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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 p ublic.

2014 Open to Public . Inspection

		million maken about 10 m 350 and 45 m 350 actions is a			mapedion			
A	or the		nding A	UG 31, 2015	<u> </u>			
В	Check If	C Name of organization		D Employer identi	fication number			
a	pplicable							
[Address change	Go Ye Village, Inc.						
<u> </u>	□ Name			72 (959566			
<u> </u>	_ change □ Initial	Doing business as	-					
<u>L</u>	return	•	oom/suite	E Telephone numb	er			
	Final return/	1201 West Fourth Street		918-	-456-4542			
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	6,115,390.			
	Amende							
	∐return □Applica-			H(a) is this a group				
L	⊥tión pending	F Name and address of principal officer Stephen J. Thomas		for subordinate	es? Yes X No			
		same as C above		H(b) Are all subordinates	ıncluded? Yes No			
<u></u>	ax-exer	mpt status $X = 501(c)(3) = 501(c)(3)$ (insert no.) $4947(a)(1)$ or	527	If "No," attach	a list (see instructions)			
J١	Nebsite	math: www.goyevillage.org		H(c) Group exempti				
		organization: X Corporation Trust Association Other	I Vear		M State of legal domicile: OK			
		Summary	L I Car C	or iorniation, ±277	14 State of legal dofficile. 320			
<u></u>				2.3 3				
Ф		Briefly describe the organization's mission or most significant activities $\underline{ t To \ t pro}$						
ဋ	<u>e</u>	and nursing home living and other related	servi	ces to sen	ior adults.			
Ę,	2 0	Check this box 🕨 🔲 if the organization discontinued its operations or disposed	d of more t	than 25% of its net as	ssets.			
ě		lumber of voting members of the governing body (Part VI, line 1a)		3	1			
Ĝ		lumber of independent voting members of the governing body Party line 19)						
∞ಶ	- '	idinate of independent voting members of the governing blady Party - in e 16)		4				
Activities & Governance	5 T	otal number of individuals employed in calendar year 2014 (Part V line 2a)		5				
ξ	6 T	otal number of volunteers (estimate if necelINOVENCY SECTION		6	0			
Ę	7 a T	otal unrelated business revenue from Part VIII, column (C), line 12		78	0.			
⋖	ЬМ	let unrelated business taxable income from Form 99010 the 344 2016		71	0.			
	· · · · · · · · · · · · · · · · · · ·			Prior Year	Current Year			
	ے وا	Contributions and grants (Bost VIII line 1b) ALL BEVENUE RERVICE	E	1,013,670.				
ē	8 0	Contributions and grants (Part VIII, line 1)NTERNAL REVENUE SERVICE	-					
Revenue	9 P	rogram service revenue (Part VIII, line 2g)		6,096,978.				
ě	10 Ir	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	L	26.	17.			
Œ	11 C	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		140,000.	0.			
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		7,250,674.	!			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.				
		senefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	0.				
S	15 S	salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,068,194.				
Expenses	16a P	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
be	ЬТ	otal fundraising expenses (Part IX, column (D), line 25)	o. 🥅					
ŭ	17 0	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,030,217.	4,053,718.			
		· · · · · · · · · · · · · · · · · · ·		8,098,411.				
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	ļ					
		levenue less expenses Subtract line 18 from line 12		-847,737.	-1,347,942.			
S OF	1		Beg	inning of Current Year				
Assets (20 T	otal assets (Part X, line 16)		9,622,283.	8,633,112.			
ASS	21 T	otal liabilities (Part X, line 26)		35,889,603.				
let let	1	let assets or fund balances Subtract line 21 from line 20		26,267,320.				
	rt II	Signature Block	- <u> </u>	20,201,320	27,213,050.			
								
		ies of perjury, I declare that I have examined this return, including accompanying schedules at			ly knowledge and belief, it is			
true.	, correct,	and complete, Declaration of preparer (other than officer) is based on all information of which	h preparer t	nas any knowledge. /				
				1/6	11,2016			
Sig	n	Signature of officer		Date				
	1.	Steven J. Thomas, Chief Restructuring O	ffice	~				
Her	٠	Type or print name and title		-				
			200	<u> </u>				
	1	Print/Type preparer's name Preparer's signature	////	ate Check	PTIN			
Paid	ı [F	Reece B. Morrel, Jr. Kuil Mon	W/	1/11/2005 elf-emplo	pyed P00173422			
Preg	arer [Firm's name MORREL & MORREL PC	-	Firm's EIN	73-0971106			
Use Only Firm's address 6846 S Canton Ave Ste 200								
536								
_	Tulsa, OK 74136-3400 Phone no. 918-664-0800							
May	the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No			
4320	01 11-07-	14 LHA For Paperwork Reduction Act Notice, see the separate instructions	s.		Form 990 (2014)			

	1990 (2014) Go Ye Village, Inc.	73-0959566	Page 2
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	To provide independent, assisted and nursing home living	and other	
	related services to senior adults.		
2	Did the organization undertake any significant program services during the year which were not listed on		
2		□ vaa	X No
	the prior Form 990 or 990-EZ?	res	T NO
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	L Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as m	leasured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	, the total expenses, ar	nd
	revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 3,494,617. including grants of \$) (Revenue	2,649,	247.)
	Apartments: Go Ye Village Inc provides housing at below-m		
	for approximately 200 senior-adult residents.	<u></u>	
	tol approximately 200 benior addit residencs.		
			
4b	(Code) (Expenses \$ 1,906,655. including grants of \$) (Revenue	1,836,	809. \
713	Medical Center: Go Ye Village Inc has a 32-bed medical ce		
	available to the senior adult residents on an as needed by		
	medical care of residents is essential to the village's p		nt
	purpose and is provided at below market prices.	TIMALY EXEM	<u>pc</u>
	purpose and is provided at below market prices.		
			
4c	(Code) (Expenses \$1, 169, 758. including grants of \$) (Revenue	872.	646.)
70	Cafeteria: Go Ye Village Inc operates an on-site cafeteri		<u> </u>
	provides food service for assisted-living and nursing hom		111 +
	residentss. It is also available for senior adult independent	ingent-11vin	<u>.g</u>
	residents.		
			
			
4d	Other program services (Describe in Schedule O)	00 555	
		.23,777.)	
<u>4e</u>	Total program service expenses ► 6,593,360.		
		Form (990 (2014)

Form	990 (2014) Go Ye Village, Inc. 73-09	959566	P	age 3
Pą	t IV Checklist of Required Schedules			
			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	_X_	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, PartI	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in ef	iect		
	during the tax year? If "Yes," complete Schedule C, PartII	4		X
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 98-197 If "Yes," complete Schedule C, Partill	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Pa	arti 6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			1
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule Q Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		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, permane	ınt		
	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, 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 E	}		
	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		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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 Q Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			<u>,,</u>
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		ŀ	١,,
	Schedule D, Parts XI and XII	12a		X
p	Was the organization included in consolidated, independent audited financial statements for the tax year?			,,
40	If "Yes," and if 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
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	X
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1 1		1
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	.	ł	1

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

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

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 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 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

complete Schedule G, Part III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

or more? If "Yes," complete Schedule F, Parts I and IV

foreign organization? If "Yes," complete Schedule F, Parts II and IV

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Form 990 (2014)

X

X

14b

15

16

17

18

19

20b

Form 990 (2014) Go Ye Village, Inc.

