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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)

OMB No 1545 0047 2011

Open to Public

Inter	nal Revenue	Service		► The organization	may have to use a copy of	this return to satisfy	state reporti	ng requirem	nents		Inspection
$\overline{\mathbf{A}}$	For the 2	011 calend	dar y	ear, or tax year beginn	ing Jun 1	, 2011,	and ending	May	31	,	2012
	Check if app			Name of organization SKOI		ATING CLUE	3	-	D Employe		cation Number
	Address change Doing Business As 36-6117724							24			
	Name		$\overline{}$	Number and street (or P O box	of mail is not delivered to s	treet addr)	Room/s	uite	E Telephon	e numbe	r
	Initial r	-	& I	LOIS TODD, 24 1	REGENT WOOD D	RIVE			(847) 44	6-4586
	Termin			City, town or country			ZIP code + 4		(02)	,	
	H		NOF	RTHFIELD		IL	60093		G Gross red	reints \$	84,003.
	\vdash	ation pending		Name and address of principal	officer			H(a) Is this a	a group return		
		, -		TODD, TREASUR 24 REGEN		HETELD TI.	60093	H(b) Are all	affiliates inclu	ded?	Yes No
$\overline{}$	Tax-exem	npt status	- Person	501(c)(3) X 501(c) (7		4947(a)(1) or	527	If 'No,'	attach a list (see instru	ictions)
÷	Websit			evalleyskating		1 14047(0)(17 01	11	H(c) Group	exemption nur	nhar 🕨	
K		organization		Corporation Trust	Association Other	lı v	ear of Format		· · · · · · · · ·		al domicile IL
_		Summar		corporation Trust	Association Other) - 10	ear or roimat	OI 1,540	<u> </u>	ate or leg	al domicile III
	·			e organization's missio	n or most significant	activities Re	creatio	onal S	kating		
_	. 5	city descrit	DC (11	ic organization s missio	ir or most significant	activities Ite	STEE ST	7121 2	<u>vaciii</u> d		
Activities & Governance											
rna											
o Ve	2 Ch	eck this bo	 x ►	If the organization	discontinued its oper	ations or dispos	ed of more	than 259	% of its net	assets	-
Ğ				members of the govern						3	9
9	4 Nu	mber of inc	depe	ndent voting members	of the governing body	(Part VI, line 1t	b)			4	9
jţ.	I .			ndividuals employed in o		Part V, line 2a)			_	5	
ŧ	ı			olunteers (estimate if n	• •				L	6	0
⋖	i .			isiness revenue from Pa					-	7 a	974.
	b Ne	t unrelated	busi	iness taxable income fr	om Form 990-T, line	34			<u>. </u>	7 b	0.
								P	rior Year	0.1	Current Year
<u>o</u>	1			grants (Part VIII, line 1					18,00		20,140.
Revenue	I .	_		evenue (Part VIII, line 2	-				61,1		63,267.
ě				e (Part VIII, column (A)		11 - \			8.	55.	487.
				art VIII, column (A), line			7		00 0	00	109.
				idd lines 8 through 11 (i			14)		80,0	80.	84,003.
	13 Gra	ants and si	ımııaı	r amounts paid (Part IX	., column (A), times I	3,1,1	S)				
	14 Be	nerits paid	10 01	r for members (Part IX,	column (A), line 4)		<u> 3 </u>			-	
ø	1 5 Sa	laries, othe	er co	r for members (Part IX, mpensation, employee raising fees (Part IX, co	benefits (Part IX, cold	າເສີບໃນ _{ຕົ} ້ນໃກ່ເຮອ ວ _ິ	j'®				
Expenses				, ,	101		ا= ا				
ž.	b Tot	tal fundrais	sing e	expenses (Part IX, colu	mn (D), line 25).	SEN UT	للس				
Ш	17 Oth	ner expens	es (F	expenses (Part IX, colu Part IX, column (A), line add lines 13-17 (must ea	es 11a-11 d , 11f- 29 6)	DE VI			81,3	37.	74,566.
	18 Tot	tal expense	es. A	dd lines 13-17 (must ed	qual Part X, column	(A), line 25)			81,3	37.	74,566.
	19 Re	venue less	ехр	enses Subtract line 18	from line 12				-1,2	57.	9,437.
8 8								Beginnir	ng of Current	Year	End of Year
Assets or 1 Balancos	20 Tot	tal assets ((Part	X, line 16)					145,2		154,643.
.¶.₩.	21 Tot	tal liabilitie	s (Pa	art X, line 26)							
	22 Ne	t assets or	fund	d balances Subtract line	e 21 from line 20				145,2	06.	154,643.
Pa	rt II	Signatur	e B	lock							
,Unde	er penalties	of perjury, I de	eclare	that I have examined this retui ther than officer) is based on a	rg, including accompanying	schedules and statem	ents, and to t	he best of m	y knowledge a	and belief	, it is true, correct, and
com	plete Declar	ration of prepa	arer (o	ther than officer) is based on a	ill information of which prepa	arer has any knowled	ge				
3			<u> </u>	Jan Sign	./\				<u> </u>	√ 3.	4017
Ŝiç	gn	Signatu		,				Da	ite		
He	re			ODD, TREASURER							
<u> </u>		Type or	rprint	name and title							
-3		Print/Type p	prepare	er's name	Preparer's signature	. •	Date		Check] if P	TIN
Pa	id	JOHN C	C. 1	DIETRICH	He Dub	lin	08/17/	12	self-employe	d P	00589592
Pro	eparer	Firm's name	е	DIETRICH AND	DIETRICH, LLC					-	
`Us	e Only	Firm's addre	ess	► 9933 LAWLER A	AVE STE 521				Firm's EIN	- 36−	4470704
_	SKOKIE IL 60077 Phone no (847) 677-6305										
May	y the IRS	discuss the	ıs ret	turn with the preparer s	hown above? (see in:						X Yes No
		_		ction Act Notice, see th			TER	A0101 07	/05/11	<u> </u>	Form 990 (2011)

