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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2014 Open to Public Inspection

OMB No 1545-0047

<u>A</u>	For th	e 2014 calendar year, or tax year beginning $05/01/14$, and ending $04/30/16$	15		
В	Check if a	'' _		D Employe	r identification number
Ш	Address o				
	Name cha	ange Doing business as Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	86-0 E Telephon	399417
	Initial retu	aaa	Noonesalte		757-3213
Ħ	Final retui				
님	terminated	Kingman AZ 86401		G Gross rec	eipts\$ 1,194,287
닏	Amended	F Name and address of principal officer	144 > 1-41		ubordinates? Yes X No
	Applicatio	on pending	H(a) Is this a gro	up return for s	
			H(b) Are all sub		
_			If "No,"	' attach a list	(see instructions)
<u>_</u>	Tax-exer	mpt status 501(c)(3) 🗶 501(c) (7) ◀ (insert no) 4947(a)(1) or 527	4		
<u>J</u>	Website		H(c) Group exe		
*****	*******	······································	rear of formation 1	972	M State of legal domicile AZ
	Part I	Summary			
		Briefly describe the organization's mission or most significant activities:			
Se.		Property Owner's Association			
nar					
Cartivities & Governance	١ .	o	-04 511 .		
တိ	2 9	Check this box ► if the organization discontinued its operations or disposed of more than 25	5% of its net ass	1 1	7
100	3 !	Number of voting members of the governing body (Part VI, line 1a)		3	7
٣	4 !	Number of independent voting members of the governing body (Part VI, line 1b)		4	· · · · · · · · · · · · · · · · · · ·
`	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	25
. <u>ĕ</u>	6 .	Total number of volunteers (estimate if necessary)		6	0 70 704
Ū	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	78,794
		Net unrelated business taxable income from Form 990-T, line 34	Prior Yea	7b	Current Year
Revenue W	8	Contributions and grants (Part VIII, line 1h)		1,759	683,498
죵		Program service revenue (Part VIII, line 2g)		3,397	477,405
-Ş		- · · · · · · · · · · · · · · · · · · ·		2,339	-1,233
₽ <mark>\$</mark>		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,186	32,976
્ર	L	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		9,003	
20 20 20 20 20 20 20 20 20 20 20 20 20 2		Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3)	<u> </u>	2,003	1,192,646
		Benefits paid to or for members (Part IX, column (A), line 4)			0
	1 4- 4	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	34	0,340	356,717
xpenses	15	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5–10) Professional fundraising fees (Part IX, column (A), line 11e)	341	7,340	336,717
en	l loai	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0			
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	80	4,461	906,409
	4	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		1,801	1,263,126
	1			5,798	-70,480
58	<u> </u>	Revenue less expenses Subtract line 18 from line 12-	Beginning of Cur		End of Year
Net Assets or	20 -	Total assets (Part X, line 16)		5,058	1,874,211
Ass	g 21 -	Total liabilities (Part X, line 26)		5,988	944,944
활	22 I	Net assets or fund balances. Subtract line 21 from line 20		9,070	929,267
	Part II	Signature Block			
u	Jnder pe	nalties of perjury, I declare that I have examined this return, including accompanying schedules and stateme	ents, and to the be	est of my kn	owledge and belief, it is
tr	rue, corre	ect, and complete Declaration of preparer (other than officer) is based on all information of which preparer l	nas any knowledg	e	
Sig	gn	Signature of officer		Date	2-16-16
He	ere	Barry Vanstockum Presi	dent	· ·	2-1679
		Type or print name and title			
	<u>-</u>	Print/Type preparer's name Preparer's signature	Date	Check	ıf PTIN
Pai		Michael E. Bonney	02/05	/16 self-em	ployed P00173009
	eparer	Firm's name > GDK CPA, LLC	F	ırm's EİN ▶	46-5616929
Us	e Only	90 S Acoma Blvd S # E100			
		Firm's address Lake Havasu City, AZ 86403	P	hone no	928-680-1994
Ма	y the IR	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
		vork Reduction Act Notice, see the separate instructions.			Form 990 (2014)
DAA	•			•	1VI /