Part IV Checklist of Required Schedules (continued)

21 Dd the organization report more than \$5,000 of grains or other assistance to any domestic organization or domestic organization report more than \$5,000 of grains or other assistance to or for domestic organization report more than \$5,000 of grains or other assistance to or for domestic individuals on Part IX, columin (A), intel ² if "ves," complete Schedula (I Part I I I I I I I I I I I I I I I I I I I				Yes	No_
22 X 23 Did the organization report more than \$5.000 of grants or other assistance to or for domestic individuals on Part IX, column (A), tine 2? If "Yes," complete Schedule I, Parts I and III 24 Did the organization answer "Yes" to Part VII.Section A, tine 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule Schedule I, Part II and the organization have a tax exempt bond is sue with an outstanding principal amount of more than \$100,000 as of the tast day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule IV, If "Yes," organization have a tax exempt bonds beyond a temporary period exception? 25 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? 26 Did the organization and the secret organization and the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I. Part II b to organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I. Part IV is the organization approach a grant or other assistance to an officer, director, trustee, levy employees, or disqualified persons? If "Yes," complete Schedule I. Part IV instructions for applicable limps threaholds, conditions, and exceptions) 27 A Schedule I. Part IV instructions for applicable limps threaholds, conditions, and exceptions) 28 A current or former officer, director, trustee, levy employees, or disqualified persons? If "Yes," complete Schedule II. Part IV instructions for applicable limps threaholds, conditions, and exceptions) 29 A Complete Schedule II. Part IV instructions for applicable limps threaholds, conditions, and exceptions) 29 A Complete Schedule II. Part IV instructions for applicable limps threaholds, conditions, an	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
Part IX. column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization assert "Yes" to Part VII, Section A, line 3, 4 or 8 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I. Part III and 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 II. Part III and the organization in west any proceeds of tax exempt bonds beyond a temporary period exception? 24b		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>X</u>
23 Dut the organization answer "Yes" to Part VII, Section A, line 3.4, or 5 about compensation of the organization is current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I. 24 24a Dut the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the tast 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 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II and that the transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II and the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, furctices, fluctors, fluc	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
23 Did the organization answer "Yes" to Part VII, Section A, Ine 3, 4, or 5 about compensation of the organization's current and former officiers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, Part IV instructions for applicable fling thresholds, conditions, and exceptions) 24 Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$10,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule III of the organization maintain an escrow account other than a refunding secrow at any time during the year of the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year of the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year of the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year of the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year of the organization are than a refunding secrow at any time during the year of the organization are than a foreign of the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction are to the enganization are provided an any of the organization provide a given or other assistance to an officer, director, trustees, level employees, or disqualified persons? If "Yes," complete Schedule II, Part IV orgonization are provided a given or other assistance to an officer, director, trustee, level employees, or disqualified persons? If "Yes," complete Schedule II, Part IV instructions for applicable fling thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee, or disqualified persons? If "Yes," complete Schedule II, Part IV instructions for applicable fling t		Part IX, column (A), line 2? If "Yes," complete Schedule I. Parts I and III	22	1	X
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 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 Docember 31, 2002? If "Yes," answer lines 24th through 24d and complete Schedule K. If "No", go to the 25a Did the organization missed and ne scrow account other than a refunding scrow at any time during the year of defease any tax-exempt bonds? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Did the organization invest arise response to many of the organization engage in an excess benefit transaction with a disqualified person during the year? Section 50 (k)(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? Section 50 (k)(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? Did the organization aware that the regaged in an excess benefit transaction has not been reported on any of the organization sepons and that the transaction has not been reported on any of the organization sepons and any of the organization are port any amount on Part X. line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, every employee? If "Yes," complete Schedule L, Part IV any of the organization provide a grant or other assistance to an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV and the organization receive more than \$25.000 in non-cash common to end the following parties (see Schedule L, Part IV and the organization receive more than \$25.000 in non-cash common to end to end the receive and the organization	23				
Schedule J 24a Did the organization have a tax exempt bond issue with an oustlanding 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 Did the organization maintain an escrow account other than a refunding scrow at any time during the year to defease any tax-evempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-evempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-evempt on the programization and that the transaction with a disqualified person on a prory rear, and that the transaction with a disqualified person on a prory year, and that the transaction with an been reported on any of the organization's prior Porms 990 or 990-EZT If "Yes," complete Schedule I, Part II D off the organization provide a grant or other assistance to an officer, director, trustee, key employees, or disqualified persons? If "Yes," complete Schedule I, Part III 25b				Į	
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 It. "No", or to the 25s b) Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? c) Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? c) Did the organization invest any proceeds of tax exempt bonds outstanding at any time during the year to defease any tax exempt bonds? d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24c 24d 22s Section 501c(3), 501c(4), and 501c(12g) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-627; If "Yes," complete Schedule I, Part I I bid 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 I, Part IV instructions 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 I, Part IV instructions for applicable infight thesholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I, Part IV instructions for applicable fing thresholds, conditions, and exceptions? a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I, Part IV instructions for applicable from the organization receive or controllations of the programization receive or controllations of the preport of the programization receive or controllations of the prog			23		Х
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Schedule K. If *No**, go to fine 25a b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? c Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? c Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? c Did the organization invest any proceeds of tax exempt bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization avait as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If *Yes,** complete Schedule L, Part I 25a	274			· · · · · · · · · · · · · · · · · · ·	
b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 246 Section 501(3), 501(4), and 501(k), and 501(k)(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 b) Is the organization avaire that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization spore Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II 25b			242		x
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 246 d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(o)(3), 501(o)(4), and 501(o)(29) organizations. Did the organization repairs in a research with a disqualified person during the year if" yes, "complete Schedule I., Part I 25a	.	· ·			 -
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Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32		If "Yes." complete Schedule N. Partl	31		Х
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 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35b 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 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 X 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 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	32				
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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 35b 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 A X 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 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			32		Х
sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34	33		[-
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 35b X 36a Section 501(c)(3) 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 36a 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 36a X 37a 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 37a X 38a 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	-		33		x
Part V, line 1 34	34				$\overline{}$
Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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, Iine 2 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, Iine 2 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 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	•		34	ļ	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 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 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 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 X	35a				
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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 X 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 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 X	J		35h		
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Note. All Form 990 filers are required to complete Schedule O	20	·	31		<u> </u>
	<i>3</i> 8		000	v	
		NOTE: All 1 Offit 350 filets are required to complete Schedule O			(201.4)

