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Form 99 (Rev January 2020) Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

Open to Public

 Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2019 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable X Address MICHIGAN SNOWMOBILE & ORV ASSOCIATION X Name change 38-2417833 initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return 4543 DIVISION AVENUE S 616-361-2285 4,670,693. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ WYOMING, MI 49548-4306 H(a) is this a group return Applica-tion pending F Name and address of principal officer JIM KELTS Yes X No for subordinates? SAME AS C ABOVE H(b) Are all subordinates included? Yes 501(c)(3) X 501(c) (Tax-exempt status (insert no.) If "No," attach a list (see instructions) J Website: ► N/A H(c) Group exemption number Corporation Trust Year of formation: 1982 M State of legal domicile: MI K Form of organization: ||Partili| Summary TO DEVELOP A COMMON Briefly describe the organization's mission or most significant activities Governance APPRECIATION, UNDERSTANDING AND KNOWLEDGE OF SNOWMOBILING AND ORV Check this box If the organization discontinued its operations or disposed by more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 81 Number of independent voting members of the governing body (Part Wine 15) UL 1 5 2020 81 4 Total number of individuals employed in calendar year 2019 (Part V, Intel 2a) 5 5 250 Total number of volunteers (estimate if necessary) 6 OGDEN. UT 14,812. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 1,706. b Net unrelated business taxable income from Form 990-T, line 39 Prior Year **Current Year** 183,241. 224,804. Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 2,117,618. 4,448,968. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 2,842 10,257. 3,184. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 4,468. 2,348,448 4,646,934. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Ō. Benefits paid to or for members (Part IX, column (A), line 4) O 120,473. 130.777. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 5,959. b Total fundraising expenses (Part IX, column (D), line 25) 3,153,423. 4,374,716. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,273,896. 4,505,493. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -925,448, 19 Revenue less expenses Subtract line 18 from line 12 141,441. **Beginning of Current Year End of Year** 4,062,353 20 Total assets (Part X, line 16) 2,396,016. 3,995,856. 21 Total liabilities (Part X, line 26) 2,188,078. Net assets or fund balances Subtract line 21 from line 20 66,497. 207,938. Partill∎ Signature Block Sunder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of prepare other than officer) is based on all information of which preparer has any knowledge. Kar ZŮ sign Signature of officer Here MARK PANKNER TREASURER Type or print name and title ဍိ**ဂ္ဂ** Print/Type preparer's name Preparer's signature CPA 06/25/20 JEFFREY E. HERT, CPA JEFFREY E. HERT. 1200066715 self-employed Preparer Firm's name REHMANN ROBSON LLC Firm's EIN > 38-3567911 (Use Only Firm's address MILLIKEN PLACE, 107 S CASS, TRAVERSE CITY, MI 49684 Phone no. 231 - 946 - 3230 OO X Yes May the IRS discuss this return with the preparer shown above? (see instructions) No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION



38-2417833

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	1		
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	١.		
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	١.		
5	during the tax year? If "Yes," complete Schedule C, Part II	4	-	
J	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, 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		Х
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 donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		<u>X</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	ŀ		
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			v
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11b		<u> </u>
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	140		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	11c		<u> </u>
•	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional .	12b		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		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			v
15	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	45	İ	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		41
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
þ	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 17 If "Yes." complete Schedule I. Parts I and II	21		X
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Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			ł
	·	23		х
04-	Schedule J	23		
24 a	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			v
	Schedule K If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u>X</u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			-
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			1
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			l
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	1		1
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	instructions, for applicable filing thresholds, conditions, and exceptions)			
_	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? ### If the structure of the st			
a		200		х
_	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? //		İ	v
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II .	32	\vdash	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		L
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			1
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 5			
b				
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	l_		
_	(gambling) winnings to prize winners?	1c	X	
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	o o continuety		Yes	Na
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		res	No
	filed for the calendar year ending with or within the year covered by this return 2a 5	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	-		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			<u></u> _
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	, , , , , , , , , , , , , , , , , , , ,			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			لبيا
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			Х
ч	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 7d	<u>7c</u>		
<u>.</u>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	 7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		-	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		L,
10	Section 501(c)(7) organizations. Enter		i	1
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	•		
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	۴-		
D	Gross income from other sources (Do not net amounts due or paid to other sources against			
12-	amounts due or received from them) Section 4947(a)(1) new account observable trusts. Is the account the Point 19413	40-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N			
16	is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O			لــــا
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Form 990 (2019) MICHIGAN SNOWMOBILE & ORV ASSOCIATION 38-2417833 Part 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 on Schedule O. See instructions \mathbf{x} Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 81 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 81 b Enter the number of voting members included on line 1a, above, who are independent 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? X 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X 10a Did the organization have local chapters, branches, or affiliates? 10a 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 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 c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 13 X Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records

