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# Short Form Return of Organization Exempt From Income Tax

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

2014

OMB No 1545 1150

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public.

► Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Ā		he 2014 calendar year, or tax year beginning 7/01 , 2014, and ending 6/30		. 2015			
尸		if applicable C	Employer	identification number			
F		ss change change GLENVIEW GARDEN CLUB, INC.	31-09	93237			
$\vdash$	Initial	186 WAMPIIM ROAD	Telephone				
H		ILOUISVILLE: KY 40207	(502)	930-3760			
$\vdash$	╡ I						
		ation pending	Group E Number	<u> </u>			
G	Acco			organization is <b>not</b>			
I	Web			Schedule B			
J	Tax-ex	xempt status (check only one) $ \boxed{X}$ 501(c)(3) $$ 501(c)( ) $\blacktriangleleft$ (insert no ) $$ 4947(a)(1) or $$ 527 $$ (Form 9	90, 990-E.	Z, or 990-PF)			
		of organization X Corporation Trust Association Other					
L	Add asse	lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if t ts (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	otal ►\$	16,319.			
	ırt I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instru					
		Check if the organization used Schedule O to respond to any question in this Part I	1 21101131	X			
	1	Contributions, gifts, grants, and similar amounts received	1	15,875.			
	2	Program service revenue including government fees and contracts .	2				
	3	Membership dues and assessments	3				
	4	Investment income .	4	444.			
	5 a	Gross amount from sale of assets other than inventory . 5 a					
		Less cost or other basis and sales expenses					
C.	_	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	- 5 c				
$\mathfrak{Q}$	ے ا	Gaming and fundraising events	-50				
5	١ ٠,	Gross income from gaming (attach Schedule G if greater than \$15,000)  6a					
氢	a L						
頂	D	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum					
Ć.		of such gross income and contributions exceeds \$15,000) . 6b					
SCANNED NOV	c	Less direct expenses from Sangly and fundraising events 6 c	_				
<b>—</b>	d	Net income or (loss) from garging and fundraising events (add lines 6a and 6b and subtract line (2))	6 d				
යා	7 a	Gross sales of invertor, less returns and allowances. 7a					
2015	1	Less cost of goods sod $\sim$ Z	-				
7		Gross profit or (loss) from sales of the phony (Subtract line 7b from line 7a)	7 c				
	8	Other revenue (describe in Street lier)	8				
	9	Total revenue. Add Mes 1, 2, 3, 4, 55 6d, 7c, and 8	▶ 9	16 210			
	10	Grants and similar amounts paid (list in Schedule O)	10	16,319.			
		Benefits paid to or for mentals.	11				
_	11						
E X	12	Salaries, other compensation, and employee benefits.	12				
XPENSES	13	Professional fees and other payments to independent contractors	13	625.			
2	14	Occupancy, rent, utilities, and maintenance	14				
S	15	Printing, publications, postage, and shipping Other expenses (describe in Schedule O) SEE SCHEDULE O	15	378.			
	16	other expenses (describe in concedite o)	16	19,792.			
	17	Total expenses. Add lines 10 through 16	► 17	20,795.			
А	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-4,476.			
ASSET	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year (gure reported on prior year's return)	ear 19	93,599.			
' T	20	Other changes in net assets or fund balances (explain in Schedule O)	20				
	21	Net assets or fund balances at end of year Combine lines 18 through 20	<b>-</b> 21	89,123.			
BA	A For	Paperwork Reduction Act Notice, see the separate instructions.		Form <b>990-EZ</b> (2014)			