BAA		_		Fori	m 990	(2011)
	(Expenses \$ including grants of \$) (Revenue Potal program service expenses ► 74,572.	e_\$	-	-)	
40	d Other program services. (Describe in Schedule O)	· <u>-</u>				
		. _				
				. -	- - -	
						- -
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40	c (Code) (Expenses \$ including grants of \$	_) (Revenue	\$)
	· Code) (D-				
						.
40						
	(Code) (Expenses \$ including grants of \$) (Poucour	¢			
						. – – –
	200 recreational and competitive skaters					.
-T 60	Recreational skating, ice dancing, figure skating and testing					
	(Code) (Expenses \$ 74,572. including grants of \$) (Revenue	ŝ	ρ	4.40	91.1
	others, the total expenses, and revenue, if any, for each program service reported	9				
4	Describe the organization's program service accomplishments for each of its three largest program s Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the	ervices, as me amount of o	easured rants ar	by exp d alloc	ense:	s s to
_	If 'Yes,' describe these changes on Schedule O					
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	services?		Yes	X	No
	If 'Yes,' describe these new services on Schedule O				لتت	
-	Form 990 or 990-EZ?	a on the prior		Yes	X	No
2	Did the organization undertake any significant program services during the year which were not lister	1 on the prior				
•	Recreational Skating					
1	Briefly describe the organization's mission	<u>.</u>				
ကြင့်မ	Check if Schedule O contains a response to any question in this Part III					
	Statement of Program Service Accomplishments	36-6	011//2	24	<u> </u>	Page 2
rorm	1990 (2011) SKOKIE VALLEY SKATING CLUB	36-6	511772	2 4	F	-age