Form 990 (2019)

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49548-4306

MI

THE ORGANIZATION - 616-361-2285 4543 DIVISION AVENUE S, WYOMING,

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MICHIGAN SNOWMOBILE & ORV ASSOCIATION

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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	
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Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

 See instructions for the order in which to list the persons above

X Check this box if neither the organization no (A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	١.,		Pos	rtion	than o		Reportable	Reportable	Estimated
	hours per	box	, unies	ss per	rson (s both	an	compensation	compensation	amount of
	week		ceran	d a d	recto	r/trus	tee)	from	from related	other
	(list any	Individual trustee or director		١.				the	organizations	compensation
	hours for related	0 o	ee	ŀ		sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	ustee	Lrus	ŀ	8	nbeu		(VV-2/1099-IVII3C)		and related
	below	dual	rtora	_	를 1	st cor	<u>.</u>			organizations
	line)	ğ	institutional trustee	Officer	Key emplayee	Highest compensated employee	Former			3
(1) JIM KELTS	15.00									
PRESIDENT		Х		X	ļ			0.	0.	0.
(2) JOHN NEWMAN	5.00									
VICE PRESIDENT	-	X		Х	L.	<u> </u>		0.	0.	0.
(3) KARYN HAUTAMAKI	5.00									
SECRETARY		X		X				0.	0.	0.
(4) MARK PANKNER	8.00				İ	l	l			
TREASURER		X		Х	L	lacksquare		0.	0.	0.
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	\$100,000 of compensation from the organization		200
2	Total number of independent contractors (including but not limited to those listed at \$100,000 of compensation from the organization 0	bove) who received more than	

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Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (D) Revenue excluded Related or exempt Unrelated Total revenue function revenue from tax under business revenue sections 512 - 514 1 a Federated campaigns 1a Contributions, Gifts, Grants and Other Similar Amounts 120,852 1b **b** Membership dues Fundraising events 10 d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 62,389 similar amounts not included above 1f Noncash contributions included in lines 1a-1f 183,241 h Total, Add lines 1a-1f Business Code 2 a TRAIL PERMITS 451110 284,643.4,284,643. Service TRADE SHOWS 451110 118,298. 118,298. Program Serv Revenue 451110 31,215. 31,215. GROOMER WORKSHOP 451110 14,812. MAGAZINES 14,812 f All other program service revenue 448,968. Total. Add lines 2a-2f Investment income (including dividends, interest, and 10,257 10,257. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents 6a b Less rental expenses 6b c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory b Less cost or other basis Other Revenue and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c) See Part IV, line 18 8b **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from garning activities. See Part IV, line 19 9a b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 28,207. and allowances 23,759. b Less cost of goods sold 4,448. c Net income or (loss) from sales of inventory 4,448. Busmess Code Miscellaneous Revenue 999999 20 11 a MISCELLANEOUS d All other revenue 20 Total. Add lines 11a-11d 10,277. 14,812. **▶** 4,646,934.4,438,604. Total revenue. See instructions