	· /			
Pa.	rt V Other Information (Note the Schedule A and personal benefit contract statement requirements in SEE SCHED the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V	ULE	0	X
33		22	Yes	No
34	If 'Yes,' provide a detailed description of each activity in Schedule O  Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect	33		X
	a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		Х
35	a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35 a		Х
1	<b>b</b> If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O	35 b		
•	c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III	35 c		Х
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		Х
	a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37 a 0. b Did the organization file Form 1120-POL for this year?	37b		X
	a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38 a		X
ı	b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38 b N/A	£., .,		1
	Section 501(c)(7) organizations Enter			, ]
	a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities  39 N/A 39b		*	
	a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under	32.5		· . }
70.	section 4911 • 0.; section 4912 • 0.; section 4955 • 0.	-, 5		
١	b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess	1.7.	43.m+2m.	أستدأ
	benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	40 b		Х
	c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization	. j.,		- :
	managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed		3	
•	by the organization			1
•	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e	- سالما	نــــد۔ا X
41	List the states with which a copy of this return is filed NONE	406		
42 :	The organization's books are in care of STEWART LUSSKY  Located at 86 WAMPUM ROAD LOUISVILLE KY  Telephone no (502)  ZIP + 4 40207	930		
1	b 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)?	42 b	Yes	No
	If 'Yes,' enter the name of the foreign country >	42.0		X
(	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) and time during the calendar year, did the organization maintain an office outside the U.S.?  If 'Yes,' enter the name of the foreign country	42 c	· · · · · · · · · · · · · · · · · · ·	X
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year			N/A N/A No
	a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44 a		<u>X</u>
	o Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ Did the organization receive any payments for indoor tanning services during the year?	44 b		X
	If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments?	440		X
	If 'No,' provide an explanation in Schedule Q  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	44 d 45 a		<u>X</u>
	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.'	`	-	
	Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45 b	-	X

Form 9	990-EZ	(2014)	GI ENVIEW	GARDEN	CLUB.	INC.

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₹	1	_	11	a	a	~~	7	-2	7	

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46 Did t	he organization engage, directly or indire	ctly, in political campa e Schedule C, Part I	iign activities on behalf (	of or in opposition to		Yes	No XX
	Section 501(c)(3) organizations All section 501(c)(3) organization for lines 50 and 51 Check if the organization used Schedu	only ons must answer o	`	·	e the tables	;	
comp 48 Is the 49 a Did t b If 'Ye 50 Comp	he organization engage in lobbying activities plete Schedule C, Part II e organization a school as described in since organization make any transfers to an es,' was the related organization a section plete this table for the organization's five highoyees) who each received more than \$100,0	ection 170(b)(1)(A)(ii)? exempt non-charitable 527 organization? hest compensated emplo	If 'Yes,' complete Sche e related organization?	dule E	47 48 49 a 49 b	Yes	No X X X
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated other compe	amoun :nsatio	it of
<b>51</b> Com	I number of other employees paid over \$	hest compensated indep	endent contractors who ea	ach received more than \$	5100,000 of		
comp	Densation from the organization of there is (a) Name and business address of each independent of		(в) Туре	of service	(c) Compe	nsation	1
NONE							
<b>52</b> Did t	I number of other independent contractors he organization complete Schedule A? <b>N</b> pleted Schedule A	3	•	ttach a	► X Yes		No
Under penaltie true, correct, a	es of perjury, I declare that I have examined this return, and complete Declaration of preparer (other than office	including accompanying sche r) is based on all information	dules and statements, and to the of which preparer has any knowl	e best of my knowledge and be edge	lief, it is		
Sign Here	Signature of officer  A: STEWANT LUS  Type or print name and title	SYS THEAD	NER	Date 10/27/1			
Paid Preparer Use Only	Print/Type preparer's name  ANTHONY B. HOWARD  Firm's name ► PLAUT & ASSOCIA  Firm's address ► 6004 BROWNSBOF  LOUISVILLE, KY 44	RO PARK BLVD, S	TEB	Check if self employed F	P01355444 61-12702 02) 896-921		
May the IF	RS discuss this return with the preparer sh	nown above? See instr	uctions		► X Yes Form 990-		<b>No</b> 2014)

