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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

2011

Department of the Treasury
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public
Inspection

A For the 2011 calendar year, or tax year beginning , 2011, and ending

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization Country Club of Barre, Inc.
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street addr) Room/suite
 P.O. Box 298
 City, town or country State ZIP code + 4
 Barre VT 05641

D Employer Identification Number 03-0103175

E Telephone number (802) 476-7658

F Name and address of principal officer
 Bob Rousse PO Box 298 Barre VT 05641

G Gross receipts \$ 844,913.

H(a) Is this a group return for affiliates? ☐ Yes ☒ No
H(b) Are all affiliates included? ☐ Yes ☒ No
 If 'No,' attach a list (see instructions)

I Tax-exempt status ☐ 501(c)(3) ☒ 501(c) (7) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ N/A **H(c)** Group exemption number ▶

K Form of organization. ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶ **L** Year of Formation 1924 **M** State of legal domicile: VT

Part I Summary

1 Briefly describe the organization's mission or most significant activities: Semi private Country Club

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) 300

4 Number of independent voting members of the governing body (Part VI, line 1b) 0

5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5

6 Total number of volunteers (estimate if necessary) 12

7a Total unrelated business revenue from Part VIII, column (C), line 12 47,755.

7b Net unrelated business taxable income from Form 990-T line 34 -8,097.

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h) 311	406,337.	378,008.
9 Program service revenue (Part VIII, line 2g)	236,701.	219,219.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	18,808.	80.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	36,970.	37,490.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	698,816.	634,797.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
14 Benefits paid to or for members (Part IX, column (A), line 4)		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	346,091.	365,410.
16a Professional fundraising fees (Part IX, column (A), line 11e)		
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	303,854.	298,625.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	649,945.	664,035.
19 Revenue less expenses. Subtract line 18 from line 12	48,871.	-29,238.
20 Total assets (Part X, line 16)	Beginning of Current Year 948,937.	End of Year 988,106.
21 Total liabilities (Part X, line 26)	798,731.	878,122.
22 Net assets or fund balances. Subtract line 21 from line 20	150,206.	109,984.

Part II Signature Block

Under 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 preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer *Robert Rousse* **Date** 8/4/12

Bob Rousse - TREASURER
Type or print name and title.

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date Check ☐ if self-employed PTIN
 Lee A. White CPA, PFS, CFP *Lee A. White CPA* 07/26/12 ☐ P00750923

Firm's name ▶ WHITE & ASSOCIATES Firm's EIN ▶ 04-3366373
 Firm's address ▶ 86 SUMMER STREET BARRE VT 05641 Phone no (802) 476-6191

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

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

TEEA0101 07/05/11

Form 990 (2011)

SCANNED SEP 12 2012

P 6

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☐**1** Briefly describe the organization's mission:Semi private Country Club**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If 'Yes,' describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported**4a** (Code:) (Expenses \$ 661,592. including grants of \$) (Revenue \$ 634,797.)
Golf Course and Country Club**4b** (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4c** (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4d** Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **▶** 661,592.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A		X
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II		
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III		
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		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21; 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		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V		X
11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	X	
b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII		X
c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X		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	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII		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, XII, and XIII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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 or more? If 'Yes,' complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II		X
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		X
20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III</i>		X
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I</i>		
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? <i>If 'Yes,' complete Schedule L, Part I</i>		
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If 'Yes,' complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>		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? <i>If 'Yes,' complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		
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? <i>If 'Yes,' complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

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Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

	Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1 a 0		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1 b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
1 c		
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2 a		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
2 b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
3 a		
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	X	
3 b		
4 a 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)?		X
4 a		
b If 'Yes,' enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5 a		
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5 b		
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		
5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
6 a		
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
6 b		
7 Organizations that may receive deductible contributions under section 170(c).		
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?		X
7 a		
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		
7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7 c		
d If 'Yes,' indicate the number of Forms 8282 filed during the year		
7 d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7 e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7 f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
8		
9 Sponsoring organizations maintaining donor advised funds.		
a Did the organization make any taxable distributions under section 4966?		
9 a		
b Did the organization make a distribution to a donor, donor advisor, or related person?		
9 b		
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12	0.	
10 a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	53,979.	
10 b		
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders		
11 a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
11 b		
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		
12 b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state?		
13 a		
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		
13 b		
c Enter the amount of reserves on hand		
13 c		
14 a Did the organization receive any payments for indoor tanning services during the tax year?		X
14 a		
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O		
14 b		

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 in Schedule O. See instructions.Check if Schedule O contains a response to any question in this Part VI ☒**Section A. Governing Body and Management**

	Yes	No
1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 300		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		
b Enter the number of voting members included in line 1a, above, who are independent 1 b 0		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X
6 Did the organization have members or stockholders?	6	X
7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7 a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8 a	X
b Each committee with authority to act on behalf of the governing body?	8 b	X
9 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9	X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10 a Did the organization have local chapters, branches, or affiliates?	10 a	X
b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b	
11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12 a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	X
b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12 c	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15 a	X
b Other officers of key employees of the organization	15 b	X
If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a	X
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 taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ _____

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

▶ Frances A. Rawden PO Box 298 Barre VT 05641 (802) 476-7658

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1 a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

List persons in the following order. individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) -----										
(2) -----										
(3) -----										
(4) -----										
(5) -----										
(6) -----										
(7) -----										
(8) -----										
(9) -----										
(10) -----										
(11) -----										
(12) -----										
(13) -----										
(14) -----										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Sch O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) _____										
(16) _____										
(17) _____										
(18) _____										
(19) _____										
(20) _____										
(21) _____										
(22) _____										
(23) _____										
(24) _____										
(25) _____										
1 b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3		X
4		X
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes" complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns	1 a				
	b Membership dues	1 b 363,329.				
	c Fundraising events	1 c 14,679.				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f				
	g Noncash contributions included in lns 1a-1f. \$					
	h Total. Add lines 1a-1f		378,008.			
PROGRAM SERVICE REVENUE	2 a <u>Golf fees</u>	Business Code 713910	206,369.	159,541.	46,828.	0.
	b <u>Club House Rentals</u>	N/A	7,000.	7,000.	0.	0.
	c <u>Tee Marker Advertising</u>	N/A	5,850.	5,850.	0.	0.
	d _____					
	e _____					
	f All other program service revenue					
	g Total. Add lines 2a-2f		219,219.			
	OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)		80.	0.	80.
4 Income from investment of tax-exempt bond proceeds						
5 Royalties						
6 a Gross rents		(i) Real (ii) Personal				
b Less: rental expenses						
c Rental income or (loss)						
d Net rental income or (loss)						
7 a Gross amount from sales of assets other than inventory		(i) Securities (ii) Other				
b Less: cost or other basis and sales expenses						
c Gain or (loss)						
d Net gain or (loss)						
8 a Gross income from fundraising events (not including \$ 14,679. of contributions reported on line 1c). See Part IV, line 18		a				
b Less: direct expenses		b				
c Net income or (loss) from fundraising events						
9 a Gross income from gaming activities. See Part IV, line 19		a				
b Less: direct expenses		b				
c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances		a 238,353.				
b Less cost of goods sold		b 210,116.				
c Net income or (loss) from sales of inventory			28,237.	27,390.	847.	0.
11 a <u>Miscellaneous</u>	Business Code	9,253.	0.	0.	9,253.	
b _____						
c _____						
d All other revenue						
e Total. Add lines 11a-11d		9,253.				
12 Total revenue. See instructions		634,797.	199,781.	47,755.	9,253.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Check if Schedule O contains a response to any question in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 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 governments and organizations in the United States. See Part IV, line 21				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	295,348.	295,348.	0.	0.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	22,989.	22,989.	0.	0.
10 Payroll taxes	47,073.	47,073.	0.	0.
11 Fees for services (non-employees).				
a Management				
b Legal				
c Accounting	1,400.	0.	1,400.	0.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion	529.	529.	0.	0.
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	28,887.	28,887.	0.	0.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	40,879.	40,879.	0.	0.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	41,567.	41,567.	0.	0.
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Dues & meetings	3,013.	3,013.	0.	0.
b G H I N Service	5,605.	5,605.	0.	0.
c Court maint. & supplies	97,368.	97,368.	0.	0.
d Cart expense	5,440.	5,440.	0.	0.
e All other expenses	73,937.	72,894.	1,043.	0.
25 Total functional expenses. Add lines 1 through 24e	664,035.	661,592.	2,443.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash – non-interest-bearing	53,149.	1	130,634.
	2 Savings and temporary cash investments	67,635.	2	55,563.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	3,773.	8	3,955.
	9 Prepaid expenses and deferred charges	469.	9	469.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,097,215.		
	b Less: accumulated depreciation	10b 1,299,730.	823,911.	10c 797,485.
	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		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	948,937.	16	988,106.	
LIABILITIES	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue	140,924.	19	132,289.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	651,155.	24	730,000.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	6,652.	25	15,833.
	26 Total liabilities. Add lines 17 through 25	798,731.	26	878,122.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	169,926.	30	169,926.
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds	-19,720.	32	-59,942.
	33 Total net assets or fund balances	150,206.	33	109,984.
	34 Total liabilities and net assets/fund balances.	948,937.	34	988,106.