932009 01-20-20

Pai	t IX Statement of Functional Expense	es			· · · · · · · · · · · · · · · · · · ·
Secti	on 501(c)(3) and 501(c)(4) organizations must comp	lete all columns All othe	r organizations must cor	nplete column (A).	
	Check if Schedule O contains a respon	se or note to any line in t			
	not 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		•		
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign			\$	i
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	•			
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	91,413.		91,413.	
7	Other salaries and wages Pension plan accruals and contributions (include	91,413.		91,413.	
8	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	1,370.		1,370.	
10	Payroli taxes	37,994.		37,994.	
11	Fees for services (nonemployees)				
а	Management				•
b	Legal	5,010.		5,010.	
С	Accounting	2,238.		2,238.	
d	Lobbying	12,000.	12,000.		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	2,220.	4 000	2,220.	
12	Advertising and promotion	1,233.	1,233.		
13	Office expenses	9,588.	7,988.	1 600	
14	Information technology	9,300.	1,900.	1,600.	
15	Royalties	7,335.		7,335.	
16 17	Occupancy	43,152.	43,152.	7,333.	
18	Payments of travel or entertainment expenses	15/1320	10,102.		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,179.	1,155.	3,024.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,875.		1,875.	
23	Insurance	5,576.		5,576.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	`. '.			
а	TRAIL PERMITS	4,125,966.	4,125,966.		
þ	MISCELLANEOUS	66,637.	62,769.	3,868.	
С	POSTAGE	18,196.		18,196.	
d	REGISTRATION	16,255.	16,255.		
е	All other expenses	53,256.	6,389.	40,908.	5,959.
25	Total functional expenses. Add lines 1 through 24e	4,505,493.	4,276,907.	222,627.	5,959.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined				

932010 01-20-20

Form 990 (2019)

educational campaign and fundraising solicitation.

Check here following SOP 98-2 (ASC 958-720)

.Pai	τχ.	Balance Sneet			
		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		1	
	2	Savings and temporary cash investments	959,471.	2	752,273
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,	1.		
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			·
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
2	7	Notes and loans receivable, net .		7	
Assets	8	Inventories for sale or use .	<u> </u>	8	
	9	Prepaid expenses and deferred charges		9	
	10a	, , , , , , , , , , , , , , , , , , , ,			
		basis Complete Part VI of Schedule D 10a 86,162			
	ь	Less accumulated depreciation 10b 79,251	8,786.	10c	6,911
	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		13	
	14	Intangible assets		14	·
	15	Other assets See Part IV, line 11	3,094,096.	15	1,636,832
	16	Total assets. Add lines 1 through 15 (must equal line 33)	4,062,353.	16	2,396,016
	17	Accounts payable and accrued expenses	4,129.	17	4,129
	18	Grants payable		18	
	19	Deferred revenue .		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
es.	22	Loans and other payables to any current or former officer, director,	be a	-	
	l	trustee, key employee, creator or founder, substantial contributor, or 35%	<u>1</u>		
Liabilities		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
	ŀ	parties, and other liabilities not included on lines 17-24). Complete Part X	2 001 707	†	0 100 040
		of Schedule D	3,991,727.	25	2,183,949
	26	Total liabilities. Add lines 17 through 25	3,995,856.	26	2,188,078
S		Organizations that follow FASB ASC 958, check here			
ည		and complete lines 27, 28, 32, and 33.			
<u>a</u>	27	Net assets without donor restrictions	· · · · · · · · · · · · · · · · · · ·	27	
10 10	28	Net assets with donor restrictions		28	
Š	•	Organizations that do not follow FASB ASC 958, check here	a .		
7		and complete lines 29 through 33.			
ŝ	29	Capital stock or trust principal, or current funds	0.	29	0
SSE	30	Paid-in or capital surplus, or land, building, or equipment fund	66 497	30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	66,497.		207,938
ž	32	Total net assets or fund balances	66,497.	32	207,938
	33	Total liabilities and net assets/fund balances	4,062,353.	33	2,396,016

	990 (2019) MICHIGAN SNOWMOBILE & ORV ASSOCIATION	38-	2417833	Page 12
Par	t XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
		1 1		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,934.
2	Total expenses (must equal Part IX, column (A), line 25)	2		5,493.
3	Revenue less expenses Subtract line 2 from line 1	3		L,441.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	66	<u>5,497.</u>
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain on Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,			
	column (B))	10	207	7,938.
Pai	t XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	· · ·	
			<u></u>	Yes No
1	Accounting method used to prepare the Form 990			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.		
2a	, , , , , , , , , , , , , , , , , , , ,		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	\$.	
	separate basis, consolidated basis, or both		2.8	
	Separate basis Consolidated basis Both consolidated and separate basis			
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,	<u>اح</u>	
	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,		
	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 on Sch		 -	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audı	1 1	
	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	red audit		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	
			Form	990 (2019)