Par								
	Check if Schedule O contains a response or note to any line in this Part V				للل			
	5 to 11 to 1 to 1 to 1 to 1 to 1 to 1 to	1a 0		Yes	No			
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a U						
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and re			3				
С	(gambling) winnings to prize winners?	portable garring	1c	1.100	<u> </u>			
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	!		·	1 4			
Za	filed for the calendar year ending with or within the year covered by this return	2a 172		1 E	74			
b								
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions		2b	X	-, ·			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	· /	3a		X			
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	o	3b					
	At any time during the calendar year, did the organization have an interest in, or a signature or other a							
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		X			
b	If "Yes," enter the name of the foreign country:			. 4				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ar	ccounts (FBAR)		<u> </u>				
	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	ction?	5b		X			
	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 th	e organization solicit			7.5			
	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 contributi	ons or gifts			!			
-	were not tax deductible?		6b					
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a	-	X			
a b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	vices provided to the payor	7b					
	Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was	as required	-,5					
Ŭ	to file Form 8282?	20 / Oquil 00	7c		х			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		٠.	10°E			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	ontract?	7e		X			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	act?	7f		Х			
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 8899 as required?	7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file a Form 1098-C?	7h		<u> </u>			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the	<u></u>	<u>-</u>	ļi			
	sponsoring organization have excess business holdings at any time during the year?		8		 			
9	Sponsoring organizations maintaining donor advised funds.	v	ļ	. 17-	-7,			
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		├ ─			
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		├			
10	Section 501(c)(7) organizations. Enter	الما	į .					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter	10b	1	,	35			
11 a	Gross income from members or shareholders	11a		2 2 2 2 4	- *			
b	Gross income from other sources (Do not net amounts due or pad to other sources against		1 ,					
_	amounts due or received from them.)	116						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		-	, "	* * 3.			
а	Is the organization licensed to issue qualified health plans in more than one state?		13a					
	Note. See the instructions for additional information the organization must report on Schedule O.			ř	\ · ` ` `			
b	Enter the amount of reserves the organization is required to maintain by the states in which the		1					
	organization is licensed to issue qualified health plans	13b	4	1				
c		13c	-	 	 			
	Did the organization receive any payments for indoor tanning services during the tax year?		14a	├ —-	X			
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	le O	14b		1			
			Forn	n 990	(2014)			

Form 990 (2014) Go Ye Village, Inc. 73-0959566 Pact VI 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			
Sec	tion A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 8						
	If there are material differences in voting rights among members of the governing body, or if the governing	7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		AL.			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent 1b 8		1	6.5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other						
	officer, director, trustee, or key employee?	2		X			
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?	3_		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X			
6	Did the organization have members or stockhdders?	6		X			
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, stockholders, or			İ			
	persons other than the governing body?	7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			ш			
а	The governing body?	8a	Х				
b	Each committee with authority to act on behalf of the governing body?	8b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			l			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)						
			Yes	No			
	Did the organization have local chapters, branches, or affiliates?	10a		X			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,						
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	¥*		X			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		├──			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40.					
40	In Schedule O how this was done	12c	<u> </u>	х			
13	Did the organization have a written whistleblower policy?	13		X			
14	Did the organization have a written document retention and destruction policy?	14	,	<u> </u>			
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		1	* -			
а	The organization's CEO, Executive Director, or top management official	15a	 `	X			
	Other officers or key employees of the organization	15b		X			
v	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	1.50	, .	 -			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		;	l,			
	taxable entity during the year?	16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100					
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	1	- '	<u>.</u>			
	exempt status with respect to such arrangements?	16b		o			
Sec	tion C. Disclosure		•				
17	List the states with which a copy of this Form 990 is required to be filed ▶OK						
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) a	valabl	e				
	for public inspection. Indicate how you made these available. Check all that apply.						
	Own website Another's website X Upon request Other (explain in Schedule O)						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	al				
	statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's books and records						
	The Organization - 918-456-4542						
	1201 West Fourth Street, Tahlequah, OK 74464						

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

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 belisted 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.

(A)	or any related organization compensated (B) (C)					1		(D)	(E)	(F)
Name and Title	Average	,	Position (do not check more than one					Reportable	Reportable	Estimated
	hours per	Ьох	box, unless person officer and a direct			son is both an		compensation	compensation	amount of
	week		ceran	d a d	recto	r/trus	tee)	from	from related	other
	(list any	trustee or director						the	organizations	compensation
	hours for	i i	83			aled		organization	(W-2/1099-MISC)	from the
	related	ustee	trust		, e	bens		(W-2/1099-MISC)		organization
	organizations below	ual tr	tional		ploy	t con				and related organizations
	line)	Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	orme			Organizations
(1) Fred Richardson	2.00	 	_							
Board Member		Х						0.	0.	0.
(2) Ronald Genheimer	3.00									
Board Member	0.00	X						0.	0.	0.
(3) Leland Howard	2.00				1					
Board Member	0.00	X	<u> </u>	<u> </u>				0.	0.	0.
(4) Cheryl Kroeker	2.00							_	_	_
Board Member	0.00	X	_					0.	0.	0.
(5) Linden Baker	2.00									
Board Member		X		_				0.	0.	0.
(6) Kenneth L Koehn	3.00									
Board Member (7) Buddy Hunt	2.00	X	 		<u> </u>	\vdash		0.	0.	0.
Board Member	0.00	x						0.	0.	0.
(8) Dalton Bigby	2.00	^	-			_		· ·		0.
Board Member		x			1			0.	0.	0.
(9) Maurice D Turney	2.00	 -					_			<u></u>
President	0.00	1		х				0.	0.	0.
(10) Ruby Rebhorn	2.00									
Secretary	0.00			Х	<u></u>			0.	0.	0.
(11) James A Richardson	40.00									
Executive Director	0.00		_	Х	<u> </u>			60,088.	0.	0.
(12) Jacob Richardson	40.00									
Chief Financial Officer	0.00	<u> </u>		X				71,506.	0.	0.
										
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Form **990** (2014)

432008 11-07-14 Form 990 (2014)

. 4.		Check if Schedule O cont		or note to any lin	e in this Dart VIII			٢
		Check if Schedule O conta	anis a response	or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
aifts, Grants ar Amounts	1 a b c d	Federated campaigns Membership dues Fundraising events Related organizations	1a 1b 1c 1d			- 1.5 - 1.5		
Contributions, Gifts, Grants and Other Similar Amounts	e f g		ts, and /e 1f	632,911.				
<u>0 g</u>	h	Total. Add lines 1a-1f			632,911.			
		26-441 G		Business Code		1 006 000		
<u>8</u>		Medical Center			1,836,809.			
e c		Residential Lod Lifetime Care R			1,528,550. 1,120,697.			
E G		Cafeteria	evenue	623990	872,646.			
Be	u	Convenience Sto	re/Supp	623990	87,684.			
Program Service Revenue	e	All other program service reve		623990	36,076.	36,076.		
_		Total. Add lines 2a-2f	nue		5,482,462.	30,070.		
	3	Investment income (including	dividends intere		3 / 102 / 102 .			
	•	other similar amounts)	aa.,	▶	17.	17.		
l	4	Income from investment of tax	c-exempt bond p	roceeds			 	
	5	Royalties	,,	>				
		•	(i) Real	(II) Personal		-		
	6 a	Gross rents			-	-		
	b	Less rental expenses				- ,		· .
	C	Rental income or (loss)		<u> </u>				
ļ	d	Net rental income or (loss)						
-	7 a	Gross amount from sales of	(i) Securities	(II) Other	•	*		-
i		assets other than inventory						
	b	Less: ∞st or other basis						
		and sales expenses						
		Gain or (loss)		l				
		Net gain or (loss)		> _			<u> </u>	
e e	ва	Gross income from fundraising						
Other Revenue		including \$contributions reported on line	of 1c) See					, }
ē		Part IV, line 18	a					
ㅎ		Less: direct expenses Net income or (loss) from fund	b					<u> </u>
ļ		Gross income from gaming ac	_					
ļ	<i>5</i> a	Part IV, line 19	a a				-	
1	b	Less direct expenses	a b					
		Net income or (loss) from gam						
		Gross sales of inventory, less						
		and allowances	а					*
	b	Less cost of goods sold	b					
Ŀ	С	Net income or (loss) from sale	s of inventory					
		Miscellaneous Revenue		Business Code				
	11 a							
	b							
	С							
	d	All other revenue						
		Total. Add lines 11a-11d		>	<u> </u>	5 400 155		ļ
432009	12	Total revenue. See instructions.		<u> </u>	6,115,390.	<u>5,482,479.</u>	0.	
11-07-	14							Form 990 (2014)