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545 0047

2014

Open to Public Inspection

Employer identification number

GLEN	VIEW GARDEN	CLUB,	INC	· · •						31-099323	7
										part.) See instruc	tions.
The org	ganization is not a	private 1	foundat	tion because	it is (	For lines 1 th	rough 11,	check o	nly one	box )	
1	A church, conve	ntion of c	hurches	s, or association	n of cl	nurches descr	bed in <b>sec</b>	tion 170(	b)(1)(A)(	(i).	
2	A school descr	ibed in <b>s</b> e	ection	1 <mark>70(b)(1)(A)(</mark> ı	ı <b>).</b> (Att	ach Schedule	eE)				
3	A hospital or a	cooperat	live hos	spital service	organ	ization descr	ibed in <b>se</b>	ction 17	0(b)(1)(A	A)(iii).	
4		_	anızatıc	on operated in	n conju	unction with a	hospital i	describe	d in sec	ction 170(b)(1)(A)(iii) E	inter the hospital's
	name, city, and	_									
5 [	An organization 170(b)(1)(A)(iv)	operated . (Comp	for the lete Pa	benefit of a co rt II)	llege o	or university o	wned or op	erated by	a gover	rnmental unit described i	n section
6	A federal, state	•	_								
7	An organization in section 170(	that norm	nally red vi). (Co	eives a substa Implete Part	antial p II )	art of its supp	ort from a	governm	ental un	it or from the general pul	olic described
8	A community to	rust desc	ribed in	section 170	(b)(1)(	A)(vi). (Comp	lete Part	II )			
9 [	from activities re	elated to it one and	ts exem unrelat	ipt functions – led business	subje taxabl	ct to certain e e income (les	xceptions	and (2) r	o more i	, membership fees, and other than 33-1/3% of its suppi usinesses acquired by	ort from gross
10	An organization	n organız	ed and	operated exc	clusive	ly to test for	public saf	ety See	section	1 509(a)(4).	
11 [	or more publicl	y suppor	ted org	anizations de	scribe	d in section	<b>509(a)(1)</b> (	or <b>sectio</b>	n 509(a	ctions of, or to carry or <b>((2).</b> See <b>section 509(a</b> nes 11e, 11f, and 11g.	ut the purposes of one <b>(3).</b> Check the box in
a [	Type I. A support organization(s) complete Part	the power	to requ	larly appoint o	ervise or elect	d, or controlle a majority of	d by its sup the directo	ported or rs or trus	rganızat itees of t	ion(s), typically by giving he supporting organization	the supported on <b>You must</b>
<b>b</b> [	management of must complete	the suppo	orting or <b>Sectio</b> i	ganization ves	sted in	the same per	sons that c	ontrol or	manage	ed organization(s), by the supported organizat	ion(s) <b>You</b>
c [	Type III function organization(s)	ally integrals (see ins	<mark>rated.</mark> A truction	supporting org	ganızat <b>i com</b> ı	ion operated in plete Part IV,	n connections	n with, ai <b>A, D, an</b>	nd functio <mark>d E.</mark>	onally integrated with, its	supported
<b>d</b> [	Type III non-fun functionally interiors) Y	ctionally in egrated of a contract of the cont	integrat The org	ied. A supporti ganization gei ete Part IV, S	ing org nerally ection	anization oper must satisfy is A and D, a	rated in cor a distribu n <b>d Part V.</b>	nnection tion req	with its s uiremen	supported organization(s) t and an attentiveness	that is not requirement (see
<b>e</b> [		if the ord	ganızatı	ion received a	a writte	en determina	tion from	the IRS		Type I, Type II, Type	
f E	Enter the number					3	J				
a F	Provide the follow	ıng ınforn	nation a	about the sup	porte	d organizatio	n(s)				
	(ı) Name of s organız			(II) EIN		(III) Type of o (described or above or IR (see instru	i lines 1 9 C section	organizat	s the tion listed toverning ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
								Yes	No		
(A)					_						
(B)											
(C)	·····						·				
(D)											
(E)						**************************************			,		
Total						• • • • • • • • • • • • • • • • • • • •	-	,	15		
RAY E	or Paperwork Re	auction /	۱ct Noti	ice, see the li	nstruc	tions for For	m 990 or 9	990-EZ.		Schedule A (Form	1 990 or 990-EZ) 2014