SCHEDULE C

· (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

•	Section 501(c)(4), (5), or (6) organizat	tions Complete Part III.			
	ne of organization			Emp	loyer identification number
		N SNOWMOBILE & OF			38-2417833
Pa	art I-A Complete if the org	janization is exempt unde	er section 501(c) o	or is a section 527 or	ganization.
1	Provide a description of the organiz	ation's direct and indirect political	al campaign activities in	Part IV.	
2	Political campaign activity expendit	rures		▶\$	i
3	Volunteer hours for political campai	ign activities			
Da	and I D Commission if the one			<u> </u>	
	···· · · · · · · · · · · · · · · · · ·	janization is exempt unde		<u> </u>	
	Enter the amount of any excise tax	, ,			
	Enter the amount of any excise tax				
	If the organization incurred a section Was a correction made?	in 4955 tax, did it lile Form 4720	ior triis year?	•	Yes No
	o If "Yes," describe in Part IV.		• •		Yes No
		janization is exempt unde	er section 501(c),	except section 501(c)(3).
1	Enter the amount directly expended	by the filing organization for sec	tion 527 exempt functi	on activities	
2	Enter the amount of the filing organ	nization's funds contributed to oth	ner organizations for se	ction 527	
	exempt function activities		•	▶\$	i
3	Total exempt function expenditures	s. Add lines 1 and 2 Enter here a	nd on Form 1120-POL,		
	line 17b			▶ \$	i
4	Did the filing organization file Form	1120-POL for this year?	,		Yes No
5	Enter the names, addresses and en	nployer identification number (EIN	N) of all section 527 poli	itical organizations to whicl	the filing organization
	made payments For each organiza	tion listed, enter the amount paid	I from the filing organiza	ation's funds. Also enter the	e amount of political
	contributions received that were pro-	• •			e segregated fund or a
	political action committee (PAC) If	additional space is needed, provi	de information in Part I	V	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and promptly and directly
				funds. If none, enter -0-	delivered to a separate
					political organization
					If none, enter -0
		İ	1		
				+	
	······································			+	
				· · · · · · · · · · · · · · · · · · ·	

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

Schedule C (Form 990 or 990-EZ) 2019

LHA

932041 11-26-19

Schedule C (Form 990 or 990-EZ) 2019 Part II-A Complete if the org	MICHIGAN SN	OWMOBILE &	ORV ASSOCIAT	ION 38-	2417833	Page :
section 501(h)).	janization is exen	npt under section	n 501(c)(3) and file	3 Form 5/68 (ei	ection unde	er
A Check Inf the filing organiza expenses, and share	re of excess lobbying e	expenditures).	n Part IV each affiliated (group member's nan	ne, address, El	N,
3 Check Lifthe filing organiza	tion checked box A ar	nd "limited control" pro	ovisions apply		· 	
	ts on Lobbying Exper ditures" means amou)	(a) Filing organization's totals	(b) Affiliated totals	
1a Total lobbying expenditures to influ	uence public opinion (g	grassroots lobbying)				
b Total lobbying expenditures to infli	uence a legislative bod	y (direct lobbying)	[
c Total lobbying expenditures (add li	nes 1a and 1b)					
d Other exempt purpose expenditure	es				I	
e Total exempt purpose expenditure	s (add lines 1c and 1d))	[
f Lobbying nontaxable amount Ente	er the amount from the	following table in bot	h columns		<u>. l</u>	
If the amount on line 1e, column (a) o	r (b) is: The lob	bying nontaxable am	ount is:			
Not over \$500,000	20% of 1	the amount on line 1e				
Over \$500,000 but not over \$1,000	0,000 \$100,00	0 plus 15% of the exc	ess over \$500,000			
Over \$1,000,000 but not over \$1,5	00,000 \$175,00	0 plus 10% of the exc	ess over \$1,000,000			
Over \$1,500,000 but not over \$17,	000,000 \$225,00	0 plus 5% of the exce	ss over \$1,500,000			
Over \$17,000,000	\$1,000,0	000			i	
				•		
g Grassroots nontaxable amount (en	•		.			
h Subtract line 1g from line 1a. If zer	·		٠ ١			
i Subtract line 1f from line 1c If zero	•		L			
j If there is an amount other than ze		ine 1i, did the organiz	ation file Form 4720		—	
reporting section 4911 tax for this					Yes	N
(Some organizations t	hat made a section 50	eraging Period Under 01(h) election do not ate instructions for li	have to complete all of	the five columns t	elow.	
	Lobbying Exper	nditures During 4-Ye	ar Averaging Period		· · · · · · · · · · · · · · · · · · ·	
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) To	tal
2a Lobbying nontaxable amount						
b Lobbying ceiling amount					1 .	
(150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
£ Crass-sets lebburns synanditures	,					

