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SCHANN DO 2019

Return of Organization Exempt From Income Tax

OMB No 1545-0047 2014

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

•		inormation about 1 of 11 330 days its instruction is at www.		40.1	-	22 41/
<u>A</u>		2014 calendar year, or tax year beginning , 2014, and en	ding	12/		, 20 /4
В	Check If	applicable C Name of organization Linderhof Country Club Inc .		′°		er identification number
닏	Address	· · · · · · · · · · · · · · · · · · ·				0347153
Ш	Name ch	lai ige	/suite	E	Telepho	ne number
	Initial ret					
	Final retu	rn/terminated City or town, state or province, country, and ZIP or foreign postal code				
	Amende	d return Glen NH ()3838		G	Gross re	eceipts \$
	Applicati	on pending F Name and address of principal officer	H(a)	Is this a group	return for	subordinates? Yes No
			H(b)	Are all sub	oordinate	s included? Tyes No 🖊 🗀
<u> </u>	Tax-exe	mpt status		If "No,"	' attach a	a list (see instructions)
J	Website	: > /	H(c) Group ex	emption	number ▶
K	Form of	organization Corporation Trust Association Other ► L Year of for	mation		M State	of legal domicile
P	art I	Summary				
	1	Briefly describe the organization's mission or most significant activities:	.			
ė		GOIF COURSE				
au		J				
E.	2	Check this box ▶☐ if the organization discontinued its operations or dispose	d of mor	e than 2	5% of	its net assets.
Governance	3				3	/3
	4	Number of independent voting members of the governing body (Part VI, line 1			4	13
es	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)			5	5
ΞĒ	6	Total number of volunteers (estimate if necessary)			6	0
Activities &	7a	Total unrelated business revenue from Part VIII, column (C), line 12			7a	3 470 3770
_) ,u	Net unrelated business taxable income from Form 990-T, line 34			7b	140
	 	The disclated business taxable income norm of office of the control of the contro		· Prior Year	_	Current Year
	8	Contributions and grants (Part VIII, line 1h)	· Ł	386		127032
Ę	9	Program service revenue (Part VIII, line 2g)		5 1 8		26745
Revenue	ŀ			30)		
æ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	680		783
	12		1	1 -	2/	154580
_		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	+1/	6/9	7	124200
	13 14	Grants and similar amounts paid (Part IX, column (A), lines 1–3)				
	4-	Benefits paid to or for members (Part IX, column (A), line 4)		6 / 6	-	30150
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	_ G/	868		20658
ë	16a	Professional fundraising fees (Part IX, column (A), line 11e)		-		
X	b	Total fundraising expenses (Part IX, column (D), line 25) ▶	100	11 11	7	163 064
_	1 ''	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		4 9 4	<u></u>	152 7701
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		349	<u> </u>	173, 429
	19	Revenue less expenses. Subtract line 18 from line 12		765		(1884)
Net Assets or	<u> </u>		1 -	ng of Curre		End of Year
Sset	20	Total assets (Part X, line 16)	1:3	<u> 43,73</u>	7/	566404
e t	21	Total liabilities (Part X, line 26)		141		940
		Thet assets of fulfid balances. Subtract line 21 from highest	1/- 34	3813	<u> </u>	565564
	art II	Signature Block	12.			
Uı	nder pena	lities of perjury, I declare that I have examined this return, including accompanying schedules and s t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	tatements,	and to the	best of	my knowledge and belief, it is
	Je, correc	t, and complete operaration of preparer (other than officer) is based out, authoritization of which prep	arei-rias ar		ye /	
٥.		Matty Ran			4/10	<i>9</i> /15
Sig	_	Signature of officer		Date		•
H	ere	KAHY KAPUSH Theasurer				
		Type or print name and title				I==
Pa	aid	Print/Type preparer's name Preparer's signature	Date		Check	☐ if PTIN
	epare	er Landstein der Greichert und		1	self-em	ployed
	se On			Firm's	EIN ►	
		Firm's address >		Phone	no no	· · · · · · · · · · · · · · · · · · ·
Μá	ay the If	RS discuss this return with the preparer shown above? (see instructions)				· · · 🗌 Yes 🗌 No