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support		-			<del>-</del>	
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2010	<b>(b)</b> 2011	(c) 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)			_ :			
6	Public support. Subtract line 5 from line 4		***	• <u>t</u> ,			GT To
Sec	tion B. Total Support					-	
	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10 .	•					
12	Gross receipts from related active	rities, etc (see ins	tructions)			12	2
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, thu	d, fourth, or fifth t	ax year as a sectio	on 501(c)(3)	▶ []
	tion C. Computation of Pul						
	Public support percentage for 20			e 11, column (f))		14	
	Public support percentage from 3					15	
16 a	<b>33-1/3% support test</b> – <b>2014.</b> If and <b>stop here.</b> The organization				nd the line 14 is 3	33-1/3% or more	e, check this box
b	b 33-1/3% support test — 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	and-circumstances	test, check this	box and stop her	e. Explain in P	art VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances'	and-circumstances test. The organiza	' test, check this tion qualifies as a	box and stop her a publicly support	<b>e.</b> Explain in P ed organization	art VI how the
18	Private foundation. If the organi	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check the	s box and see	instructions

31-0993237

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support						
	dar year (or fiscal yr beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	<b>(e)</b> 2014	(f) Total
ı	Gifts, grants, contributions and membership fees received (Do not include						
	received (Do not include any 'unusual grants ').	9,560.	9,430.	20,196.	10,411.	15,875.	65,472.
2	Gross receipts from admis-	3,300.	3, 130.	20,130.		13,073.	03,472.
	sions, merchandise sold or						
	services performed, or facilities furnished in any activity that is	Į l					
	related to the organization's		21 224	20 424			60 760
9	tax-exempt purpose Gross receipts from activities		31,334.	29,434.			60,768.
3	that are not an unrelated trade or business under section 513						0.
4	Tax revenues levied for the	-					
	organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or						
	facilities furnished by a governmental unit to the organization without charge						0.
6	Total. Add lines 1 through 5	9,560.	40,764.	49,630.	10,411.	15,875.	126,240.
	Amounts included on lines 1,	, , , , , , , , , , , , , , , , , , , ,		·····	,		· · · · · · · · · · · · · · · · · · ·
	2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
t	Amounts included on lines 2 and 3 received from other than						
	disqualified persons that					•	
	exceed the greater of \$5,000 or 1% of the amount on line 13						
	for the year	0.	0.	0.	0.	0.	0.
(	: Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
	Public support (Subtract line 7c from line 6)						126,240.
Sec	tion B. Total Support						
		4	41.0011	4 3 6616	4.00000	4 3 0014	40 T
Calen	dar year (or fiscal yr beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	<b>(e)</b> 2014	(f) Total
Calen 9	dar year (or fiscal yr beginning in)  Amounts from line 6	(a) 2010 9, 560.	<b>(b)</b> 2011 40,764.	(c) 2012 49, 630.	(d) 2013 10, 411.	(e) 2014 15, 875.	(f) Total 126, 240.
Calen 9	dar year (or fiscal yr beginning in)	<del></del>			<del></del>		
Calen 9	dar year (or fiscal yr beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from	9,560.	40,764.	49,630.	10,411.	15,875.	126,240.
Calen 9 10 a	dar year (or fiscal yr beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	<del></del>			<del></del>		
Calen 9 10 a	dar year (or fiscal yr beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511	9,560.	40,764.	49,630.	10,411.	15,875.	126,240.
Calen 9 10 a	dar year (or fiscal yr beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses	9,560.	40,764.	49,630.	10,411.	15,875.	126,240. 4,370.
Calen 9 10 a	dar year (or fiscal yr beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511	9,560. 1,516.	1,225.	49,630. 621.	10,411.	15,875.	126,240. 4,370.
Calen 9 10 a	dar year (or fiscal yr beginning in)  Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business	9,560.	40,764.	49,630.	10,411.	15,875.	126,240. 4,370.
Calen 9 10 a	dar year (or fiscal yr beginning in)  Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	9,560. 1,516.	1,225.	49,630. 621.	10,411.	15,875.	126,240. 4,370.
Calen 9 10 a	dar year (or fiscal yr beginning in)  Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business	9,560. 1,516.	1,225.	49,630. 621.	10,411.	15,875.	126,240. 4,370.
Calen 9 10 a 1	dar year (or fiscal yr beginning in)  Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include	9,560. 1,516.	1,225.	49,630. 621.	10,411.	15,875.	126,240. 4,370. 0. 4,370.
Calen 9 10 a 1	dar year (or fiscal yr beginning in)  Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in	9,560. 1,516.	1,225.	49,630. 621.	10,411.	15,875.	126,240. 4,370. 0. 4,370.
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Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I if you checked 11a of Part I, complete Sections A and B if you checked 11b of Part I, complete Sections A and C if you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3 a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5 a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990)
- 9 a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in **Part VI**
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI
- 10 a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer (b) below
  - **b** Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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Рa	rt IV: Supporting Organizations (continued)		T	
11	Has the organization accepted a gift or contribution from any of the following persons?	183-23 }	Yes	No
	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	题 11a	<b>数等</b>	
	b A family member of a person described in (a) above?	11b		
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	11c		
	ction B. Type I Supporting Organizations		·	
	ettori 2. 19po i oupporting 1 ignition		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Se	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
Se	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3		
Se	ction E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
	a The organization satisfied the Activities Test Complete line 2 below			
	b The organization is the parent of each of its supported organizations. Complete line 3 below			
	c The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instruction	ns)		
2	Ashra has Tash Assauss (a) and (b) hafaus			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		<b>1</b>
3	Parent of Supported Organizations Answer (a) and (b) below.	¥4.57°		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI	3a	200 CV 872	
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b		7