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Form 990 (2011)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	634,797.
2	Total expenses (must equal Part IX, column (A), line 25)	2	664,035.
3	Revenue less expenses. Subtract line 2 from line 1	3	-29,238.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	150,206.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-10,984.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	109,984.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

- 1 Accounting method used to prepare the Form 990:
- ☒
- Cash
- ☐
- Accrual
- ☐
- Other _____

If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.

- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?

- b Were the organization's financial statements audited by an independent accountant?

- c 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?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

- d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:

☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

- b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b		X
2c		
3a		X
3b		

BAA

Form 990 (2011)

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Financial Statements

► **Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
► **Attach to Form 990. ► See separate instructions.**

OMB No 1545-0047

2011

Open to Public Inspection

Employer identification number

Country Club of Barre, Inc.

03-0103175

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

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 holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ► \$

(ii) Assets included in Form 990, Part X ► \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ► \$

b Assets included in Form 990, Part X ► \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table.

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ☐ %

b Permanent endowment ☐ %

c Temporarily restricted endowment ☐ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		765,689.	585,937.	179,752.
c Leasehold improvements				
d Equipment		482,159.	462,813.	19,346.
e Other		849,367.	250,980.	598,387.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				797,485.

BAA

Schedule D (Form 990) 2011

Part VII Investments – Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.)		

Part VIII Investments – Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B), line 15)	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Payroll taxes - other	9,339.
(3) Sales tax payable	6,445.
(4) Child Support W/H	46.
(5) Rounding	3.
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	15,833.

2 FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	
2	Total expenses (Form 990, Part IX, column (A), line 25)	
3	Excess or (deficit) for the year Subtract line 2 from line 1	
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV.)	
9	Total adjustments (net). Add lines 4 through 8	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part XIV Supplemental Information *(continued)*

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011



Name of the organization

Country Club of Barre, Inc.

Employer identification number

03-0103175

Pt VI, Line 6 The organization has members.

Pt VI, Line 7a Yes, the members elect the governing board.

Pt VI, Line 7b Decisions of the governing body is subject to approval by members.

Pt VI, Line 11a The accountant prepares the 990 and gives a copy to the governing
body to review. After they review the 990 they sign it and mail it in.

Pt VI, Line 12c Any conflicts are noted at each meeting and dealt with at that time.

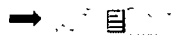
Pt VI, Line 19 They are available to anyone who requests them.