Schedule C (Form 990 or 990-EZ) 2019

Schedule C (Form 990 or 990-EZ) 2019 MICHIGAN SNOWMOBILE & ORV ASSOCIATION 38-2417833 Page 3

[Part II-B] Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

(election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity			(a)		(b)	
			No	Amount		
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			· ·		
а	Volunteers?			, r		
b b	Paid staff or management (include compensation in expenses reported on lines 1c through 1j)? Media advertisements?			4,*		
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	ct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	ļ				
i	Other activities?					
1	Total Add lines 1c through 1i	ļ				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
þ	If "Yes," enter the amount of any tax incurred under section 4912	#				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
_	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(t	o), or sec	tion		
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1	X		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	ne prior vear	-		X	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section			tion		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No" OR	(b) Part I	II-A, line	3, is	
1	Dues, assessments and similar amounts from members		1.			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	aal	1	· · · · · ·		
_	expenses for which the section 527(f) tax was paid).	cai				
а	Current year		20			
b	Carryover from last year		2a 2b			
c	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	224	-			
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p		^			
	expenditure next year?	ontical	4		•	
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5			
Par						
Provi	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group	liet\ Part II.	Δ lines 1 a	nd 2 (see		
	ictions), and Part II-B, line 1. Also, complete this part for any additional information	/ 113ty, 1 tare 117	r, iiicə i a	10 2 (300		
	istorioj, and i are ii o, and i 1800, complete this part for any additional information					
-						
					9,	
		-	-			

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

MICHIGAN SNOWMORILE & ORV ASSOCIATION

Employer identification number 38-2417833

Par	Organizations Maintaining Donor Advised		or Accounts. Complete if the			
	organization answered "Yes" on Form 990, Part IV, line	e 6				
		(a) Donor advised funds	(b) Funds and 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 v	vriting that the assets held in donor advis	ed funds			
	are the organization's property, subject to the organization's	•	Yes No			
6	Did the organization inform all grantees, donors, and donor a	-				
	for charitable purposes and not for the benefit of the donor or	• •	-			
	impermissible private benefit?		Yes No			
Par		ganization answered "Yes" on Form 990,				
1	Purpose(s) of conservation easements held by the organization	· · · · · ·				
•	Preservation of land for public use (for example, recreat	· · · · · · · · · · · · · · · · · · ·	a historically important land area			
	Protection of natural habitat	. —	a certified historic structure			
	Preservation of open space	/ Yeser valies of	a contined historic structure			
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last			
_	day of the tax year	ica conscivation contribution in the form	Held at the End of the Tax Year			
	Total number of conservation easements		2a			
a h	Total acreage restricted by conservation easements	••	2b			
		inture included in (e)				
ی د	Number of conservation easements on a certified historic structure of conservation easements and index in (a) accounted	` '	2c			
d	Number of conservation easements included in (c) acquired a	inter 7725/06, and not on a historic structu				
_	listed in the National Register Number of conservation easements modified, transferred, reli		_ 2d			
3		eased, extinguished, or terminated by the	organization during the tax			
	year >	amont is located				
4	Number of states where property subject to conservation easement is located					
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of					
_	violations, and enforcement of the conservation easements it		U Yes U No			
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations, and emorcing cons	servation easements during the year			
_	Amount of automatical in manufacture and a bond	han af walations and anti-man account				
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva	tion easements during the year			
_	> \$		1.141/01/0			
8	Does each conservation easement reported on line 2(d) above	e satisty the requirements of section 170(
_	and section 170(h)(4)(B)(ii)?		Yes No			
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and					
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's financial statement	ents that describes the			
Da	organization's accounting for conservation easements	Art Historical Transcripts or Ot	han Similan Assats			
Fai	t III Organizations Maintaining Collections of		ner Similar Assets.			
	Complete if the organization answered "Yes" on Form					
1a	If the organization elected, as permitted under FASB ASC 95					
	of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public					
	service, provide in Part XIII the text of the footnote to its finan					
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of					
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	nerance of public service,			
	rovide the following amounts relating to these items					
	(i) Revenue included on 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 treat	asures, or other similar assets for financia	I gain, provide			
	the following amounts required to be reported under FASB A	SC 958 relating to these items				
а	Revenue included on 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.