Form 990 (2014) Go Ye Village, Inc. Part IX | Statement of Functional Expenses

	Check if Schedule O contains a responsion include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				1000 1000 1000 1000 1000 1000 1000 100
	and domestic governments. See Part IV, line 21				क रीजिल्ली रेक्ट्रीको स्टे
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22			, i.e., , r =	
3	Grants and other assistance to foreign				A STORY
	organizations, foreign governments, and foreign				4 1
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	131,594.		131,594.	
	trustees, and key employees	131,394.		131,334.	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	147,444.	147,444.		
7	Other salaries and wages	2,762,476.	2,378,937.	383,539.	
8	Pension plan accruals and contributions (include	27.0271701	270707557	303,333.	
•	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	133,033.	133,033.		<u> </u>
10	Payroll taxes	235,067.	196,346.	38,721.	
11	Fees for services (non-employees)				
а	Management				
b	⁻				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17			1 to 1	
f	Investment management fees				
9	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	529,988.	461,510.	68,478.	
12	Advertising and promotion	29,452.		29,452.	
13	Office expenses				ļ
14	Information technology				ļ
15	Royalties	0.400	0.400		
16	Occupancy	8,400.	8,400.	0.701	
17	Travel	9,791.		9,791.	
18	Payments of travel or entertainment expenses				1
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings Interest	711,961.	711,961.		
20	Payments to affiliates	111,301.	,11,301.		
21 22	Depreciation, depletion, and amortization	588,482.	588,482.		
23	Insurance	159,694.	151,254.	8,440.	
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 0.)	, i		·.	
а	Supplies [1,085,420.	1,021,207.	64,213.	
b	TTL: 1: Line C Maine	483,746.	483,746.		
С	Wantana Com C IInamalasa	145,673.	141,077.	4,596.	
d	D	90,672.	90,672.		
е	All other expenses	210,439.	79,291.	131,148.	
25_	Total functional expenses Add lines 1 through 24e	7,463,332.	6,593,360.	869,972.	
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

<u>romi 990</u>		
Part X.	Balance	She

LPai	rt X.	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	156,531.	1	-60,506.
	2	Savings and temporary cash investments	272,709.	2	272,614.
	3	Pledges and grants receivable, net		3	<u> </u>
	4	Accounts receivable, net	98,448.	4	-124,328.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		Part II of Schedule L		<u> </u>	
	6			5	
	"	Loans and other receivables from other disqualified persons (as defined under		-	
	i	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary		, .	
Assets	_	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Ass	7	Notes and loans receivable, net	···	7	
1	8	Inventories for sale or use	24 000	8	15 404
	9	Prepaid expenses and deferred charges	24,082.	9	17,494.
	10a	Land, buildings, and equipment: cost or other			建设建筑
		basis Complete Part VI of Schedule D Less accumulated depreciation 10a 23,667,711 10b 15,140,967	0.060.410	-	0.506.544
	l		9,069,419.	10c	8,526,744.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11	1 004	13	1 004
	14	Intangible assets	1,094.	14	1,094.
	15	Other assets. See Part IV, line 11	0 600 000	15	0 600 110
	16	Total assets. Add lines 1 through 15 (must equal line 34)	9,622,283.	16	8,633,112.
	17 18	Accounts payable and accrued expenses	728,530.	17	236,871.
		Grants payable	0 101 712	18	0 020 105
	19	Deferred revenue	8,101,713.	19	8,830,105.
	20 21	Tax-exempt bond liabilities	· · · · · · · · · · · · · · · · · · ·	20	
	22	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,		, ;	
j <u>i</u> i		key employees, highest compensated employees, and disqualified persons	1 410 000		1 512 100
Lia	00	Complete Part II of Schedule L	1,419,902. 22,003,950.	22	1,513,198.
	23 24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties	22,003,950.	23	25,105,293.
	25			24	
	23	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	3,635,508.		162 525
	26	Total liabilities. Add lines 17 through 25	35,889,603.	25	163,535. 35,849,002.
	20		33,003,003.	26	33,043,002.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ and complete lines 27 through 29, and lines 33 and 34.			
š	27	Unrestricted net assets	 -	07	
lan	28	Temporarily restricted net assets		27	
Ba	29	Permanently restricted net assets	<u> </u>	28 29	
를		Organizations that do not follow SFAS 117 (ASC 958), check here	11.	29	
Ē		and complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	0.	20	0.
se	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	30	0.
I As	32	Retained earnings, endowment, accumulated income, or other funds	-26,267,320.	31	-27,215,890.
Š	33	Total net assets or fund balances	-26,267,320.	32	
1	34	Total liabilities and net assets/fund balances	9,622,283.	33	-27,215,890. 8 633 112
	VT	10 tal indominos and not assets/lund balances	<u> </u>	34	8,633,112.

Form **990** (2014)

	rm 990 (2014) Go Ye Village, Inc. 73-09595				Pag	_{qe} 12
Pai	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1 2 3 4 5 6 7 8	1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) oninvestments 6 Donated services and use of facilities 7 Investment expenses 7				5,39 3,33 7,94 7,33	32.
9	Other changes in net assets or fund balances (explain in Schedule O)	9		399	9,3	<u>/2.</u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,		0.77	21	- 0	00
Day	column (B))	10	-27,	<u>Z</u> 1:	5,8	90.
Гаі	rt XIII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				Yes	No
1 2a	1 Accounting method used to prepare the Form 990					X
	Separate basis Consolidated basis Both consolidated and separate basis		L	-	~~ ,>	
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					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	ļ.			
	review, or compilation of its financial statements and selection of an independent accountant?		-	2c		
_	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O					; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
3а	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit					
	Act and OMB Circular A-133?		. }	_3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ed aud	π	AL		

432012 11-07-14 Form **990** (2014)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

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

➤ Attach to Form 990 or Form 990-EZ.