Part	
1	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	golf cowse
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	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?
	services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ 87742 including grants of \$) (Revenue \$)
	9014 COUISE Maintenance
	()
	·
4b	(Code:) (Expenses \$ 30864 including grants of \$) (Revenue \$)
	/ / / / / / / / / / / / / / / / / / /
	RETAY, taxes and whihey
4c	(Code:) (Expenses \$ Q\delta \left(\delta \left(\delta \left) \delta \left(\delta \left(\delta \left(\delta \left(\delta \left(\delta \delta \left(\delta \delt
	Salanes
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses > 1/1/19/)

Part	Checklist of Required Schedules			
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	Yes	No V
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 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>	2		<u>/</u>
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		✓
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		/
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		V
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		/
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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		/
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		~
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	/	
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	11b		/
	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		/
	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	11d		/
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11e		/
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		/
	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 and XII is optional	12b		/
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		/
14 a b	Did the organization maintain an office, employees, or agents outside of the United States? 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	14a		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," complete Schedule F, Parts II and IV	15		/
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		/
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		
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		<u></u>
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		/
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	ر مز	~
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b For	IV m 99 0	(2014)
				(=317)

Form **990** (2014)

Part	V Checklist of Required Schedules (continued)	•		
		-	Yes,	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		V
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		V
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		/
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		✓
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		✓ ✓
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a	NH	7
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	nA	
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i>	26		V
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? <i>If "Yes," complete Schedule L, Part III </i>	27		/
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		✓ ✓
С	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		/
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		✓ ✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		/
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		/
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		/
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		/
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b	N	HA
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	n	A
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	- 11	/
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	

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Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		M.	h
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	N	<u> </u>
Zu	Statements, filed for the calendar year ending with or within the year covered by this return 2a		,	ļ '
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)		,	<u> </u>
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	V	-
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	V	
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		V
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			,
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		\ <u>\</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	N#	
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	NA	<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			,/
h	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		
b	gifts were not tax deductible?	6b	n	
7	Organizations that may receive deductible contributions under section 170(c).	OD	111	
а	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	-	1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	\bigcap_{i}	7
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с	•	
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		V
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u></u>
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		1
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	/n	_	
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	ni	A
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	NF	}
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b 3470 Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	DF	}_
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.			14
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	A	77
b	Note. See the instructions for additional information the organization must report on Schedule O. 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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		V
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	A	A
			n 990	(2014)

Part '				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S		tructi	
0 41	Check if Schedule O contains a response or note to any line in this Part VI		<u> </u>	<u> </u>
Section	on A. Governing Body and Management		Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year 1a 13			
ıa	If there are material differences in voting rights among members of the governing body, or		Ì	ı
	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 . 1b 13			
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		
3	Did the organization delegate control over management duties customarily performed by or under the direct		i	. /
	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		<u> </u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		٧_
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		V
6	Did the organization have members or stockholders?	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?	7a	/	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	1 a		
D	stockholders, or persons other than the governing body?	7b	~	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			 ;
	the year by the following:		اما	
а	The governing body?	8a	V	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	/	
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		<u></u>
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co		
10-	Did the exceptivation have level chapters, branches, or effiliates?	10a	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	IVa	-	
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	. n/	A
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a		
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	12a		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		<u>/</u>
14	Did the organization have a written document retention and destruction policy?	14		
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?			' ' .
_	The organization's CEO, Executive Director, or top management official	15a	n	A
a b	Other officers or key employees of the organization	15b	14	<u>,,</u>
	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	ŀ		
	with a taxable entity during the year?	16a	[]	V
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 take steps to safeguard the	_	_ , _ /	nA.
	organization's exempt status with respect to such arrangements?	16b	[V	111
	on C. Disclosure			
17 10	List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 for 1034 if applicable), 900, and 900 T (Section	501	(c)(2)c	Onka
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you make these available. Check all that apply.	1 3011	၂၂(၁)S	Orliy)
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	v. and
	financial statements available to the public during the tax year.	J. 001	ر ۲۰۰۰	.,
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	; ▶	,
-	Lindarhot Country Clup PU Bex 610 Glen NH U3838 (#10) 60			174
				(2014)

Form 990 (2014)

<u>-</u>	<u> </u>							g
Part VII	Compensation of	Officers, Directors,	Trustees,	Key Employees	Highest	Compensated	Employees,	and
	Independent Con	tractors						