932051 10-02-19

Schedule D (Form 990) 2019

		N SNOWMOBI							17833	Page 2
.Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	rical Tr	reasures, o	r Other S	Simila	Assets	(continu	ed)
3										
	collection items (check all that apply)									
а	Public exhibition	c	, 🗀 l	oan or ex	change progra	am				
b	Scholarly research	€	, 🖂	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and explain	n how the	ey further	the organization	n's exemp	t purpo:	se in Part	XIII.	
5	During the year, did the organization solicit or	r receive donations of	of art, his	torical tre	asures, or othe	er sımılar as	sets			
	to be sold to raise funds rather than to be ma								Yes	No_
Par	t IV Escrow and Custodial Arrang	gements. Compl	ete if the	organizat	ion answered '	'Yes" on Fo	orm 990	, Part IV, I	line 9, or	
	reported an amount on Form 990, Par	t X, line 21								
1a	Is the organization an agent, trustee, custodia	an or other intermed	liary for c	ontributio	ns or other ass	sets not inc	luded			
	on Form 990, Part X?	,							Yes	No No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fo	llowing ta	able						
							ļ		Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f_			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for e	scrow or	custodial acco	unt liability	?		Yes	☐ No
	If "Yes," explain the arrangement in Part XIII									
Par	t V Endowment Funds. Complete	f the organization an	swered	"Yes" on F	Form 990, Part	IV, line 10				
		(a) Current year	(b) P	nor year	(c) Two yea	rs back (d) Three y	rears back	(e) Four y	ears back
1a	Beginning of year balance								<u></u>	
р	Contributions .									
c	Net investment earnings, gains, and losses		<u> </u>							
đ	Grants or scholarships		ļ							
е	Other expenditures for facilities		1							
	and programs .									
f	Administrative expenses		ļ							
g	End of year balance		<u></u>							
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1g	, column ((a)) held as					
а										
-	Permanent endowment	%								
С		%								
	The percentages on lines 2a, 2b, and 2c shou	•								
3a	a Are there endowment funds not in the possession of the organization that are held and administered for the organization									
	by									res No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations			•					3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza				?				3b	
<u>4</u>	Describe in Part XIII the intended uses of the		wment fu	unds				-		
Pai	t VI Land, Buildings, and Equipm		D-4 IV		0 5 000	D. 17.1.	. 40			
	Complete if the organization answered									
	Description of property	(a) Cost or o			st or other		umulate		(d) Book	value
		basis (investr	nent)	Dasi	s (other)	aepre	eciation			
	Land .									
	Buildings									
	Leasehold improvements	-								
	Equipment				86,162.	-	70 2	51	<u> </u>	011
	Other Add lines 1a through 1e (Column (d) must e						79,2	7.1	<u> </u>	<u>,911.</u>
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Schedule D (Form 990) 2019

SCHEQULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

MICHIGAN SNOWMOBILE & ORV ASSOCIATION

Employer identification number 38-2417833

ALLOWING DATOWNOOD A CONTRODUCTION SO DELLOSS
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
RIDING AND RECREATION IN THE STATE OF MICHIGAN.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
COORDINATED WITH THE DNR AND NON PROFIT GRANT SPONSORS GROOMING
EQUIPMENT SPECIFICATIONS.
EXPENSES \$ 15,735. INCLUDING GRANTS OF \$ 0. REVENUE \$ 31,215.
FORM 990, PART VI, SECTION B, LINE 11B:
THE 990 IS REVIEWED BY THE OFFICERS OF THE GOVERNING BODY PRIOR TO FILING.
FORM 990, PART VI, SECTION C, LINE 18:
AVAILABLE UPON REQUEST.
•
FORM 990, PART VI, SECTION C, LINE 19:
AVAILABLE UPON REQUEST.