Inspection

OMB No 1545-0047

Name of the organization

Employer identification number

	Go Y	e Village,	Inc.				73-0959566				
Part I	Reason for Public (Charity Status 🕢	All organizations must co	mplete th	is part) Se	e instructions.					
The organ	organization is not a private foundation because it is (For lines 1 through 11, check only one box)										
1 🔲	A church, convention of chi	urches, or associatio	n of churches described	in section	n 170(b)(1)(A)(i).					
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
3 🗔	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,										
• —	city, and state:										
5 🗌	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
• 🗀											
e 🗀	section 170(b)(1)(A)(iv). (Complete Part II)										
6 🖳	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in										
7 📖	_	=	ntial part of its support if	om a gove	ernmentai	unit or from the gene	erai public described in				
. \Box	section 170(b)(1)(A)(vi). (C	•	(4)(4)(4)(-1) (Olate David								
8 🖳	A community trust describe										
9 X	An organization that norma										
	activities related to its exen						-				
	income and unrelated busin		(less section 511 tax) fro	m busines	sses acquii	red by the organizati	on after June 30, 1975.				
. —	See section 509(a)(2). (Con										
10	An organization organized a										
11	An organization organized	="	•	-			• •				
	more publicly supported or						3). Check the box in				
_	lines 11a through 11d that	* *									
a	Type I. A supporting orga	•	•		•						
	the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	tors or trustees of th	ne supporting				
	organization You must o	complete Part IV, Se	ections A and B.								
b	☐ Type II. A supporting org	anızatıon supervised	or controlled in connect	ion with it	s supporte	d organization(s), by	having				
	control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the	supported				
	organization(s). You mus	t complete Part IV,	Sections A and C.								
c 🗆	Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionally integ	grated with,				
	its supported organization	n(s) (see instructions)	You must complete I	Part IV, Se	ections A,	D, and E.					
d [Type III non-functionally	integrated. A supp	orting organization oper	ated in co	nnection w	rith its supported or	ganızatıon(s)				
	that is not functionally int	egrated The organiz	ation generally must sat	sfy a distr	bution rec	urement and an att	entiveness				
	requirement (see instructi	ons) You must con	nplete Part IV, Sections	A and D,	and Part	V.					
е 🗀	Check this box if the orga						e III				
	functionally integrated, or										
f Ent	er the number of supported o	* '	, , , , , , , , , , , , , , , , , , , ,	3 - 3							
a Pro	vide the following information	about the supporte	d organization(s)				<u> </u>				
		(II) EIN	(III) Type of organization	(IV) Is the o	rganization	(v) Amount of monet	ary (vi) Amount of				
	organization		(described on lines 1 -9	listed i governing d		support (see	other support (see				
			above or IRC section (see instructions))	Yes	No	Instructions)	Instructions)				
			(2223/3000000000000000000000000000000000	<u> </u>							
											
											
			· -	-							
				<u> </u>							
Total											

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 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.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")			}		,	
2 Tax revenues levied for the organ						
ization's benefit and either paid to		}		ł	1	
or expended on its behalf						
3 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge		ĺ		[[
4 Total. Add lines 1 through 3				1		
						
5 The portion of total contributions by each person (other than a	<u>.</u>				j	
governmental unit or publicly		× .				
		· . · .	, -		-	
supported organization) included	ي ع	,	in the second			
on line 1 that exceeds 2% of the						
amount shown on line 11,		-				
column (f)		<u> </u>				
6 Public support. Subtract line 5 from line 4		·	<u> </u>	<u></u>	<u> </u>	
Section B. Total Support		T #10044			1 1 2014	(0 T)
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4			<u> </u>			
8 Gross income from interest,			}	ļ		
dividends, payments received on						
securities loans, rents, royalties		1			1	
and income from similar sources						ļ
9 Net income from unrelated business		1				
activities, whether or not the						
business is regularly carried on		<u> </u>	L	L		·
10 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part VI)		<u> </u>	<u> </u>	<u> </u>		
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities,	etc. (see instruction	ons)			12	
13 First five years. If the Form 990 is for			d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
organization, check this box and stop	o here					▶ □
Section C. Computation of Publi	c Support Per	centage			<u> </u>	
14 Public support percentage for 2014 (I	ıne 6, column (f) d	ivided by line 11, o	olumn (f))		14	9
15 Public support percentage from 2013	Schedule A, Part	II, line 14			15	9
16a 33 1/3% support test - 2014. If the	organization did n	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
stop here. The organization qualifies						▶□
b 33 1/3% support test - 2013. If the		•		l line 15 is 33 1/3%	6 or more, check th	is box
and stop here. The organization qual						►
17a 10% -facts-and-circumstances test				e 13, 16a. or 16b.	and line 14 is 10%	or more,
and if the organization meets the "fac		-				
meets the "facts-and-circumstances"						▶
b 10% -facts-and-circumstances test	-			-	17a and line 15 is	1 0% or
more, and if the organization meets the						_
organization meets the "facts-and-organization"		-				
18 Private foundation. If the organization	an ulu not check a	DOX OF THE 13, 10	a, 100, 1/a, 01 1/1		edule A (Form 990	

432022 09-17-14 Schedule A (Form 990 or 990-EZ) 2014 Go Ye Village, Inc.

Part III | 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						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	ļ			_		
	ınclude any "unusual grants.")	510,600.	292,028.	807,927.	1013670.	632,911.	3257136.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						· ·
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf	5939808.	5320165.	5757829.	6096978.	5482462.	28597242.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	6450408.	5612193.	6565756.	7110648.	6115373.	31854378.
76	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
Ł	nother than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
(Add lines 7a and 7b						0.
8	Public support (Subtract line 7c from line 6)	-		1			31854378.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	6450408.	5612193.	6565756.	7110648.	6115373.	31854378.
10	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	94.	121.	33.	26.	17.	291.
ł	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b	94.	121.	33.	26.	17.	291.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	59,075.	242,100.	371,750.	140,000.		812,925.
13	Total support. (Add lines 9, 10c, 11, and 12)	6509577.	5854414.	6937539.	7250674.	6115390.	32667594.
14	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ix year as a sectioi	n 501(c)(3) organız	ation,
_	check this box and stop here			 			<u> </u>
_	ction C. Computation of Publi						-
	Public support percentage for 2014 (-	olumn (f))		15	97.51 %
16						16	%
	ction D. Computation of Inves					T.=T	
	Investment income percentage for 20			ne 13, column (f))		17	.00 %
18	, ,				45	18	<u> %</u>
19	a 33 1/3% support tests - 2014. If the	•					7 is not ►X
1	more than 33 1/3%, check this box at b 33 1/3% support tests - 2013. If the	e organization did r	not check a box or	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	
~ -	line 18 is not more than 33 1/3%, che			•		•	▶ -
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	tructions	

Schedule A (Form 990 or 990-EZ) 2014

432023 09-17-14

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 Organization	ons
--	-----

- 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).
- 3a 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.
- 5a 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 BN 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 dass 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)
- 9a 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.
- 10a 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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7 8 9a	, , , , , , , , , , , , , , , , , , ,	ائے۔
7	<i>y</i>	ائے۔
7 8 9a	, , , , , , , , , , , , , , , , , , ,	ائے۔
7 8 9a 9b	<i>y</i>	ائے۔
7 8 9a	<i>y</i>	ائٹ
7 8 9a	<i>y</i>	نـــــا
7 8 9a	<i>y</i>	نـــــا
7 8 9a 9b	<i>y</i>	نـــــا
7 8 9a 9b		نـــــا
7 8 9a 9b	<i>y</i>	ائٹ
7 8 9a 9b		ائٹ