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 no	r any relate	d orga	aniz			ompe	nsa	ted any curren	t officer, director	, or trustee.
				(0	•					
(A)	(B)	/do.n		Pos		than c		(D)	(E)	(F)
Name and Title	Average					ıs both		Reportable	Reportable	Estimated
	hours per	office				or/trust			compensation from	amount of
	week (list any hours for	악	l ₂	JО	Ке	err Hi	Fo	from the	related organizations	other compensation
	related	dire	1	Officer	y er	ples	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	tual	g	,	npk	t cc	¯	(W-2/1099-MISC)		organization
	line)	trus	a +		Key employee	mp				and related organizations
		Individual trustee or director	Institutional trustee		,	Highest compensated employee				_
			ď			ated				
w Dalact Zia . Dans										
(1) Rubert Zaino Pees.	 									
(2) Pawa Graham V.P.										
17										
(3) Kothy Ropesa Treasure								1000		
(4) Elgine Zaino Secretary										
(5) (Tray) A. L. (V. a.) V. (c)	<u> </u>				-					
(5) Tuny Ant usieuxicz										
(6) May Burn										
(7) Dawn & Dewne										
(8) Kathy Fuller										
` '										
(9) Michill Queely	ļ									
(10) SUSAN SULLIVAN										
_ 1							<u> </u>			
(11) Don Retalic	1									
(12) Robet Vins		_								
(13) Irma Zarinsky	 		-							
(14)	 			_						
(17)	†									

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	yees	s, aı	nd F	lighe	st C	ompensated E	mployees (continue	d) +		
			,			C)							,	
	(A)	(B)	(do n	ot ch		ition	e than d	nne	(D)	(E)		(1	=)	
	Name and title	Average	box,	unles	s pe	rson	is both	an	Reportable	Reportab		Estin		
		hours per week (list any		er and		lirect	or/trust	·	compensation from	compensation related	n from	amo: otl		
		hours for	Individual trustee or director	Inst	Officer	ξe ₂	emp	Former	the	organizatio	ons		nsation	
		related	lirec Vidt	ituti	Ger	em	hest	mer	organization	(W-2/1099-N	1ISC)	from		
		organizations below dotted	tor a	ona		Key employee	8 8		(W-2/1099-MISC)			organi and re		
		line)	rust	Institutional trustee		ee	npe					organi		
			6	stee			Highest compensated employee							
			<u> </u>				8		<u></u>					
(15)														
			ļ											
(16)														
			<u> </u>		<u>. </u>		ļ			<u> </u>				
(17)							:							
(40)			<u>, </u>					_						
(18)														
(10)			<u> </u>	_							-,			
(19)										1				
(20)	W-0 · ·		<u> </u>		_	_								
(20)											.			
(21)			<u> </u>		<u> </u>	-	-	_						
35-17			1											
(22)				_										—
<u> </u>			1											
(23)			<u> </u>			-								
32			1											
(24)	, , , , , , , , , , , , , , , , , , , ,												 -	
			1											
(25)														
						<u> </u>								
1b	Sub-total				-			▶						
С	Total from continuation sheets to Part	VII, Sectio	n A					▶						
d							•		 					
2	Total number of individuals (including but		to th	ose	list	ed a	above	e) w	ho received mo	ore than \$10	00,000 c	of		
	reportable compensation from the organi	zation >	0		_	_								
•	Did the comments of the conference of												Yes 1	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete 3								•		nsated		İ	
												3		<u></u>
4	For any individual listed on line 1a, is the organization and related organizations													,
	individual	greater the	an p	30,	UUU	11	70	S,	complete Sch	eaule J loi	Sucri		Ι,	\mathcal{I}
5	Did any person listed on line 1a receive of	 	· ·	·	Hon	fror	m anu		· · · · ·	 vation or ind	استطیروا	4		<u>~</u>
9	for services rendered to the organization?	If "Yes " o	npei	isai ete	Sch	nedi	ıle .I f	ors	related Organiz Such person			5	- ,	$\sqrt{}$
Section	on B. Independent Contractors								- Porcorr	· · · · · ·	• •			<u> </u>
1	Complete this table for your five highest of	compensati	ed inc	dene	end	ent	contr	acto	ors that receive	d more tha	n \$100 (200 of		—
	compensation from the organization. Rep	ort compe	nsatio	on fo	or th	ne c	alend	ar v	ear ending wit	h or within t	the orga	nizatio	n's tax	
	year.							,	--					
	(A)							<u> </u>	(B)	1		(C)		
	Name and business add	ress	-						Description of s	ervices	C	ompensa	tion	
	NH			•										
	T	 ,												
2	Total number of independent contractor							th	ose listed abo	ove) who				}
	received more than \$100,000 of compens	sation from	tne o	rgar	ııza	tion			()					ŀ.