Hai	Tave Type III Non-Functionally integrated 509(a)(3) Supporting Or	ganizati	ons	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on other Type III non-functionally integrated supporting organizations must complete.	November ete Sectio	20, 1970 See instruct ins A through E	ions. All
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for shortax year or assets held for part of year)	rt		
ā	Average monthly value of securities	1a		
t	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		<u> </u>
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8_		
Sec	tion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-in (see instructions)	ntegrated	Type III supporting or	ganization
BAA			Schedule A (Fo	rm 990 or 990-EZ) 2014

Part V Type III Non-Functionally Integrated 509(a)(3) S	upporting Organiza	tions (continued)	
Section D — Distributions			Current Year
1 Amounts paid to supported organizations to accomplish exempt pu	urposes		
2 Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	of supported organizations	5,	
3 Administrative expenses paid to accomplish exempt purposes of s			
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval required)			
6 Other distributions (describe in Part VI) See instructions			
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations to which the organizat in Part VI) See instructions	ion is responsive (provide	details	
9 Distributable amount for 2014 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6	,		
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required – see instructions)			s 2 ce 2
3 Excess distributions carryover, if any, to 2014	100		ί, ί,
a			
b · · · · · · · · · · · · · · · · · · ·		. * `*	-1
c			;
d		,	
e From 2013		1 2 2 2	7-7 (1/4 (2
f Total of lines 3a through e		• ` -	1 3 7 7 4
g Applied to underdistributions of prior years.			1.
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$	1.50	,	
a Applied to underdistributions of prior years		,	
<b>b</b> Applied to 2014 distributable amount		1	
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)	, . ·		
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3 <sub>j</sub> and 4c			
8 Breakdown of line 7	, ,		
a			
b			
c			
d Excess from 2013	,	-	
e Excess from 2014			
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Part VI: Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions)

#### 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.

► 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
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

31-0993237

GLENVIEW GARDEN CLUB, INC

#### FORM 990-EZ, PART I, LINE 16 OTHER EXPENSES

ANNUAL FILING FEE	\$	10.
AWARDS		345.
FLOWER SHOW ENGRAVING		140.
GCA DUES		4,620.
GCA NATIONAL REGISTRATION		395.
INSURANCE		154.
KY FILING FEES		15.
MEETING REGISTRATIONS		1,190.
MISCELLANEOUS .		15.
PROGRAM EXPENSES		608.
TRAVEL		600.
WATERING GRANT		11,700.
	TOTAL \$	19,792.

#### FORM 990-EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

CONSERVATION EDUCATION AND BEAUTIFICATION ADVOCACY.

#### FORM 990-EZ, PART V - REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR

INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?

NO

(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR

INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? .

NO