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_{Form} 990-EZ

Short Form Return of Organization Exempt From Income Tax

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

OMB No 1545-1150

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A	For the	2015 calenda	r year, or tax year beginning Janu	uary 1	2015, and ending	Ja	nuary	1 , 20	16			
В	Check if ap	plicable	C Name of organization			D Emple	yer ide	entification number	er			
	Address cl	hange	MV Junior Golf Foundation, Inc				46	-3584336				
H	Name cha							E Telephone number				
H	Initial retur	eturn P.O Box 5455						208-420-8855				
H	Amended		City or town, state or province, country, and ZIP or for	eign postal code		F Grou	p Exen	nption				
	Application		Twin Falls, ID 83303			Num	ber 🕨					
G	Account	ing Method	✓ Cash		Н	Check ▶	► ☐ If	the organization	ıs not			
1 1	Vebsite	:.▶				required	to atta	ch Schedule B				
<u>J 1</u>	ax-exen	npt status (che	ck only one) - ☐ 501(c)(3) ☐ 501(c) () ◀	(insert no.) 4947(a	a)(1) or 527	(Form 99	90, 990	-EZ, or 990-PF).				
				sociation 0								
			7b to line 9 to determine gross receipts. If gross		00 or more, or if tota	l assets						
) are \$500,000 or more, file Form 990 instead of				<u>►</u> \$					
E	art I		e, Expenses, and Changes in Net As		•			•				
_			the organization used Schedule O to res									
	1		ns, gifts, grants, and similar amounts recei				_1	1	21,096			
	2		ervice revenue including government fees a				.2		-0-			
	3		p dues and assessments				3		-0-			
	4	Investment					4		59			
ක	5a		unt from sale of assets other than inventor		5a	-0-						
© 20%	b		or other basis and sales expenses		5b	-0-						
	C	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)							-0-			
ê-3	6	Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than										
Revenue	а	Gross inc. \$15,000) .										
Ze.	b	Gross inco	าร									
		from fundraising events reported on line 1) (attach Schedule G if the										
<u> </u>		sum of suc	h gross income and contributions exceeds	\$15,000)	6b	43,953	73133					
	c		t expenses from gaming and fundraising ev		6c	9,409						
3	d		e or (loss) from gaming and fundraising e	vents (add lines 6	a and 6b and su	btract	11 22					
W		- /				[6d		34,544			
	7a		s of inventory, less returns and allowances		7a	-0-	,					
	b		of goods sold		7b	-0-						
	C	•	t or (loss) from sales of inventory (Subtract		'a)		7c		-0-			
	8		nue (describe in Schedule O)			<u>;</u>	8		-0-			
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	· · · · ·	RECEIVED.	. 🕨	9	1	55,699			
	10		similar amounts paid (list in Schedule O)			וטיר	10		7,000			
	11		id to or for members		INV ON A SAGE	\&\	11		-0-			
Expenses	12		her compensation, and employee benefits		MAY 20 2016 .	<u> </u>	12	 -	-0-			
ens	13		al fees and other payments to independent	•		ો દૂદ . ા	13		27,841			
Ž.	14		r, rent, utilities, and maintenance			<u> </u> .	14		-0-			
ш	. •	-	iblications, postage, and shipping			. '.	15		-0-			
	16		nses (describe in Schedule O)				16		42,773			
_	17	I otal expe	nses. Add lines 10 through 16	0)	<u> </u>	. •	17		77,614 78,085			
ţ	18 19		deficit) for the year (Subtract line 17 from li				18		10,003			
SSe	ן פו		or fund balances at beginning of year (fr rigure reported on prior year's return)				19		-0-			
Net Assets	00						20		33,765			
Se	20		ges in net assets or fund balances (explair						33,765 111,850			
_	21	net assets	or fund balances at end of year. Combine	imes to through 2		. 🖊	21		11,000			