Form **990** (2014)

	90 (201 VIII	Statement of Revenue				Page
	(Check if Schedule O contains a response or not	e to any line in this	Part VIII		🗆
			Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns 1a				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b /27032				
ts, (С	Fundraising events 1c	_			
Gif	d	Related organizations 1d	_			
ons, Sir	e f	Government grants (contributions) All other contributions, gifts, grants,	_		1	
utic	•	and similar amounts not included above]	
G Ë	g	Noncash contributions included in lines 1a-1f. \$				
Son	h		127032	/		
		Business Cod	le		 	
Program Service Revenue	2a	Clubbuuse	19829	19829		
æ	b	Clubhouse	7621	3871	3750	
ice	С	<u> </u>				
Sen	d					
E	e					
īgo.	f	All other program service revenue .	70.44		1	
<u> </u>	g		- 27450			
	3	Investment income (including dividends, interes	ot, ▶ 30		24	
		and other similar amounts)			<i>30</i>	
	4	Income from investment of tax-exempt bond proceeds	<u> </u>			1
	5	Royalties			 	
	6a	Gross rents				
	b	Less: rental expenses				
	C	Rental income or (loss)				1
	d	Net rental income or (loss)	<u> </u>			
	7a	Gross amount from sales of (i) Securities (ii) Other				
		assets other than inventory				
	b	Less cost or other basis				
		and sales expenses .	_			
	С	Gain or (loss)				
	d	Net gain or (loss)	<u> </u>	<u></u>		
ல						
Σ	ва	Gross income from fundraising events (not including \$				
ě		of contributions reported on line 1c)				
<u>ت</u> ۳		See Part IV, line 18 a				
Other Revenue	h.	Less: direct expenses b	 			
0	C	· · · · · · · · · · · · · · · · · · ·		1		
	1	Gross income from gaming activities.				1
		See Part IV, line 19 a				
	b	Less: direct expenses b		[
	С	` '	>	1		
	10a	Gross sales of inventory, less				
		returns and allowances a 2335				
	1	Less: cost of goods sold b 1143	1103		1	
	<u>c</u>	Net income or (loss) from sales of inventory	· //83	1193	 	1
	44.		1e	1	1	
	11a					
	b				-	
	d	All other revenue			•	
	e	Total. Add lines 11a-11d	-	-		
	12	Total revenue See instructions	155686		3000	-

	0 (2014)				Page 10
	X Statement of Functional Expenses				•
Sectio	n 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respon-	se or note to any li	ne in this Part IX .		
	t include amounts reported on lines 6b, 7b, , 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 domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members 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 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	19063	19063		
9	Other employee benefits				 -
10	Payroll taxes	1595	1595		
11	Fees for services (non-employees):		, , , , ,		
а	Management				
b	Legal				7.
С	Accounting	1000	7	1000	
d	Lobbying			, ,	
e	Professional fundraising services. See Part IV, line 17				
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	2355		2355	
14	Information technology				
15	Royalties				
16	Occupancy	30864	30864		<u>. </u>
17	Travel	- CO 0-4	JED ECO N		
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 .	- A	- A		
23	Insurance	9628	9628		
24	Other expenses. Itemize expenses not 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.)				
		11162	11100		· · · · · · · · · · · · · · · · · · ·
a	(Poo)	1458	1458		
b	Clubhaise	18 995	18795		
C	GOIF	87762	87762-		
d	2+m	1815	18/15		
e	All other expenses Total functional expenses. Add lines 1 through 24e	Durch	10011	820	
25	Joint costs. Complete this line only if the	1-14-555	1711180	3355	
26	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				