Form 990 (2011) 'SKOKIE VALLEY SKATING CLUB
Part V 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 (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	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? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
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		<u>x</u> _
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
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			
i	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a		X
١	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? If 'Yes,' complete Schedule D, Part VII	11 b	,	<u>x</u>
•	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? If 'Yes,' complete Schedule D, Part VIII	11c		X
	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? If 'Yes,' complete Schedule D, Part IX	11 d	1	X
	e Did the organization report an amount for other liabilities in Part X, line 25° If 'Yes,' complete Schedule D, Part X	11 e	ļ	X
	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)? If 'Yes,' complete Schedule D, Part X	11 f		x
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		X
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b	<u> </u>	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, Parts II and IV	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, Parts III and IV	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 (see instructions)	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	_	х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	1	X
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 t		

Form 990 (2011) SKOKIE VALLEY SKATING CLUB

Part V 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? <i>If 'Yes,' complete Schedule J</i>	23		X
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, 'go to line 25	24a		х
Ŀ	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		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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		
t	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 person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? 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)	· v		
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 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		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
t	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
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	x	
BAA		Forn	n 990 ((2011)

Form 990 (2011)' SKOKIE VALLEY SKATING CLUB 36-6117724 Page 5 Part V | Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a O **b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Х 1 c 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 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b 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 X b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3 b 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) 4 a Х **b** 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 Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b Х c 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 Х b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible 6b Organizations that may receive deductible contributions under section 170(c). a 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? 7 a Х es,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f Х g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a **b** Did the organization make a distribution to a donor, donor advisor, or related person? 9ь 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a 0 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 0. 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11 a **b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b 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. a is the organization licensed to issue qualified health plans in more than one state? 13 a Note. See the instructions for additional information the organization must report on Schedule O b 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 c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? X 14a

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14b

Form 990 (2011) SKOKIE VALLEY SKATING CLUB 36-6117724 Page 6 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. 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 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 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 Х 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 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х 6 Did the organization have members or stockholders? Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 a Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a Х b Each committee with authority to act on behalf of the governing body? 8ь Х Is there any officer, director or 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 q X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10 a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 Х 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c 13 Did the organization have a written whistleblower policy? 13 Х 14 Did the organization have a written document retention and destruction policy? 14 Х 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 15 a Х **b** Other officers of key employees of the organization 15_b Х If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 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 Х b If 'Yes,' did the organization follow 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 16<u>b</u> organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > Illinois Section 6104 requires an organization to make its Forms 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. Own website X Upon request Another's website 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 during the tax year. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: <u>24 REGENT WOOD ROAD, NORTHFIELD, IL 60093 (847) 446-4686</u>

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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.
- 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, if any. 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee										
(A) Name and title	(B) Average hours per week	unles	Position (do not check more than one box, unless person is both an officer and a director/trustee)			box, cer	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation	
	(describe hours for related organiza tions in Schedule O)	adividi el frascee or director	anstitutional trustee	Offir er	Fisher Highest coincensoled employee		FUNRE	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) CHRISTINE JOHNSON DIRECTOR	0.00	х						0.	0.	0.
(2) DR. RICHARD ROSSMAN DIRECTOR	0.00	х						0.	0.	0.
(3) JUDI O'SHEA DIRECTOR	0.00	х						0.	0.	0.
(4) STEVEN FULGHUM DIRECTOR	0.00							0.	0.	0.
(5) ERIN KRENTZ DIRECTOR	0.00					,		0.	0.	0.
(6) SHARYN WEISS DIRECTOR	0.00							0.	0.	0.
(7) LARA KUECHEL DIRECTOR	0.00							0.	0.	0.
(8) HAZEL WEHRLI DIRECTOR	0.00							0.	0.	0.
(9) THOMAS REIF DIRECTOR	0.00							0.	0.	0.
(10) ELAINE PAQUE PRESIDENT	3.00			х				0.	0.	0.
(11) DENISE JIROUT VICE PRESIDENT	3.00			х				0.	0.	0.
(12) LOIS TODD TREASURER	3.00			х				0.	0.	0.
(13) FLORENCE KRIEGER SECRETARY	3.00			х				0.	0.	0.
(14)										