<u>Sche</u>	dule A (Form 990 or 990 EZ) 2014 Go Ye Village, Inc.	73-095956) Pa	ige 5
Pạr	t IV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		3,4	- 3
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	القنا	**	
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	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		
Sec	tion B. Type I Supporting Organizations			
			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	*	,	۲
	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	المنتقف ا	ئث	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	<u>.</u>	
2	Did the organization operate for the benefit of any supported organization other than the supported	3.4	ا بر ا	ľ.
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	*.*.	- A	a .
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		÷	
	supervised, or controlled the supporting organization.	2		Ĺ
Sec	tion C. Type II Supporting Organizations			r
		نـــنـ ـا	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		<u>,</u>	}
	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		-	
600	the supported organization(s).	1 1		l
Sec	tion D. Type III Supporting Organizations		Yes	No
1	Did the example to provide to each of the cumported example them. by the last day of the fifth month of the		165	No
'	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		13	
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the	The second of th	* * *** ***	
	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 Part VI how	1 - , - °	200	
	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	 	<u> </u>	
J	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	<u> </u>	
Sec	tion E. Type III Functionally-Integrated Supporting Organizations		L	·
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	structions) [,]		
а	The organization satisfied the Activities Test. Complete line 2. below	,		
þ	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity	ty (see instructions)		
2	Activities Test Answer (a) and (b) below		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		١.	.
	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,	-	7.	}
	how the organization was responsive to those supported organizations, and how the organization determined		<u> </u>	
	that these activities constituted substantially all of its activities.	2a	<u> </u>	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		: `	1
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		} -:	1
	reasons for the organization's position that its supported organization(s) would have engaged in these		1.7	
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			{
а		<u> </u>		
	trustees of each of the supported organizations? Provide details in Part VI.	За		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

	dule A (Form 990 or 990 EZ) 2014 Go Ye Village, Inc.		7	3-0959566 Page
Pa				
1	Check here if the organization satisfied the Integral Part Test as a qualify			uctions. All
—-	other Type III non-functionally integrated supporting organizations must of	complete S	ections A through E.	
Sect	ion A - Adjusted Net Income		(A) Pnor Year	(B) Current Year
1	Net short-term capital gain			(optional)
2	Recoveries of prior-year distributions	1	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
3	Other gross income (see instructions)	2		
_ 3 _		3		
	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		
Sect	on 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 short tax year or assets held for part of year)	- 7,		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d	· · · · · · · · · · · · · · · · · · ·	
	Discount claimed for blockage or other		3*,	
	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,	<u> </u>		
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	· · · · · · · · · · · · · · · · · · ·	
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		
Sect	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	- 5.7	
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	w	
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. 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-functional		ted Type III supporting organ	nization (see

Schedule A (Form 990 or 990-EZ) 2014

instructions)

Schedule A (Form 990 or 990-EZ) 2014

a b c

d Excess from 2013e Excess from 2014

<u>Schedule</u> A	(Form 990 or 990 EZ) 2014 Go Ye Village, Inc.	73-0959566 Page 8
Part VI	(Form 990 or 990-EZ) 2014 GO Ye Village, Inc. Supplemental Information. Provide the explanations required by Part II, line 10; I	Part II, line 17a or 17b, and Part III, line 12.
	Also complete this part for any additional information. (See instructions).	
		
		
		
	· · · · · · · · · · · · · · · · · · ·	
		

SCHEDULE D

(Farm 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No 1545-0047 Inspection -

Name of the organization

	Go Ye Village, Inc	•	7	3-0959566
Par				
	organization answered "Yes" to Form 990, Part IV, line			•
		(a) Donor advised funds	(b) Funds and	d other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	l funds		
-	are the organization's property, subject to the organization's			Yes No
6	Did the organization inform all grantees, donors, and donor a		sed only	
	for charitable purposes and not for the benefit of the donor of			
	impermissible private benefit?			Yes No
Par	t II. Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, Pai	rt IV, line 7	
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a histor	cally important la	ind area
	Protection of natural habitat	Preservation of a certific	ed historic structi	ıre
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of	a conservation ea	asement on the last
	day of the tax year.			
			Held	at the End ofthe Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c	
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	•	
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the o	rganization during	the tax
	year ►			
4	Number of states where property subject to conservation ea			
5	Does the organization have a written policy regarding the pe	- · ·		
_	violations, and enforcement of the conservation easements i			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,			
7	Amount of expenses incurred in monitoring, inspecting, and			
8	Does each conservation easement reported on line 2(d) above	ve satisty the requirements of section 170(n)	(4)(B)(I)	
_	and section 170(h)(4)(B)(ii)?	an accompate in its reliance and suppress at	tatamant and hal	Yes No
9	In Part XIII, describe how the organization reports conservationally include, if applicable, the text of the footnote to the organization	·		
	conservation easements	tion's illiancial statements that describes th	e organization s a	ecounting for
Pai	rt III Organizations Maintaining Collections of	f Art. Historical Treasures, or Oth	er Similar Ass	sets.
	Complete if the organization answered "Yes" to Form			
1a	If the organization elected, as permitted under SFAS 116 (AS		nt and balance sh	neet works of art.
	historical treasures, or other similar assets held for public ex	•		
	the text of the footnote to its financial statements that descr			-, -, -, -, -, -, -, -, -, -, -, -, -, -
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement a	nd balance sheet	works of art, historical
	treasures, or other similar assets held for public exhibition, e			
	relating to these items	•		ŭ
	(i) Revenue included in Form 990, Part VIII, line 1		▶ \$	
	(ii) Assets included in Form 990, Part X		▶ \$	
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial o		
	the following amounts required to be reported under SFAS 1		•	
а	Revenue included in Form 990, Part VIII, line 1		> \$	
b	Assets included in Form 990, Part X		> \$	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 432051 10-01-14