Pa	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Par	rt X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	112 100	1	24 280
	2	Savings and temporary cash investments	24 815	2	22 635
	3	Pledges and grants receivable, net		3	:
	4	Accounts receivable, net	250_	4	13558
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
0	6	Loans and other 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) Complete Part II of Schedule L		6	
š	7	Notes and loans receivable, net		7	 .
Assets	7 8	Inventories for sale or use	4215	8	3357
1	9	Prepaid expenses and deferred charges	1/9/3	9	ا الكراكرات
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b	502574	10c	502574
	11	Investments—publicly traded securities		11	3,00
	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	
_	<u> 16</u>	Total assets. Add lines 1 through 15 (must equal line 34)	543954	16	56640XI
	17	Accounts payable and accrued expenses	141	17	840
	18	Grants payable		18	
	19	Deferred revenue		19	
	20 21	Tax-exempt bond liabilities		20	
ω	22	Loans and other payables to current and former officers, directors,			
Liabilities	22	trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Ei	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
į	25	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			
	26	Total liabilities. Add lines 17 through 25	141	25	840
	26	Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and	4-11	26	070
ės		complete lines 27 through 29, and lines 33 and 34.		1	
and	27	Unrestricted net assets		27	
Bal	28	Temporarily restricted net assets		28	
Net Assets or Fund Balances	29	Permanently restricted net assets		29	
ř		complete lines 30 through 34.			r 1
ts (30	Capital stock or trust principal, or current funds	564300	30	564300
sse	31	Paid-in or capital surplus, or land, building, or equipment fund	1 36.	31	, 40 62 6
انت				1 00 [/ 22 21. 3
7	32	Retained earnings, endowment, accumulated income, or other funds.	(20,513)	32	(37260)
Net /	32 33 34	Retained earnings, endowment, accumulated income, or other funds. Total net assets or fund balances	543813	32 33 34	565 564 566 404

			_	, 45	,	
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	154	580		
2	Total expenses (must equal Part IX, column (A), line 25)					
3	Revenue less expenses. Subtract line 2 from line 1	· · · · · · · · · · · · · · · · · · ·				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		813		
5	Net unrealized gains (losses) on investments					
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments					
9	Other changes in net assets or fund balances (explain in Schedule O)	9 40600				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line , , , , , , , ,				
	33, column (B))	10	565	56%		
Part	XII Financial Statements and Reporting			••		
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			
	_/		_	Yes	No	
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_		1	
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olaın i	n i		1	
	Schedule O.		;		/	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	ļ ļ.	<u> </u>	
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	iled o	or		1	
	reviewed on a separate basis, consolidated basis, or both:					
_	Separate basis Consolidated basis Both consolidated and separate basis					
b	The same of Garage and the same of the sam		2b			
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	a on	a			
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis	!!				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over of the audit, review, or compilation of its financial statements and selection of an independent account			nit	1.	
	If the organization changed either its oversight process or selection process during the tax year, ex			1114		
	Schedule O.	olain i	n		i	
2-	As a result of a federal award, was the organization required to undergo an audit or audits as set	orth :	n		ــــا	
3a	the Single Audit Act and OMB Circular A-133?	ortn I		nie	L	
L	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	.aa +-	· 3a	nH	<u> </u>	
b	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such at		е 3b	DIF	}	
	required addit or addits, explain why in ochedule o and describe any steps taken to diddergo such at	uito.		n 990 ((004.1)	
			For	T) ひせじ ((2014)	

SCHEDULE D (Farm 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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

	nderhot Country Club Inc.		DS · 0347/53						
Part		vised Funds or Other Similar Fu							
	Complete if the organization answered								
		(a) Donor advised funds	(b) Funds and other accounts						
1	Total number at end of year								
	Aggregate value of contributions to (during year)								
	Aggregate value of grants from (during year) .								
	Aggregate value at end of year								
5	Did the organization inform all donors and donor funds are the organization's property, subject to the	r advisors in writing that the assets	held in donor advised rol? Yes . No						
6	Did the organization inform all grantees, donors, a	and donor advisors in writing that gra	ant funds can be used						
	only for charitable purposes and not for the bene conferring impermissible private benefit?								
Part	Conservation Easements. Complete if the organization answered	"Yes" to Form 990, Part IV, line 7	•						
1	Purpose(s) of conservation easements held by the								
	Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area								
	☐ Protection of natural habitat	☐ Preservation	of a certified historic structure						
	☐ Preservation of open space								
2	Complete lines 2a through 2d if the organization h	ield a qualified conservation contribut							
	easement on the last day of the tax year.		Held at the End of the Tax Year						
а	Total number of conservation easements		2a						
b	Total acreage restricted by conservation easemer								
C	Number of conservation easements on a certified								
d	Number of conservation easements included in historic structure listed in the National Register	(c) acquired after 8/17/06, and no	I I						
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶								
4		ervation easement is located >							
5	Number of states where property subject to conservation easement is located ► Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?								
6	Staff and volunteer hours devoted to monitoring,								
6	Starr and volunteer nours devoted to monitoring,	inspecting, and emorcing conservation	on easements during the year						
7	Amount of expenses incurred in monitoring, insper	ecting, and enforcing conservation ea	sements 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 section 170(h)(4)(B)(ii)?								
9	165								
	organization's accounting for conservation easen		manda datamente trat addendes tre						
Par	Organizations Maintaining Collection Complete if the organization answered	ns of Art, Historical Treasures,							
10	If the organization elected, as permitted under S								
Ia	works of art, historical treasures, or other similar public service, provide, in Part XIII, the text of the	ar assets held for public exhibition,	education, or research in furtherance of						
L	•								
В	b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and b works of art, historical treasures, or other similar assets held for public exhibition, education, or research in full public service, provide the following amounts relating to these items:								
	(i) Revenue 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 a following amounts required to be reported under	rt, historical treasures, or other simi	lar assets for financial gain, provide th						
a	Revenue included in Form 990, Part VIII, line 1								
b	Assets included in Form 990, Part X		🟲 💲						