990-EZ	

Page 2

Pa	Balance Sheets (see the instructions f					
	Check if the organization used Schedule	O to respond to a	ny question in this	Part II	<u></u>	<u></u> . 🗆
				(A) Beginning of year	-	(B) End of year
22	Cash, savings, and investments		[-0-		77,933
23	Land and buildings			-0-	\rightarrow	4,572
24	Other assets (describe in Schedule O)				24	29,345
25	Total assets				25	111,850
26	Total liabilities (describe in Schedule O)		<u> </u>		26	0
27	Net assets or fund balances (line 27 of column	 			27	111,850
Par		• ,		, ,		Expenses
Mha	Check if the organization used Schedule is the organization's primary exempt purpose?				(Requ	ured for section
				-		(3) and 501(c)(4)
as n	ribe the organization's program service accomplise leasured by expenses. In a clear and concise mons benefited, and other relevant information for ea	anner, describe the	fits three largest pi e services provided	ogram services, the number of	orgar	nizations, optional for s)
28	Awarded college scholarships to four college freshm	nen-to-be Paid for th	ree in 2015 with anot	he of the awards		
	to be paid in 2016 More scholarships will be awarde fundraisers	ed in 2016 with anticip	pated money from up	coming		
	(Grants \$ 7,000) If this amount	includes foreign gra	ints, check here .	▶ 🗆	28a	7,000
29	Obtained donations for and constructed an indoor go	•				
	training equipment, which is provided free of charge			er of juniors		
	benefitted to date exceeds 125, with much use during	=		_ [
20			ints, check here		29a	69,070
30	Provide golf clubs, balls and related equipment and provides in order to provide any series and provides are series.	· - •		-		
	families, in order to provide exposure to the game of 2015 approximately two to three dozen.	goit to underpriveled	gea chilaren. Chilare	n benefitted in		
		includes foreign are	ants, check here .	▶ □	30a	1,500
31	Other program services (describe in Schedule O)	includes loreign gra			30a	1,500
•			ants, check here		31a	
32	Total program service expenses (add lines 28a t				32	
Par					struc	tions for Part IV)
	Check if the organization used Schedule	O to respond to a	ny question in this			<u> </u>
		(b) Average	(c) Reportable compensation	(d) Health benefits, contributions to employe	e (e)	Estimated amount of
	(a) Name and title	hours per week devoted to position	(Forms W-2/1099-MISC)		0	ther compensation
Zach	ary M Abels	5	-0-	-(D-	-0-
Kaylı	nne H Rolig	12	-0-	-()-	-0-
					<u> </u>	
Jeffre	ey E Rolig	2	-0-	-(D-	-0-
-						
						
					+	
					+	
					1	
		<u> </u>			 -	
			i .	l .	1	

Part				-
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	Yes	No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)			
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	34 35a		~
b c	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,	35b		
36	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c 36		.,
37a b	Enter amount of political expenditures, direct or indirect, as described in the instructions 37a -0- Did the organization file Form 1120-POL for this year?			1.3°
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	\$1. 4.3 \$1	V
39	If "Yes," complete Schedule L, Part II and enter the total amount involved			
a b 40a	Initiation fees and capital contributions included on line 9	-		
b	section 4911 \blacktriangleright			
_	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	258°2.	✓
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
e 41	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	i	- 13 J
		208-42	0.005	5
720	Located at > 195 River Vista PI, Ste 306, Twin Falls, ID		303	3
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over	03.	Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		~
	If "Yes," enter the name of the foreign country: ▶	12,000		
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	7	, 2" s , 5	3.4
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c	11 -1.	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year			▶ 🗆
			Yes	No
	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		✓
	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	132 ** 222 **	\(
d d	Did the organization receive any payments for indoor tanning services during the year?	44c 44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		1
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			† <u> </u>
~	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-F7 (see instructions)	45h		'