Part VII Section A. Officers, Directors, Trust		Key	Em	plo	ye	es,	and	Highest Com	pensated Empl		(cor	age c
					C) ation						_	
(A) Name and title	hours	Average box, unless person is both an hours officer and a director/trustee) cor		Reportable compensation from the organization (W-2/1099-MISC)		Estimated amount of oth compensation		her				
	per week (describ e hours for related organi- zations in	Individu or direc	nstituti	Officer	Key employee	Highest employi	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	org an	om the anization d relate anization	d
	for related organi-	tor	onal tru		ployee	compe				Orga	3111201101	15
	zations in Sch O)	ee	ıstee			Highest compensated employee						
(15)	-											
(16)					-							
17)	-											
18)	-										-	
19)												
20)												
[21]												
[22]	-	-										
23)							-					
24)												
(25)	-											
1 b Sub-total	<u>'</u>				•	•	>	0.	0.			0
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)	4						>	0.	0.	<u>.</u>		0
Total number of individuals (including but not limited from the organization	to thos	se lis	ted	abo	ve) '	who	rece	eived more than \$	100,000 of reportable	e comp	ensatı	
nom the organization											Yes	No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or trust <i>dıvıdua</i>	ee, k I	еу е	empl	loye	e, or	hig	hest compensated	l employee	3		X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th such individual	ortable an \$15	con 0,00	nper 0? <i>l</i> :	satı f 'Ye	on a	and o	ther <i>lete</i>	compensation fro Schedule J for	om	_		,,
Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' co	mpens	ation	n fro	m ai	ny u	nrela	ated	organization or in	ndıvıdual	5	-	X
Section B. Independent Contractors											!	
Complete this table for your five highest compensate compensation from the organization. Report compensation.	ed inder	oend for t	ent o	cont alen	ract dar	ors t year	hat i	received more tha ling with or within	n \$100,000 of the organization's ta	ax year		
(A) Name and business addres	(B)							Compe	C) ensatio	n		
										_		
Total number of independent contractors (including to the contractors)	nut ==+	lum: 4	od 1	. 41-	200		1	ava) who scare:	more than			
\$100,000 in compensation from the organization	JUL 1101	mill	eu ((<i>,</i> 1110	ノンピ	iiSIE(a aU	ove, who received	more man			

rai	t 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 campaigns1ab Membership dues1b20,140.	-			012, 010, 01 011
R AM	c Fundraising events d Related organizations 1 c 1 d	-			
	e Government grants (contributions)	•			
SIS		1			
	f All other contributions, gifts, grants, and similar amounts not included above				
N O	g Noncash contributions included in lns 1a-1f \$	1			
	h Total. Add lines 1a-1f	20,140.			
PROGRAM SERVICE REVENUE	Business Code				
Ę	2a SENIOR ICE 713900	8,265.	8,265.	0.	0.
<u> </u>	b DANCE TESTS 713900	7,454.	7,454.	0.	0.
<u>§</u>	c MOVES/FS TESTS 713900	19,831.	19,831.	0.	0.
1 SE	d USFSA FEES 713900	19,835.	19,835.	0.	0.
RA	e SCHOLARSHIP FUND 713900	3,932.	3,932.	0.	0.
80	f All other program service revenue	3,950.	3,950.	487.	0.
Δ.	g Total. Add lines 2a-2f 3 Investment income (including dividends, interest and other similar amounts).	03,207.	0.	487.	0.
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	(i) Real (ii) Personal	-			
	6a Gross rents	-			
	b Less rental expenses	-			
	c Rental income or (loss)				
ŀ	a rectricate meanine of (1033)	1		- ·	
	7a Gross amount from sales of assets other than inventory	-			
	b Less cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss)	•			
SNUE	8a Gross income from fundraising events (not including \$				
OTHER REVEN	of contributions reported on line 1c)	1			
E I	See Part IV, line 18 . a	-			
5	b Less: direct expenses b				
	c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19				
	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				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code				
	11a				
	b	 			
	¢				
	d All other revenue	109.	109.	0.	0.
	e Total. Add lines 11a-11d	+05.	62 27 5		
	12 Total revenue. See instructions	84,003.	<u>63,376.</u>	974.	<u> </u>