		erty Owners' Associ 86	-0399417	Page 2
	tatement of Program Servi	i ce Accomplishments . a response or note to any line in thi	s Part III	X
	ribe the organization's mission:	a response of flote to any line in the	5 Fait III	
Propert	y Owners' Associa	tion		
		program services during the year which were	not listed on the	
If "Yes," des	990 or 990-EZ? scribe these new services on Scheo			Yes X No
services?		e significant changes in how it conducts, any	program	Yes X No
4 Describe the expenses. S		ccomplishments for each of its three largest particles. It is an interest from the community of the communit		
	ociation operates urse, swimming po	43,660 including grants of \$ a clubhouse with bar ol andpark for the ber		
4b (Code.) (Expenses \$	including grants of \$) (Revenue \$)
		·		
4c (Code:) (Expenses \$	including grants of \$) (Revenue \$	
4d Other progra	am services (Describe ın Schedule	O.)		
(Expenses	\$ 19,466 inclu	ding grants of \$) (Revenue \$)
4e Total progra		1,263,126		

1 0	At 14 Official of Required Octionales			
	,		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		- 1	
	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			v
	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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	-		- 22
•	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		x
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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
•	complete Schedule D, Part III	8		X
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	:	X
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.			
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	X	
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		X
С	j i			
	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	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	•			v
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	x	
_	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	12a	^	
b	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	in the contract of the contrac	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	174		
	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		X
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? If "Yes," complete Schedule F, Parts II and IV	15		X
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		X
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		X
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?		Į	
	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

			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		<u> </u>
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		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		İ	
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		<u> </u>
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		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	İ		
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 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	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior		ŀ	
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?		ł	
	If "Yes," complete Schedule L, Part I	25b		
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? If "Yes," complete Schedule L, Part II	26		<u> </u>
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		<u> </u>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u> </u>
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			77
	Schedule L, Part IV	28b		<u> </u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			v
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		$\frac{x}{x}$
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		x
24	conservation contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	24		x
32	Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		
<i>.</i>	complete Schedule N, Part II	32		x
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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,		-	
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
b	If "Yes" to line 35a, 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	- 1	
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		<u> </u>
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	Х	
			^^-	

	1 990 (2014) Valle Vista Property Owners' Associ 86-0399417		F	age
Pa	art 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	_ <u> _</u>
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		res	No
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	┪ !		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
•	reportable gaming (gambling) winnings to prize winners?	1c		x
2a				†-
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 25			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	Ì
	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	х	
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	Х	
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		X
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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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 as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
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		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		ļ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		ļ
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]	-		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders 11a	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
40-	against amounts due or received from them.)	ا ۱۵		l
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?	12a		
b 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified popposit health incurance issuers	-		
	Section 501(c)(29) qualified nonprofit health insurance issuers.	120		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
b	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		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	-	

Form 990 (2014) Valle Vista Property Owners' Associ 86-0399417 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 or note to any line in this Part VI X Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year 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 7 Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 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 supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the pnor Form 990 was filed? 4 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X 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 X b Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b 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 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? 10a X 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 X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 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 X X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 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? X The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b 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? X 16a 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 organization's exempt status with respect to such arrangements? 16b Section C. Disclosure None List the states with which a copy of this Form 990 is required to be filed 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records. 9866 Concho Drive The Organization 928-757-3212

AZ 86401

Kingman

E 000 (0044)	77-110	37i a+a	Droportu	Ownorel	Accori	86-0399417
Form 990 (2014)	valle	VISTA	Property	Owners.	ASSOCI	80-U39941 <i>/</i>

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Page	4

Laif Ail	Compensation of Officers, Directors, Trustees, Rey Employees, Highest Compensated Employees, and	
	·Independent Contractors	
	Check if Schedule O contains a response or note to any line in this Part VII	