Schedule D (Form 990) 2014

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Continued			illage, In				044		73-09		
check all that apply a Public arbibtion d Loan or exchange programs Scholarly research c Other Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. Provide a description of the organization solicit or receive donations of air, historical treasures, or other similar assets to be seld to raise future starter than to be marriaged as part of the organization answered "Yes" to Form 930, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. The start of the organization answered "Yes" to Form 930, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. The start of the organization answered "Yes" to Form 930, Part X, line 21. The start of the organization included an amount on Form 990, Part X, line 21, for escrive or custodial account liability? Yes No If "Yes, explain the arrangement in Part XIII Direct here if the explanation has been provided in Part XIII Part XIII	<u> </u>										
a Public achibition d Loan or exchange programs b Scholarly research e Other c	3	-	on, and other record	ls, check	any of the f	ollowing that	are a sig	ınıficant u	ise of its c	ollection it	ems
b Scholarly research c Other Preservation for future generations				. $ egin{array}{c} $		•					
c Preservation for future generations. 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be seld to raise funds rather than to be mantaned as part of the organization's collection? Fart M. Ecorow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 950, Part IV, line 9, or reported an amount on Form 990, Part X, line 21, line 21 at its the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included in Form 990. Part X? b if "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year e) Distributions during the year that year the year that the years back (e) Four			C			hange progra	ıms				
4. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5. During the year, did the organization's collection of art, historical treasures, or other similar assets to be seld to raise funds rather than to be maintained as part of the organization's collection? Part XIII Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 950, Part XI, line 9. Is the organization an agent, fusitee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X. line 21. Is the organization an agent, fusitee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X. line 21. Is the organization than the arrangement in Part XIII and complete the following table: Complete the organization included an amount on Form 990, Part X. line 21, for escrow or custodial account liability? Yes No	þ	F	•	•	Other						
5 During the year, did the organization solect or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization collection? Part IV. Scorow and Custodial Arrangements. Complete if the organization anawered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, flusties, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table: Beginning balance Additions during the year Beginnin	С										
to be seld to rase funds rather than to be maintained as part of the organization's collection?	4		•		•	-			se in Part	XIII.	
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year e Distributions during the year 1 Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account habity?	5						r sımılar	assets	_	7	
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b if "Yes," explain the arrangement in Part XII and complete the following table: C Beginning balance d Additions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account habitity? Yes No b if "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part Ver Endowment Funds. Complete if the organization answered "Ves" to Form 930, Part IV, line 10. Beginning of year balance b Contributions 1 Administrative expenses g End of year balance b Cher expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment % b Permanent endowment E											No_
Tall Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No If Yes, "explain the arrangement in Part XIII and complete the following table: Amount 1c 1d 1d 1d 1d 1d 1d 1d	Pai			lete if the	organizatio	n answered '	'Yes" to l	Form 990	, Part IV, I	ne 9, or	
on Form 990, Part X? b if "Yes," explain the arrangement in Part XII and complete the following table: c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Distributions during the year f Ending balance a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part Vis. Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part W, line 10 [a Beginning of year balance b Contributions c Net investment earrings, gains, and losses d Grants or scholarships c Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment	12			diany for o	contributions	s or other ass	ets not u	ncluded			
b if "Yes," explan the arrangement in Part XII and complete the following table: C Beginning balance d Additions during the year e Distributions during the year 1 Ending balance 2a Did the organization include an amount on Form 930, Part X, line 21, for escrow or custodial account hability? Ves No If "Yes," explain the arrangement in Part XII Check here if the explanation has been provided in Part XII Part VF Endowment Funds. Complete if the organization answered "Yes" to Form 950, Part IV, line 10 [a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back Grants or scholarships c Other expenditures for facilities and programs f Administrative expenses g End of year balance D Permanent endowment 96 Temporarily restricted endowment 97 The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (ii) related organizations (iii) related organizations (iiii) related organizations (iiii) related organizations (iii) related organizations (ıa		and other intermed	nary for c	SOMEMBARIONS	or other ass	octo riot ii	loladea	Γ-	Vec	□ No
c Beginning balance d Additions during the year e Distributions during the year e Distributions during the year 1 Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account hability? 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account hability? 2b Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account hability? 2c Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account hability? 2c Did the organization include an amount on Form 990, Part X, line 10 2c Did the organizations and programs d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment y6 b Permanent endowment y6 The percentages in lines 2a, 2b, and 2c should equal 100% 3a, Are there endowment India not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization serios (b) Cost or other basis (investment) basis (investment) Describe in Part XIII the intended uses of the organization is endownent funds 1 Land b Buildings C Lessehold improvements d Equipment 1, 237, 966 1, 237, 966 . 5 1, 237, 966 . 7, 109, 315 . 5	h	•	and complete the fo	llowing t	able:					_ 163	140
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or oustodial account lability? Ves No If "Yes, explain the arrangement in Part XII Check here if the explanation has been provided in Part XIII Part VE Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (ai) held as a Board designated or quasi-endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by "Yes No 3a(i), are the related organizations (ii) related organizations b if "Yes" to 3a(i), are the related organization sheld as required on Schedule R? 4. Describe in Part XIII the intended uses of the organization's endowment funds Part VF Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment funds Part VF Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment funds Part VF Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment funds Part VF Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part X, line 10. Describe in Part XIII the intended uses of t	D	i res, explain the arrangement in Fait Allia	and complete the to	mownig t	abie.					Amount	
d Additions during the year Distributions during the year 1 1 1 1 1 1 1 1 1	_	Pegunana balanca						10		Amount	
e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the grangement in Part XII Check here if the explanation has been provided in Part XIII Part Ve Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasisendowment % b Permanent endowment % c Temporarily restricted endowment % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) i related organizations (ii) related organizations (ii) related organizations (ii) related organizations 5 If "Yes" to 3a(i), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI: Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (investment) basis (investment) c Leasehold Improvements d Equipment 1, 237, 966 , 1, 237, 966 , 1, 237, 966. or 1, 1, 237, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		- ·									
Tending balance Tending b											
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No No No No No No No N	_										
b If "Yes," explain the arrangement in Part XII Check here if the explanation has been provided in Part XII Part Vs Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (d) Three years back (e) Four years back (e)		_	000 D- () ()	04 5						7	T
Part V# Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four year		_						ty	l	」 Yes	H No
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e											
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b if "Yes" to 3a(i), are the related organizations listed as required on Schedule R? 4. Describe in Part XIII the intended uses of the organization's endowment funds Part VE Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10. Describen of property (a) Cost or other basis (other) depreciation 1a Land 1, 237, 966. 1, 237, 966. 5 Uniquently (b) Cost or other basis (other) depreciation 1b Buildings 20, 574, 641. 13, 465, 326. 7, 109, 315. c Leasehold improvements d Equipment 293, 072. 271, 354. 21, 718.	rai	t w. Endowment Funds. Complete								4) 5	
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment			(a) Current year	(b) F	rior year	(c) Iwo year	rs back	(d) Three	years back	(e) Four	/ears dack
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶	1a			ļ.———						ļ	
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b if "Yes" to 3a(i), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI: Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10. Describe in Part XIII the intended uses of the organization's endowment funds 1a Land	þ		<u> </u>	 						 	
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶	С		ļ	<u> </u>		<u> </u>					
and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶		•	[<u> </u>	 -			 	
g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (ai) held as a Board designated or quasi-endowment	е	· '		}		ļ	1			ļ	
g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶		· •		 		 					
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment	f	·	<u> </u>	 							
Board designated or quasi-endowment	g	•		<u> </u>		<u> </u>				L	
b Permanent endowment ▶	2		rent year end baland		g, column (a))) held as					
Temporarily restricted endowment ►	a	•		%							
The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations 3a(i)	b		%								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI: Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) 1a Land 1,237,966. Description of property (a) Cost or other basis (other) 20,574,641. 13,465,326. 7,109,315. c Leasehold improvements d Equipment 293,072. 271,354. 21,718.	С	• •									
Yes No											
(i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI: Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 1,237,966. 5 Buildings 20,574,641. 13,465,326. 7,109,315. c Leasehold improvements d Equipment 4 Cother 1,562,032. 1,404,287. 157,745. e Other	3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	it are held ar	nd administer	red for th	e organız	ation	_	
(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI: Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1 , 237 , 966		-									res No
b If "Yes" to 3a(i), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI: Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) 1a Land 1,237,966. 5 Buildings 20,574,641. 13,465,326. 7,109,315. c Leasehold improvements d Equipment 293,072. 271,354. 21,718.											-+-
Part VI: Land, Buildings, and Equipment.		-									
Part VI: Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 1,237,966. 1,237,966. b Buildings 20,574,641. 13,465,326. 7,109,315. c Leasehold improvements 1,562,032. 1,404,287. 157,745. e Other 293,072. 271,354. 21,718.	b		•							3b	
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation	4			owment 1	unds						
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation	Pa					-					
basis (investment) basis (other) depreciation 1a Land 1,237,966. 1,237,966. b Buildings 20,574,641. 13,465,326. 7,109,315. c Leasehold improvements 1,562,032. 1,404,287. 157,745. e Other 293,072. 271,354. 21,718.									 		
1a Land 1,237,966. 1,237,966. b Buildings 20,574,641. 13,465,326. 7,109,315. c Leasehold improvements 1,562,032. 1,404,287. 157,745. e Other 293,072. 271,354. 21,718.		Description of property	1 7 7							(d) Book	value
b Buildings c Leasehold improvements d Equipment e Other 20,574,641. 13,465,326. 7,109,315. 1,562,032. 1,404,287. 157,745. 293,072. 271,354. 21,718.			Dasis (invest	ment)			ae	preciation	' - -	1 000	066
c Leasehold improvements 1,562,032. 1,404,287. 157,745. e Other 293,072. 271,354. 21,718.	_		<u> </u>				12	16F 3	26		
d Equipment 1,562,032. 1,404,287. 157,745. e Other 293,072. 271,354. 21,718.	b	•	 		40,5/	4,041.	15,4	±00,3	40.	1,109	, 313.
e Other 293,072. 271,354. 21,718.		·			1 5	0.00		101 0	07		7.4.
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							L	<u>4/1,3</u>	54.		حصنات

