sidewalks and to preserve the development's appearance. It is operated for the benefit of all the residents of the community. Owned and maintained roadways and park land are open to the general public. The Association performs no exterior maintenance of private homes.