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)

Check if Schedule O contains a response to any question in this Part IX									
	not include amounts reported on lines 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 United States See Part IV, line 21								
2	Grants and other assistance to individuals in the United States. See Part IV, line 22								
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors, trustees, and key employees								
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)								
7	Other salaries and wages								
8	Pension plan accruals and 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 .								
t	Legal								
c	Accounting .								
C	Lobbying								
€	Professional fundraising services See Part IV, line 17								
f	Investment management fees								
ç	Other								
12	Advertising and promotion	625.		625.					
13	Office expenses .	4,237.		4,237.					
14	Information technology								
15	Royalties .								
16	Occupancy .								
17	Travel	1,111.		1,111.					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings								
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization								
	Insurance . Other expenses Itemize expenses not	1,148.		1,148.					
24	covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)								
ā	See Attached Schedule	67,445.	67,445.						
)				_				
	;								
(I								
•	All other expenses .								
25	Total functional expenses. Add lines 1 through 24e	74,566.	67,445.	7,121.					
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.								
	Check here ► ☐ If following SOP 98-2 (ASC 958-720)								

Part X Balance Sheet (A) (B) Beginning of year End of year 1 6,119. Cash - non-interest-bearing 3,548 2 Savings and temporary cash investments 141,658. 2 148,524. 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 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) 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a **b** Less accumulated depreciation 10 c 10b 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 145,206 16 154,643. 17 Accounts payable and accrued expenses 17 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 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 25 26 Total liabilities. Add lines 17 through 25 0 0. 26 Organizations that follow SFAS 117, check here ▶ |X | and complete lines 27 through 29 and lines 33 and 34. 27 Unrestricted net assets 143,154 150,813. 27 28 Temporarily restricted net assets 2,052. 28 3,830. 29 Permanently restricted net assets 29 Q R Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30

BAA

31

32

33

34

Paid-in or capital surplus, or land, building, or equipment fund

Total net assets or fund balances

Total liabilities and net assets/fund balances

Retained earnings, endowment, accumulated income, or other funds

154,643. Form **990** (2011)

154,643.

31

32

33

34

145,206.

145,206.

Forn	Form 990 (2011) SKOKIE VALLEY SKATING CLUB 36-611				ge 12	
Pai	t 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		84,0	03.	
2	Total expenses (must equal Part IX, column (A), line 25)	2		74,5		
3	Revenue less expenses Subtract line 2 from line 1	3		9,4	137.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	45,2	206.	
5	Other changes in net assets or fund balances (explain in Schedule O)	5				
6	6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) .				543.	
Pai	t 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 X Cash Accrual Other					
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O						
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х	
ŀ	Were the organization's financial statements audited by an independent accountant?		2b		X	
(If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	2c			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.					
(If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is separate basis, consolidated basis, or both	sued on a				
	Separate basis Consolidated basis Both consolidated and separate basis					
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?						
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						
BAA			Form	990 ((2011)	