Supporting Statement of:

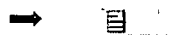
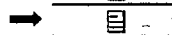
Form 990 p 9/Cost of Goods Sold

Description	Amount
Restaurant Cost of Goods Sold	88,848.
Restaurant Expenses	118,747.
Restaurant Depreciation	2,521.
Total	<u>210,116.</u>

Form 990 p 10: Part IX Statement of Functional Expenses

Line 22 - Depreciation, Depletion, and Amortization Smart WorksheetTo enter assets, **QuickZoom** to Asset Entry Worksheet

To view a calculated report of all depreciation information for Form 990,

QuickZoom to the Depreciation/Amortization Report**QuickZoom** to Form 4562 for Form 990

The following items carry to line 22 below:

Description		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
A	Depreciation	41,567.	41,567.	0.	0.
B	Depletion				
C	Amortization				

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ
Form 990, Page 10, Line 24e All Other Expenses (continued)

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Insurance	22,851.	22,851.	0.	0.
Property taxes	33,930.	33,930.	0.	0.
Supplies	12,984.	12,984.	0.	0.
Depr. allocated to Rest.	-2,521.	-2,521.	0.	0.
Printing	2,163.	2,163.	0.	0.
Telephone	3,484.	3,484.	0.	0.
Bus. Office Internet	1,043.	0.	1,043.	0.
Rounding	3.	3.	0.	0.

Supporting Statement of:

Form 990 p 11/Line 8, column (A)

Description	Amount
Wine Inventory	62.
Liquor Inventory	1,381.
Bottle Can Soft Drink	118.
Soda Fountain	141.
Food Inventory	1,207.
Paper Supplies Inventory	864.
Total	<u>3,773.</u>

Supporting Statement of:

Form 990 p 11/Line 8, column (B)

Description	Amount
Wine Inventory	7.
Liquor Inventory	1,533.
Soda Fountain	250.
Food Inventory	1,118.
Coffee	7.
Paper Supplies Inventory	1,040.
Total	<u>3,955.</u>

Supporting Statement of:

Form 990 p 11/Line 19, column (B)

Description	Amount
Suspense-Chit Cards	4,650.
Suspense-Hall	3,100.
Advance Membership	104,895.
Advance 5 year Membership	19,644.
Total	<u>132,289.</u>

Supporting Statement of:

Form 990 p 12/Part XI, Line 5

Description	Amount
Prior period adjustment	-10,984.
Total	<u>-10,984.</u>

Supporting Statement of:

Sch D, page 2/Other col (b)

Description	Amount
Course Construction	549,711.
Golf Carts	241,128.
Kitchen Equipment	58,528.
Total	<u>849,367.</u>

Supporting Statement of:

Sch D, page 2/Other col (c)

Description	Amount
A/D Course Construction	5,455.
A/D Golf Carts	194,024.
A/D Kitchen Equipment	51,501.
Total	<u>250,980.</u>

Supporting Statement of:

Sch D, page 3/Beg Other Liability Amt-1

Description	Amount
Fed & FICA Tax w/h	4,633.
FUTA Tax w/h	80.
SUTA Payable	1,734.
VT Tax w/h	3,006.
Total	<u>9,453.</u>

Supporting Statement of:

Sch D, page 3/End Other Liability Amt-1

Description	Amount
Fed & FICA Tax w/h	3,400.
FUTA Tax w/h	-58.
SUTA Payable	2,862.
VT Tax w/h	3,135.
Total	<u>9,339.</u>

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

2011Attachment
Sequence No **179**

Name(s) shown on return

Country Club of Barre, Inc.

Identifying number

03-0103175

Business or activity to which this form relates

Form 990 / Form 990EZ

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7.	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2010 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2012. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	18,203.

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2011	17	21,849.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2011 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		15,142.	5.0 yrs	HY	S/L	1,515.
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	41,567.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No									24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost		
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)								25		
26 Property used more than 50% in a qualified business use:										
27 Property used 50% or less in a qualified business use:										
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1								28		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29		

Section B – Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2011 tax year (see instructions):					
43 Amortization of costs that began before your 2011 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

Form 4562

Country Club of Barre, Inc.