Schedule D (Form 990) 2014

432053 10-01-14

23

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

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

16221111 148710 12323-2

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014 Go Ye Village, Inc.		73-0959566 Page 4
Part XI: Reconciliation of Revenue per Audited Financial	Statements With Revenu	ue per Return.
Complete if the organization answered "Yes" to Form 990, Part I	V, line 12a.	
Total revenue, gains, and other support per audited financial statements	3	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		. 33.7
a Net unrealized gains (losses) on investments	2a	
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIII)	2d	2005
e Add lines 2a through 2d	<u> </u>	2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		27
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII)	4b	1.00
c Add lines 4a and 4b		4c
5 Total revenue Add lines 3 and 4c. (This must equal Form 990. Part I, line	e 12.)	5
Part XII- Reconciliation of Expenses per Audited Financial	Statements With Exper	ises per Return.
Complete if the organization answered "Yes" to Form 990, Part I	V, line 12a	
Total expenses and losses per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	2a	() () () () () () () () () ()
b Pnor year adjustments	2b	
c Other losses	2c	- W
d Other (Describe in Part XIII)	2d	ا و و المحالية المحالية
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		<u></u>
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII)	4b	
c Add lines 4a and 4b		4c
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I. li	ine 18)	5
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 provi	de any additional information.	
		
		
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SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open To Publications

realine of the organization		1 -		rident		on nu	mber				
Part L Excess Benefit Tran	Village, In sactions (section 50	01(c)(3), sect	ion 501(c)(4), and 50	1(c)(29) organization	s only	- 09).	<u>595</u>	00		-
Complete if the organizate								ь			
1 (a) Name of disqualified person	(b) Relationship bety	ween c	isqual	lified					(d) Corrected		
(a) Name of disqualified person	person and or	rganiza	ation	(6	Description of tran	escription of transaction			Y	es	No
section 4958 3 Enter the amount of tax, if any, or			the orç	ganization			▶ \$ ▶ \$				
Complete if the organizate reported an amount on Fo	on answered "Yes" on f	Form 9		, Part V, line 38a or F	Form 990, Part IV, line	e 26, d	or if th	e orga	nızatı	on	
(a) Name of (b) Rela unterested person with organization	tionship (c) Purpose	(d) Lo	an to or the zation?	(e) Original principal amount	(f) Balance due	(g) defa) In ault?	(h) Ap by bo comm	ard or	(i) W agree	ritten ment?
		То	From			Yes	No	Yes	No	Yes	No
Golden Years Ad Vend		Х			1,081,256.		Х	Х		X	
ReSec, Inc. Vend	or Account	X		0.	431,942.		Х		X		X
							-				

Total
| Part III | Grants or Assistance Benefiting Interested Persons.

Complete if the organization	answered "Yes" on Form 990, Pa	rt IV, line 27.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
···				
				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2014

See Part V for Continuations

 \triangleright \$1,513,198.

Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 2	8b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
		1 001 056	G 1 3 V	Yes	No
	Vendor Vendor		Golden Year ReSec, Inc.	├	X
Resec, Inc.	Velidor	#J1, J44.	Rebec, IIIc.	 	
				ļ	 -
Part V Supplemental Information		<u> </u>	L	<u> </u>	
Provide additional information for response	onses to questions on Schedule L (see	instructions)			
Cahadula I Part II Ioana	To and From Interes	sted Porsons			
Schedule L, Part II, Loans	TO and From inceres	sted Persons			
(a) Name of Interested Per	son:				
Golden Years Advisors (Jame	es A Richardson & Fr	ed Richards	ion)		
dolden rearb naviborb (dam	ob II III olidi dobii di I	od monardi	.0117		
(b) Relationship with Organ	nization: Vendor				
(c) Purpose of Loan: Accoun	nt Payable				
(d) Loan to or from organi	zation? = To				
(a) Original Principal American	unt & O (f) Bolone	Due & 1 (101 256		
(e) Original Principal Amo	unc 5 0. (I) Baranc	ce Due \$ 1,0	761,230.		
(g) Loan in Default? = No					
(h) Approved by Board or C	ommittee? = Yes				
(i) Written Agreement? = Y	es				
(a) Name of Person: ReSec,	Inc.	_			
(b) Relationship with Organ	nization: Vendor				
(c) Purpose of Loan: Accou					
(d) Loan to or from organi	zation: = To				
(e) Original Principal Amo	unt \$ 0. (f) Balanc	ce Due \$ 431	.,942.		
(g) Loan in Default? = No					
(h) Approved by Board or C	ommittee? = No				
(i) Written Agreement? = N	0				

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

➤ Attach to Form 990 or 990-EZ.

Open to Publicate Inspection 🕏

OMB No 1545-0047

Name of the organization

Employer identification number 73-0959566 Go Ye Village, Inc. Form 990, Part III, Line 4d, Other Program Services: Provide a convenience store for residents and provide them with medical supplies. Expenses \$ 22,330. including grants of \$ 0. Revenue \$ 87,684. Provide temporary lodging for vistors. Expenses \$ 0. including grants of \$ 0. Revenue \$ 36,076. Interest earned on various bank accounts used for operations of the business. including grants of \$ 0. Revenue \$ 17. Expenses \$ 0. Form 990, Part VI, Section B, line 11: Board of Directors, Chief Restructuring Officer (CRO), and legal counsel for the entity review the Form 990 before it is filed. Form 990, Part VI, Section C, Line 19: Disclosure of governing documents, policies, and financial statements are available upon request. Form 990, Part XI, line 9, Changes in Net Assets:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 432211 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

Adjustments from 2014 Audit

399,372.