	90-EZ (201,5)							ge
40	Did the engage at a second of the						Yes	No
46	Did the organization engage, directly or to candidates for public office? If "Yes,"	ndirectly, in political c	ampaign activities on	behalf of or in opp	oosition	· -		
Part			, raiti	· · · · · ·	• •	46		
<u> </u>	All section 501(c)(3) organization		etions 47–49h and	52 and complete	a tha table	se fo	r line	
	50 and 51.	is must answer que	3110113 41 -430 and	oz, and complete	e the table	33 IQ	1 11116	3
	Check if the organization used So	hedule O to respond	to any question in t	his Part VI				Г
						1	Yes	_= No
47	Did the organization engage in lobbying		section 501(h) electio	n in effect during	the tax			
	year? If "Yes," complete Schedule C, Pa					47		~
48	Is the organization a school as described					48		1
49a	Did the organization make any transfers				<u></u>	19a		✓
_ b	If "Yes," was the related organization as					19b		
50	Complete this table for the organization' employees) who each received more that	s five highest compen	isated employees (oth	ier than officers, di	rectors, tru	ustee v "No	s and	ke
	omproyees) who each received more that		T	(d) Health benefits,		INC	ле. 	_
	(a) Name and title of each employee	(b) Average hours per week	(c) Reportable compensation	contributions to emplo	yee (e) Esti			
		devoted to position	(Forms W-2/1099-MISC)	benefit plans, and defe compensation	erred other	comp	ensatio	'n
lone	·		-					
			-				-	
	·							
								
f	Total number of other employees paid or	100 000	. ► None	1				
51	Complete this table for the organization		• •		each recei	ved r	more	tha
٠.	\$100,000 of compensation from the org	anization. If there is no	one, enter "None."	CONTRACTORS WHO R	sacii iecei	vea i	11016	ına
	(a) Name and business address of each indeper	dont contractor	(b) Type of our		(a) Campa	naatio		
	(a) Name and ousiness address of each indeper	dent contractor	(b) Type of serv	ice	(c) Compe	risatioi		
None		·-						
d	Total number of other independent contr	actors each receiving	over \$100,000	<u> </u>	None			
d 52	Total number of other independent contribute the organization complete Sched	-		►				<u> </u>

Date 5.16.16 Sign Here Rolig, Director, Secretary Type or print name and title PTIN Date Preparer's signature Print/Type preparer's name Check if self-employed Paid Preparer Firm's EIN ▶ Firm's name **Use Only** Firm's address ▶ Phone no May the IRS discuss this return with the preparer shown above? See instructions ☐ Yes ☐ No

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2015

Open to Public

Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number MV Junior Golf Foundation, Inc. 46-3584336 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 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 section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax), from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV. Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (IV) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-9 isted in your governing support (see other support (see document? instructions) instructions) above (see instructions)) Yes Νo (A) (B) (C) (D) (E)

Total

43

Pari							
	(Complete only if you checked the	ne box on line	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	alify under
Cast	Part III. If the organization fails to	o qualify unde	er the tests lis	sted below, p	lease comple	te Part III.)	
	on A. Public Support				1		
	idar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						i
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					-	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.	15.57 S. (1884)		N HERRICA I	119 (34-2)(1)	79,7748	
	on B. Total Support				<u> </u>	L	·
Calen	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc	(see instructi	One)	ill a Silver and die	Erskin dii	12	
13	First five years. If the Form 990 is for the	•	•	d. third. fourth	or fifth tax v		n 501(c)(3)
	organization, check this box and stop he						
Secti	on C. Computation of Public Suppor	rt Percentag	e				
14	Public support percentage for 2015 (line	6, column (f) d	ivided by line 1	1, column (f))		14	%
15	Public support percentage from 2014 Sci					15	%
16a	331/3% support test—2015. If the organi box and stop here. The organization qua						
b	331/3% support test—2014. If the organ check this box and stop here. The organ					: 15 is 33 ¹ /3% 	or more, ► □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the "forganization	ets the "facts-	and-circumsta	nces" test, che	eck this box ar	nd stop here. I	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza Explain in Part VI how the organization m supported organization	tion meets the rect	e "facts-and-ci	rcumstances" tances" test. T	test, check th	nis box and st	op here.
18	Private foundation. If the organization di				a, or 17b, chec	k this box and	see

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.)