Check if Schedule O contains a response or note to any line 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 (list any hours for	bo	x, unle icer a	Pos check ess pe nd a d	erson Irrecto	than on is both a or/trustee	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(**-2 1033-14130)	organization and related organizations
(1)Barry Vanstockur										
	0.00								_	_
President	0.00	X		X	<u> </u>			0	0	0
(2) Elaine Hible										
	0.00	l				1				
Vice President	0.00	X	_	X	<u> </u>	<u> </u>		0	0	0
(3) Roger Ciciarell:						1				
	0.00									
Director	0.00	X	ļ		<u> </u>	\vdash		0	0	0
(4) Christine Meiser										
	0.00							_	_	_
Director Wallain	0.00	X			-	┼┼		0	0	0
(5) Jeffrey McLain										
Di ma akan	0.00	x		İ		li		o	o	o
Director (6) Wes Stewart	0.00	╇	-		├	1 1	-	<u> </u>	<u> </u>	<u> </u>
(b) Wes Stewart	0.00									
Treasurer	0.00	x						O	o	0
(7) Sue Wilkin	0.00	1		\vdash	┢	╁╌┼				
(/) Due Wilkin	0.00					1 1				
Director	0.00	x				1 1		l o	0	0
(8)	0.00	1		_	i			· · · · · · · · ·		
(0)										
(9)		-	-							
(10)										
(11)										

ALLE 02/03/2010 11 20 AN					
Form 990 (2014) Valle	77: -L-	D	^	3	06 0000417
Form 990 (2012) Valle	VISTA	Property	Owners	ASSOCI	86-039941/
1 01111 000 (201 1) 1 00	1		T		00 000011

Pa	rt VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	and Highest Compensated	Employees (continued)				
	(A) Name and title	(B) Average hours per week (list any	bo	x, unle	Pos check ess pe	erson	than one of the or/trust	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	co	(F) Estima amour othe mpens	ited it of er sation	-
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	Or a	from t rganizand rela ganiza	ation ated	
(12)														
(13)														
(14)														
(15)														
(16)			_											
(17)														
(18)												-		
(19)														
1b c	Sub-total Total from continuation she	ets to Part VII. S	Secti	ion A	<u> </u>	l	L	>						
d	Total (add lines 1b and 1c)							<u> </u>						
2	Total number of individuals (in reportable compensation from				thos	e lis	ted a	bov	e) who received more than	\$100,000 of				
													Yes	No
3	Did the organization list any for employee on line 1a? If "Yes,"	complete Sched	alub	J for	suc	h inc	lividu	ıal				3		x
4	For any individual listed on line organization and related organ	e 1a, is the sum nizations greater	of re thar	porta \$15	able 60,00	com 0? I	pens f "Ye	satio s," c	on and other compensation complete Schedule J for su	from the ch				
5	individual Did any person listed on line 1	a receive or acc	rue d	com	ens	atior	ı fror	n an	ıv unrelated organization or	ndıvıdual	F	4		X
	for services rendered to the or	ganization? If "Y										5		X
Sect 1	ion B. Independent Contracto Complete this table for your five		ensa	ted i	nder	 pend	lent o		ractors that received more	than \$100.000 of				
	compensation from the organi	zation Report co	ompe	ensa	tion	for t	he ca	lend	dar year ending with or with	in the organization's tax ye	ear	_	(C)	
	Name and	(A) business address					_	_	Descrip	(B) tion of services		Co	(C) mpensa	tion
			_											
	··-								·····					
2	Total number of independent of	contractors (inclu	ıdıng	but	not	limite	ed to	thos	se listed above) who					 -
DAA	received more than \$100,000	of compensation	fror	n the	org	aniz	ation	<u> </u>		0		Forr	n 99 0	0 (2014)