Part	II Organizations Maintaining	Colle	ctions of	Art, Histo	orical T	reasures,	or Ot	her Similar As	sets (con	tinued)
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its									
	collection items (check all that apply):			_	_					
	Public exhibition					or exchange				
	Scholarly research			е	Other					
C	☐ Preservation for future generations									
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Parl XIII.					e in Part				
5	During the year, did the organization								ar	
	assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes N						□ No			
Part	Part IV Escrow and Custodial Arrangements.									
	Complete if the organization	answ	ered "Yes	" to Form	1 990, P	art IV, line	9, or r	eported an am	nount on F	orm
	990, Part X, line 21.								-4	
1a	Is the organization an agent, trustee,									
	included on Form 990, Part X?						• •		∐ Yes	i ∐ No
b	b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount									
_	Decision halance						10		···	
C	Beginning balance						1d	+		
d	Additions during the year						1e		.	
e	Distributions during the year						1f			
f	Ending balance								,2 □ V os	. □ No
2a b	If "Yes," explain the arrangement in P									
	V Endowment Funds.	ait Aii	. Officer fier	C II LIIO CX	piariatio	THUS DOON	oi o via	Sa iii i die Xiii .	<u> </u>	
v Gi	Complete if the organization	ansv	vered "Yes	" to Forn	n 990. P	art IV. line	10.			
	Complete if the organization		Current year	(b) Pric		(c) Two years		(d) Three years bad	k (e) Four y	ears back
1a	Beginning of year balance	<u> </u>	<u> </u>							
b	Contributions						-			
C	Net investment earnings, gains, and				-					
	losses									
d	Grants or scholarships									
e	Other expenditures for facilities and									-
	programs									
f	Administrative expenses									
g	End of year balance					1				
2	Provide the estimated percentage of	the cu	rrent year ei	nd balanc	e (line 1g	, column (a) held	as:	•	
а	Board designated or quasi-endowme			%						
b		% [.]								
С	Temporarily restricted endowment ▶	•	%							
	The percentages in lines 2a. 2b, and 2c should equal 100%.									
3a	taran da di dan da									
	organization by:								`	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organ								3b	
4	Describe in Part XIII the intended use			ion's endo	wment f	unds.				
Par	t VI Land, Buildings, and Equi									4.5
	Complete if the organization	n ans								
	Description of property		(a) Cost or of (a) (investr		, ' <i>'</i>	or other basis other)		Accumulated depreciation	(d) Book	value
			แกษธณ	nong				20presiation		011
1a	Land	•			 				5025	77
b	Buildings	•	ļ		 					
c	Leasehold improvements	•			 			-		
d	Equipment	•								
e Takal	Other			000 5 1	<u> </u>	- (7)	2-1		5-100 m	21
ıotal	. Add lines 1a through 1e. (Column (d)	must e	equal Form :	990, Part .	x, colum	n (ש), line 10	JC.) .	. <u>.</u> ▶	5025	.14

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2014
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Ling	reshed Country Clab In-	02.0347/5.3
	4D - insurance, pool, Clubhause	and RHM
	2 - husband & wife are both d	······
	6 - members pay their annual assessing	ments
	76 - annual meeting	
Part VI	Section B 11B - BUD WILL be info Was completed 4 con	rmed that 990 hore Copy it requise
Part VIL	Seetien C - F/15 are dutibuled at	annual meeting
Part XI	9 - Special assessment restricted from	capital use
Part VIII	payment of Lovo is for doing weekly payou re	xayak,
	payou deposits and quarterly payou re	Uns