Secti	on A. Public Support		<u> </u>				
Calen	dar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants.")	-0-	-0-	-0-	-0-	121,096	121,096
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 .	-0-	-0-	-0-	-0-	43,953	43,953
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513	-0-	-0-	-0-	-0-	-0-	-0-
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf	-0-	-0-	-0-	0-	o	-0-
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	-0-	-0-	-0-	-0-	0-	-0-
6	Total. Add lines 1 through 5	-0-	-0-	-0-	-0-	165,049	165,049
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .	-0-	-0-	-0-	-0-	-0-	-0-
b	Amounts included on lines 2 and 3		'	,			
	received from other than disqualified			-			
	persons that exceed the greater of \$5,000	l					
	or 1% of the amount on line 13 for the year	-0-	-0-	-0-	-0-	38,953	38,953
C	Add lines 7a and 7b	-0-	-0-	-0-	-0-	38,953	38,953
8	Public support. (Subtract line 7c from	4644					
Cooti	on B. Total Support		ليق شكيا				126,096
		43.0044	#1.0040	(10010	4 % 0.044	4 > 0.04.5	10 T 1 1
Çalen 9	dar year (or fiscal year beginning in) Amounts from line 6	(a) 2011	(b) 2012	(c) 2013	(d) 2014 -0-	(e) 2015	(f) Total
9 10a		-0-	-0-	-0-	-0-	165,049	165,049
IUa	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties and income from similar sources .	-0-	-0-	-0-	-0-	59	59
b	Unrelated business taxable income (less	-0-	-0-	-0-	-0-	37	
b	section 511 taxes) from businesses						
	acquired after June 30, 1975	-0-	-0-	-0-	-0-	-0-	-0-
С	Add lines 10a and 10b	-0-	-0-	-0-	-0-	59	59
11	Net income from unrelated business			<u> </u>			
•	activities not included in line 10b, whether						
	or not the business is regularly carried on	-0-	-0-	-0-	-0-	-0-	-0-
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)	-0-	-0-	-0-	-0-	-0	-0-
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	-0-	-0-	-0-	-0-	165,108	165,108
14	First five years. If the Form 990 is for the	ne organization	's first, secon	d, third, fourth	, or fifth tax y	ear as a sectio	
	organization, check this box and stop he	re					<u> </u>
Secti	on C. Computation of Public Support	rt Percentag	e				
15	Public support percentage for 2015 (line	8, column (f) dı	vided by line 1	3, column (f))		15	%
16	Public support percentage from 2014 Sc	hedule A, Part	III, line 15 .	<u> </u>	<u> </u>	16	%
Secti	on D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2015 (line 10c, colum	nn (f) divided b	y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2014					18	%
19a	331/3% support tests-2015. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests—2014. If the organization						
	line 18 is not more than 331/3%, check this						_
20	Private foundation. If the organization d	id not check a	hoy on line 14	19a or 19h d	check this box	and see instru	ctions 🕨 🗌

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on 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.)

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete P	art V	.)	
<u>Secti</u>	on A. All Supporting Organizations			
			Yes	No
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.	1	(Y. 4 :1. 1	- *
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).	2	, , , , , , , , , , , , , , , , , , ,	, <u>3</u> 9 -
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	10.5	39
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.	3b		Ŷ.
С	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.	3c	4.3 	
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.	4a		<u> </u>
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.	4b		
С	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.	4c		
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 EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		200
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.	5c		5
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7	2.33	là
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 or 990-EZ).	8	<u> </u>	*****************
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.	" 9a	**	
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b	13	3
С	Did a disqualified person (as defined in line 9a) 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 .	9с	w* (£ ; ;
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a	*; \$,
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to		<u> </u>	<u> </u>

determine whether the organization had excess business holdings.)