	Check if Schedule	O con	tains a i	response or	(A)		(C)	(D)
`					Total revenue	(B) Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
<u></u> 1a	Federated campaigns	1a						
g b	Membership dues	1b		677,428				
c c	Fundraising events	1c						
₫ d	Related organizations	1d						
e	Government grants (contributions)	1e						
1 a b c d e e i g h 2 a b c d e i g	F All other contributions, gifts, grants, and similar amounts not included above	_1f		6,070				
9 5 6 7	Noncash contributions included in lines 1a Total. Add lines 1a-1f	-1f S	\$	•	683,498			
				Busn. Code				
2a	Golfing Revenue			713910	261,593	261,593		
b	Bar/Restaurant inco	me		713910	128,397	128,397		·
c	Nonmember fees			713910	78,794		78,794	
d	Pool Keys, etc			713910	6,115	6,115		
e					2,506	2,506		
' 1	All other program service reve	enue						
9				<u> </u>	477,405		····	
3	Investment income (including	dividen	ids, intere	_ 1	400			40
	and other similar amounts)			▶ -	408			401
4	Income from investment of ta	x-exem	pt bond p	roceeds -				
5	Royalties			P				
	(i) Real		(n) F	Personal				
6a								
b	· ·							
Ι.	Rental inc or (loss)		··· · · ·			1	į	
d 7a	Net rental income or (loss) Gross amount from (i) Securities		(n)	Other				
	sales of assets		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
h	other than inventory Less cost or other							
~	basis & sales exps			1,641				
6	Gain or (loss)			-1,641				
1	Net gain or (loss)			▶	-1,641	-1,641		
82	Gross income from fundraising eve	ents			·			·
	(not including \$							
	of contributions reported on line 10	;)						
	See Part IV, line 18	а						
b	Less: direct expenses	b						
c	Net income or (loss) from fun-	draisinç	events	•				
9a	Gross income from gaming activiti	es						
	See Part IV, line 19	а						
	Less direct expenses	b						
1	Net income or (loss) from gar	_ (tivities	•				·····
10a	Gross sales of inventory, less				***************************************			
	returns and allowances	a						
	Less: cost of goods sold	þ			į			
<u>-</u> -	Net income or (loss) from sale Miscellaneous Revenue	es of in	ventory	Busn. Code				
44			-	531390	21,434	21,434		
11a				561000	9,130	9,130		
b				561000	1,221	1,221		
٦			٠	331304	1,191	1,191		
d	- 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4				32,976	1,191		
l e	TOTAL AUGILLES 114-110				32,310			

Secti	on 501(c)(3) and 501(c)(4) organizations must c Check if Schedule O contains a resp			mplete column (A).	X
Do n	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		САРСПОСО	gancial expandes	exponded.
•	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	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	321,298	321,298		
8	Pension plan accruals and contributions (include				
-	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	35,419	35,419		<u> </u>
11	Fees for services (non-employees).				<u> </u>
а	Management				
b	Legal	45,809	45,809		······································
С	Accounting	8,119	8,119		
d	Lobbying	•	,		
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
Ū	(A) amount, list line 11g expenses on Schedule O)	19,284	19,284		
12	Advertising and promotion	1,399			
13	Office expenses	3,763	3,763		
14	Information technology				
15	Royalties				
16	Occupancy	51,571	51,571		
17	Travel				
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				
23	Insurance	25,414	25,414		
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)				
а	Irrigation Water Expense	188,865			ļ
b	Cost of Goods Sold	182,348			
С	Bad Debt Expense	131,458			
d	Repairs & Maintenance	83,750			
	All other expenses	164,629			
25	Total functional expenses Add lines 1 through 24e	1,263,126	1,263,126	0	0
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				
DAA	following SOP 98-2 (ASC 958-720)		<u> </u>	<u> </u>	Form 990 (2014)
-,-					Form 33U (2014)