TEEA0112 07/06/11

Schedule C (Form 990 or 990-EZ) 20				36-6117	
Part II-A Complete if section 501(the organization (h)).	on is exempt under se	ection 501(c)(3) a	nd filed Form 5768 (el	ection under
A Check ► If the filir	ng organization bel	ongs to an affiliated group (and list in Part IV eac	ch affiliated group member's	name,
		nd share of excess lobbying		• .	·
B Check ► I if the filir	ng organization che	ecked box A and 'limited cor	ntrol' provisions apply		
	Limits on Lobb	ying Expenditures ans amounts paid or incur		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	res to influence pu	iblic opinion (grass roots lot	obying)		
b Total lobbying expenditu	ires to influence a	legislative body (direct lobb	ying)		
c Total lobbying expenditu	ires (add lines 1a a	and 1b)	-		
d Other exempt purpose e	expenditures				
e Total exempt purpose ex	-	nes 1c and 1d)			· · · · · · · · · · · · · · · · · · ·
f Lobbying nontaxable am both columns	nount Enter the an	nount from the following tab	le in		
If the amount on line 1e, col	umn (a) or (b) is	The lobbying nontaxable a	mount is		
Not over \$500,000	2001 (27 101	20% of the amount on line 1e	Vant 15		
Over \$500,000 but not over \$1,	000 000	\$100,000 plus 15% of the excess	: over \$500 000		
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$		over \$1,500,000			
Over \$17,000,000	17,000,000	over \$1,500,000			
g Grassroots nontaxable a	mount (onter 25%	\$1,000,000		 	-
h Subtract line 1g from lin	•	•			
i Subtract line 1f from line					
j If there is an amount oth section 4911 tax for this	ner than zero on ei year?	ther line 1h or line 1i, did th	e organization file Fo	rm 4720 reporting	Yes No
(Son	ne organizations tl colun	4-Year Averaging Period (nat made a section 501(h) e nns below. See the instructi	lection do not have to	o complete all of the five	
	Lot	bying Expenditures During	4-Year Averaging P	eriod	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					
BAA				Schedule C (Form	n 990 or 990-EZ) 2011

Scriedule C (Form 950 or 950-E2) 2011 SKOKIE VALLEY SKATING CLUB		-611	
Part II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T filed	l Forr	n 5768
	(a)	(b)
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Amount
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			
a Volunteers?			ı
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	1		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	. or	
section 501(c)(6).	` ' ' '	•	
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1 X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2 X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3 X
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ection
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' (answered 'Yes.'	OR (b)	Part	III-A, line 3, is
1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
a Current year		2a	
b Carryover from last year .		2b	
c Total .		2 c	
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 excess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic	cal		
expenditure next year?		4	
5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information		5	
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part Also, complete this part for any additional information	rt II-A; a	and Pai	rt II-B, line I
			

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

2011

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.

Open to Public Inspection

Name of the organization	Employer identification number
SKOKIE VALLEY SKATING CLUB	36-6117724
Pt_VI, Line_11a UPON_COMPLETION_BY_THE_ACCOUNTANT, THE !	RETRUN IS REVIEWED BY
THE PRESIDENT AND TREASURER PRIOR TO SIG	GNING AND
MAILING.	
Pt VI, Line 7b IN MATTERS OF SIGNIFICANT CHANGES TO CL	UB OPERATING
PROCEDURES, THE MEMBERSHIP IS ASKED TO	VOTE ON THE CHANGES
AT CLUB MEETINGS.	

Supporting Statement of:

Form 990 p 10/Line 13 col (A)

Description	Amount
POSTAGE PRINTING	795. 3,443.
Total	4,238.

Supporting Statement of:

Form 990 p 10/Line 24 col (A)-1

Description	Amount
SENIOR ICE	13,200
DANCE TESTS	5,019
MOVES/FS TESTS	10,908
USFSA FEES	21,219
SCHOLARSHIP FUND	3,650
SOCIAL	13,449

Supporting Statement of:

Form 990 p 11/Line 2, column (A)

SCHOLARSHIP FUND	2,052.
CERTIFICATE OF DEPOSIT	80,000.
PREMIUM FUND	59,606.

Supporting Statement of:

Form 990 p 11/Line 2, column (B)

Description	Amount
Scholarship Fund	3,830.
Certificate of Deposit	80,000.
Premium Fund	64,694.

Total ____148,524.