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	> s	×*	«,
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	<u></u>		
h	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above? 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.	11b		
Secti	on B. Type I Supporting Organizations	116		
	7,,,		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	331 4	1	2 .
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	3	, ;	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	4	} . {}	,
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	da	, ,	
2		1		. 1
_	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	35g	} , î.e.;	\$ 14 B.
	VI how providing such benefit carned out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	3/4	×
Section	on C. Type II Supporting Organizations			·
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			7
	the supported organization(s).	1	<u> </u>	<u> </u>
Section	on D. All Type III Supporting Organizations	<u> </u>	<u> </u>	L
	, per manage of games and the same of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	and the same		7.00
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		3	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		قطا	الأنبة
2		1	N / 186	
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		4 3	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	-4Y	
3	By reason of the relationship described in (2), did the organization's supported organizations have a		₩	4.4
	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	Hin	33-3	لاندا
	supported organizations played in this regard.	3		
	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s)·
а	The organization satisfied the Activities Test. Complete line 2 below.			
Ь	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 (s	see ins	structi	ons)
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	3	 *	ľ ^ [
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	ĺ	.3· 8	4
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined	12		, ;
	that these activities constituted substantially all of its activities.	2a	I	
ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			» (i
_	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		<u> </u>
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
-	trustees of each of the supported organizations? Provide details in Part VI .	3a	 	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported executions? If "Yes " describe in Part VI the role played by the organization in this regard	3b	 	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	LOD		1

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical	gan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must co	tru mpl	st on Nov. 20, 1970. See ir ete Sections A through E.	nstructions. All
Section A - Adjusted Net Income	•	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1	-	
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		·
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section 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):	**		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	-	-
e Discount claimed for blockage or other	3		
factors (explain in detail in Part VI):	. γα . ζ. 1. γαν		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
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		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2	in a greater than	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 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 instructions).	iy-ır	itegrated Type III supportin	g organization (see

Part	Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
_Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe			
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4_	Amounts paid to acquire exempt-use assets			
5_	Qualified set-aside amounts (prior IRS approval required)			
6_	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	h the organization is res	ponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		/i)	(ii)	(iii)
Se	ection E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
			Pre-2015	Amount for 2015
1	Distributable amount for 2015 from Section C, line 6		arkija išmai klėraši	
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)	龍 四级 经		· Marie Espaining Control
3	Excess distributions carryover, if any, to 2015:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		, ,
a	· · · · · · · · · · · · · · · · · · ·		[1] (4] [8 (3) [8 (3) [8 (3) 4] (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	
b		1. 4条11字(1)单/25		
C	1. 高级 跨海 海上, 高进一步推动建筑的景象大块在水水道下程是15			的第三人称: "我们
<u>d</u>	From 2013			OF the Roy Man
ее	From 2014	dial day		
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years	\$145 Mar. 18 (* 15 67) * 7.		1
h	Applied to 2015 distributable amount			
<u>i</u> _	Carryover from 2010 not applied (see instructions)	7 14 11 11 W 11 14 W 12 W 12 W 12 W 12 W		
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section			
	D, line 7:	A. 36. E. A		1 182.686 484.
a	Applied to underdistributions of prior years	Salar Salar Marie		
b	Applied to 2015 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if			1-10-1304 (144)
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).	Res Res St. Sec. 18		· · · · · · · · · · · · · · · · · · ·
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see		100, 100 - 11 Miles (1900) Add	
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3j			
	and 4c.		****	,
8	Breakdown of line 7:	4 AM: 1. 5	* - * * * * * * * * * * * * * * * * * *	
а		* *	· ** * * * * * * * * * * * * * * * * *	
b		♦ & 12 %	4 (4) \$ 1. 1 . 3.	· jih.
С	Excess from 2013	* * * * * * * * * * * * * * * * * * * *	. **, *, **	*,``
d	Excess from 2014	** ** ** *) * '	· 🖖 · · · . ·	194 1 1 1 29
е	Excess from 2015	<u> </u>		<u> </u>

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization

MV Junior Golf Foundation, Inc.

Employer identification number 46-3584336

Line 10 College scholarships awarded to Cooper Felton \$3,000, Andrew Goodwin \$2,000, and Lauren Lyda \$2,000

Line 16 Other expenses Building material costs \$6,572; bank fees \$197; golf simulator \$10,800; Trackman equipment \$18,545, Nike Golf (junior golf equipment) \$1,473, junior golf program supplies \$5,186.

Lines 20 & 24. For this first year, many of the expenses are reflected in hard assets now held by the Foundation: golf simulator \$10,800 and 1