_P	art >	Balance Sheet				
		Check if Schedule O contains a response or note	to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing		132,874	1	379,773
	2	Savings and temporary cash investments	·	234,039		114,378
	3	Pledges and grants receivable, net	•		3	
	4	Accounts receivable, net		251,461	4	426,393
	5	Loans and other receivables from current and former offi	icers directors			120/000
		trustees, key employees, and highest compensated emp				
		Complete Part II of Schedule L	noyees.		5	
	6	Loans and other receivables from other disqualified pers	ons (as defined under section			
	"	4958(f)(1)), persons described in section 4958(c)(3)(B), a				,
		sponsoring organizations of section 501(c)(9) voluntary e				
ın		organizations (see instructions) Complete Part II of Sch	· · · · · · · · · · · · · · · · · · ·	•	6	
Assets	7	Notes and loans receivable, net	codic L		7	
As	8	Inventories for sale or use		19,466	8	20,111
	9	Prepaid expenses and deferred charges		16,771	9	56,742
	_	Land, buildings, and equipment cost or	1 1	10,771	9	30,142
	104	other basis. Complete Part VI of Schedule D	10a 2,147,419			
	h	Less: accumulated depreciation	10b 1,424,348	502,175	10c	723,071
	11	Investments—publicly traded securities	105 2/424/546	302/1/3	11	723,072
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets	ì		14	
	15	Other assets. See Part IV, line 11	i	198,272	15	153,743
	16	Total assets. Add lines 1 through 15 (must equal line 34	,,	1,355,058	16	1,874,211
	17	Accounts payable and accrued expenses		23,401	17	342,924
	18	Grants payable		23,102	18	542/524
	19	Deferred revenue		283,911	19	304,498
	20	Tax-exempt bond liabilities		203/311	20	504/450
	21	Escrow or custodial account liability. Complete Part IV or	f Schedule D		21	
10	22	Loans and other payables to current and former officers,				
Liabilities		trustees, key employees, highest compensated employe	· ·			
Ϊġ		disqualified persons. Complete Part II of Schedule L	es, and		22	
Ë	23	Secured mortgages and notes payable to unrelated third	Inarties		23	
	24	Unsecured notes and loans payable to unrelated third pa	`		24	
	!	Other liabilities (including federal income tax, payables to				·
		parties, and other liabilities not included on lines 17-24).				
		of Schedule D	Complete Fally	48,676	25	297,522
	26	Total liabilities. Add lines 17 through 25		355,988		944,944
_		Organizations that follow SFAS 117 (ASC 958), check	k here ▶ X and			
es		complete lines 27 through 29, and lines 33 and 34.				
anc	27	Unrestricted net assets		999,070	27	929,267
3ali	28	Temporarily restricted net assets		f	28	
둳	29	Permanently restricted net assets			29	
균		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and			
Net Assets or Fund Balances		complete lines 30 through 34.	,, · · · · · · · · · · · · · · · · · ·			
ets	30	Capital stock or trust principal, or current funds			30	
\SS	31	Paid-in or capital surplus, or land, building, or equipment	t fund		31	· · · · · · · · · · · · · · · · · · ·
et /	32	Retained earnings, endowment, accumulated income, or			32	
Ź	33	Total net assets or fund balances		999,070	33	929,267
	34	Total liabilities and net assets/fund balances	Ì	1,355,058		1,874,211

Form	990 (2014) Valle Vista Property Owners' Associ 86-0399417				Pa	ge 12
Pa	rt XI Reconciliation of Net Assets					
	·Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1_1_	1	1,19	92 <u>,</u>	646
2	Total expenses (must equal Part IX, column (A), line 25)	2		١,2€	53,	126
3	Revenue less expenses. Subtract line 2 from line 1	3				480
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u></u>	99	99,	070
5	Net unrealized gains (losses) on investments	5	<u></u>			
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9			З,	<u>677</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		92	29,	267
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			-		Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			- 1		
	Schedule O.			- 1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		Į.	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis			- 1		
b	Were the organization's financial statements audited by an independent accountant?			2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis			- 1		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight					
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		L	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			1		
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			- 1		
	the Single Audit Act and OMB Circular A-133?			3a		
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.			3b		<u> </u>
				Forn	n 990	0 (2014)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

Part IV, line 6, 7, 8, 9, 10, 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

Employer identification number Name of the organization Valle Vista Property Owners' Associ 86-0399417 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b 2c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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 Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Sched	dule D (Form 990) 2014 Valle V	<u>ısta Proper</u>	ty Owne	rs' A	<u>ssoci</u>	86-0	399417		Page 2
Pa	rt III Organizations Maintain	ing Collections of	f Art, Histo	rical Tre	asures,	or Othe	r Similar Ass	sets (continue	ed)
	Using the organization's acquisition, acce collection items (check all that apply)	ssion, and other record	ds, check any	of the follow	wing that a	re a signifi	icant use of its		
а	Public exhibition	d 🔲	Loan or excha	ange progra	ams				
b	Scholarly research	e 📗	Other						
C	Preservation for future generations								
4	Provide a description of the organization's	s collections and explain	n how they fur	ther the ore	ganization'	s exempt	purpose in Part		
5	XIII. During the year, did the organization solic	it or receive donations	of art_historic	al treasures	s or other	similar			
Ū	assets to be sold to raise funds rather tha							Yes	☐ No
Pa	rt IV Escrow and Custodial A	Arrangements.							
	Complete if the organizat 990, Part X, line 21.	ion answered "Yes	" to Form 9	90, Part	IV, line 9	, or repo	orted an amou	unt on Form	
1a	Is the organization an agent, trustee, cust	odian or other intermed	diary for contri	butions or o	other asse	ts not			
	included on Form 990, Part X?							Yes	☐ No
b	If "Yes," explain the arrangement in Part >	KIII and complete the fo	ollowing table:						
								Amount	
	Beginning balance						1c		
	Additions during the year						1d		
	Distributions during the year						1e		
	Ending balance	- Fa 000 Dart V II	- 04 for		dial aaaa		1f		
	Did the organization include an amount of if "Yes," explain the arrangement in Part >					-		Yes	No
	rt V Endowment Funds.	an ones nor a tro	xpianation nat	5 500m p.o.	1.000 0				
	Complete if the organizati	ion answered "Yes	" to Form 9	90, Part l	IV, line 1	0.			
	.	(a) Current year	(b) Pnor y		(c) Two yea		(d) Three years b	ack (e) Four ye	ears back
1a	Beginning of year balance								
	Contributions								
	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance		L						
2	Provide the estimated percentage of the o	current year end balanc	e (line 1g, col	umn (a)) he	eld as:				
а	Board designated or quasi-endowment ▶	%							
b	Permanent endowment ▶	%							
С	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2c s	hould equal 100%.							
3a	Are there endowment funds not in the pos	ssession of the organiza	ation that are i	heid and ac	dministered	for the		_	· · · · · · ·
	organization by							<u> </u>	es No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
	If "Yes" to 3a(II), are the related organization							3b	
	Describe in Part XIII the intended uses of		owment funds				 	 	
Pai	rt VI Land, Buildings, and Ed		". F 0				5 000 B		
	Complete if the organization								
	Description of property	(a) Cost or other (I -	b) Cost or other	er basis		accumulated	(d) Book val	ue
	tand	(investment)	<u> </u>	(other)	0 404		preciation	100	0 404
	Land			19	8,494			198	3,494
	Buildings							· · · · · · · · · · · · · · · · · · ·	
	Leasehold improvements			.					
	Equipment					<u> </u>		 	
	Other Add lines 1a through 1e. (Column (d) mu	et equal Form 000 Por	t Y column /F	R) line 10c	<u> </u>			100	2 / 0 /
i Otal.	Add intes to unough te. (Column (d) mu	or edual i Oilli aao' Legi	t A, Widilli (E), iiie 100.	· <i>J</i>		<u> </u>	190	3,494

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" to	Form 990. Part IV line	e 11b. See Form 990 Part :	X. line 12
•	(a) Description of security or category	(b) Book value	(c) Method of valua	
	(including name of security)		Cost or end-of-year mai	ket value
(1) Financial	derivatives			
(2) Closely-he	eld equity interests			
(3) Other				
(A)				
(B)				
(C)	·			
(D)				
(E)	•			
(F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes" to	Form 990, Part IV, line	11c. See Form 990. Part	K. line 13.
	(a) Description of investment	(b) Book value	(c) Method of value	
			Cost or end-of-year mar	ket value
(1)				
(2)			- "	
(3)				
(4)				
(5)				•
(6)				*
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 13) ▶			
Part IX	Other Assets.	.1		
T GIV DV	Complete if the organization answered "Yes" to	Form 990 Part IV line	11d See Form 990 Part	K line 15
	(a) Description	i Omi 990, i artiv, iiile	Tru. See Form 990, Fait 7	(b) Book value
(1)	Liquor License			150,10
(2)	Lottery Receivable			3,64
	Other Assets			3,04
(3)	Other Assets			
				
(5)				
(6)				
(7)				
(8)				
(9) T-4-L (O-lum	- (h)	<u> </u>		150 74
	n (b) must equal Form 990, Part X, col. (B) line 15)		<u> </u>	153,74
Part X	Other Liabilities.	F 000 D-+11/ P	44 446.0	D 137
	Complete if the organization answered "Yes" to line 25.	Form 990, Part IV, line	11e or 11f. See Form 990	, Part X,
1.	(a) Description of liability	(b) Book value		
	income taxes			
	e payable	270,732		
	vities Committee	17,472		
	accrued liabilities	5,277		
	certificates & chips outstandin	2,121		
	Account for pool shade	1,030		
(7) Credi	it cards	890		
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 25.) ▶	297,522		
	uncertain tax positions. In Part XIII, provide the text of the foo		nancial statements that reports th	

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2014 Valle Vista Property Owners'	Associ	86-039941	7	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	nts With F	Revenue per Re	turn.	
	Complete if the organization answered "Yes" to Form 990, Pa	rt IV, line 1	2a.		. <u> </u>
1	Total revenue, gains, and other support per audited financial statements			1	1,192,646
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
С	Recovenes of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	1,192,646
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i l			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	1,192,646
Pŧ	rt XII Reconciliation of Expenses per Audited Financial Statem			Return.	•
	Complete if the organization answered "Yes" to Form 990, Pa	<u>rt IV, line 1</u>	2a.		
1	Total expenses and losses per audited financial statements			1	1,330,921
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b	· · · · · · · · · · · · · · · · · · ·		
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	67,795		
е	Add lines 2a through 2d			2e	67,795
3	Subtract line 2e from line 1	1 f		3	1,263,126
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
С	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	1,263,126

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line

2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information.

Part XII, Line 2d - Expense Amounts Included in Financials - Other

Book / Tax Depreciation Difference

\$

67,795

Schedule D (Form 990) 2014 Valle Vista Property Owners' Associ 86-0399417

Part XIII Supplemental Information (continued)

Page **5**

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.

2014

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.

Open to Public Inspection

Name of the organization

Employer identification number

Valle Vista Property Owners' Associ

86-0399417

Form 990, Part III, Line 4d - All Other Accomplishment
Same as Number 1

Form 990, Part VI, Line 6 - Classes of Members or Stockholders
Members

Form 990, Part VI, Line 7a - Election of Members and Their Rights Members approve

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members Members Approve

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 Form 990 is provided to board with audit

Form 990, Part VI, Line 15b - Compensation Process for Officers Board approves compensation of managers.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Documents are available in HQ office upon request

Form 990, Part IX, Line 24e - Other Expenses

Description

Amount

Golf course expenses

\$ 31,736

\$

0

\$

0

	m 990 or 990-EZ) (20	014)				Page 2
Name of the organization		rty Owners' A:	ssoci		Employer identification 86-039941	
•			33001		100 033341	
Taxes,	Licenses &	Permits				
	\$	23,674	\$	0	\$	0
Supplie	s					
		00.440	•	•	•	
	. \$.	22,163	\$	0	\$	0
COGS						
	\$	19,466	\$	0	\$	0
Chemica	ls/fertili:	zers				
			•		•	•
	\$	18,904	\$	0	\$	0
Account	processing	g fees				
	\$	7,426	\$	0	\$	0
Workers	COMP					
MOTACLS	-			_		
	\$	6,586	\$	0	\$	0
Tools &	Small Equ	ipment				
	\$	6,174	\$	0	\$	0
Laundry	and Linen					
naunary				_		
	\$	6,099	\$	0	\$	0
Auto						
	\$	5,888	\$	0	\$	0
Ecuipmo	nt Rental					
Edurbue.				_		
	\$	3,765	\$	0	\$	0
Printin	g					
	\$	3,476	\$	0	\$	0
Postago						
Postage					_	_
	\$	3,314	\$	0	\$	0 .
Contrac	t labor					
	\$	2,000	\$	0	\$	0
D			·		•	
nges &	subscripti	OHS				
			····	<u>-</u> -	Page 1 of	2

1,527 593 htributions 566 525 training 336	\$ \$ \$	0 0 0	\$ \$ \$ \$	0 0
566 525 training	\$	0	\$ \$	0
566 525 training	\$	0	\$ \$	0
566 525 training 336	\$	0	\$	0
525 training 336	\$	0	\$	0
training 336				
training 336				
336	\$	0	\$	0
	\$	0	\$	0
5				
250	\$	0	\$	0
151	\$	0	\$	0
17	\$	0	\$	0
6	\$	0	\$	0
E				
-13	\$	0	\$	0
	151 17 6 t	151 \$ 17 \$ 6 \$ t -13 \$	151 \$ 0 17 \$ 0 6 \$ 0 t -13 \$ 0	151 \$ 0 \$ 17 \$ 0 \$ 6 \$ 0 \$