Form 990 - / Form 990EZ

Depreciation and Amortization Report

Tax Year 2011

► Keep for your records

2011

03-0103175

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/Convention	Prior Depreciation	Current Depreciation
DEPRECIATION												
Small Equip		01/11/11	227		100.00			227	5.00	SL/HY		23
Mower		01/11/11	5,800		100.00			5,800	5.00	SL/HY		580
Cohasset Golf Club		02/16/11	6,000		100.00			6,000	5.00	SL/HY		600
Farm Plan		06/01/11	3,115		100.00			3,115	5.00	SL/HY		312
SUBTOTAL CURRENT YEAR			15,142	0		0	0	15,142			0	1,515
Building		09/01/71	231,999		100.00			231,999	35.00	SL/NA	231,999	0
Building - Shed		01/01/86	12,000		100.00			12,000	20.00	SL/NA	12,000	0
Greens Mower		07/01/88	17,500		100.00			17,500	5.00	SL/HY	17,500	0
Raker		09/01/89	7,000		100.00			7,000	5.00	SL/HY	7,000	0
Fairway mower		07/01/90	19,250		100.00			19,250	7.00	SL/HY	19,250	0
Fairway Mower		07/01/90	18,908		100.00			18,908	7.00	SL/HY	18,908	0
Used Tractor		01/01/91	6,656		100.00			6,656	3.00	SL/HY	6,656	0
Building Renovations		07/01/91	313,911		100.00			313,911	25.00	SL/NA	246,844	12,556
Land Irrigation		07/01/91	0	369,830	100.00							0
Seeder		06/01/92	5,500		100.00			5,500	5.00	SL/HY	5,500	0
Roof		07/01/93	8,075		100.00			8,075	10.00	SL/NA	8,075	0
Greens Mower		07/01/93	4,500		100.00			4,500	5.00	SL/HY	4,500	0
2 Greens Mowers		11/01/94	5,140		100.00			5,140	5.00	SL/HY	5,140	0
John Deere		11/01/94	6,152		100.00			6,152	7.00	SL/HY	6,152	0
Leaf Blower		11/01/94	2,562		100.00			2,562	5.00	SL/HY	2,562	0
Mowers (Myopia Club)		02/28/95	2,080		100.00			2,080	5.00	SL/HY	2,080	0
Entrance Sign		05/08/95	1,017		100.00			1,017	10.00	SL/HY	1,017	0
IMPS - Windows		06/06/95	2,530		100.00			2,530	20.00	SL/NA	1,977	127
Wooden Benches		06/06/95	720		100.00			720	7.00	SL/HY	720	0
#14 Tee Improvement deck		06/06/95	0	287	100.00							0
Range Mats		06/06/95	2,097		100.00			2,097	7.00	SL/HY	2,097	0
Addit'l Deck Furniture		06/08/95	859		100.00			859	10.00	SL/HY	859	0
#4 Tee Top soil		07/22/95	0	300	100.00							0
Tree Removal #2		08/22/95	0	1,800	100.00							0
Greens Drainage		10/15/95	0	10,919	100.00							0
#16 tee Renovation		11/01/95	0	4,512	100.00							0
Rotary Mower		01/24/96	18,895		100.00			18,895	7.00	SL/HY	18,895	0
Sprayer / Blower		04/30/96	1,000		100.00			1,000	7.00	SL/HY	1,000	0
WainsCoating - Lounge		05/06/96	705		100.00			705	20.00	SL/NA	515	35
Fax		05/22/96	504		100.00			504	5.00	SL/HY	504	0

Code: S = Sold, A = Auto, L = Listed, C = COGS

Form 4562

Depreciation and Amortization Report

Country Club of Barre, Inc.

Tax Year 2011

2011

Form 990 - / Form 990EZ

► Keep for your records

03-0103175

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/Convention	Prior Depreciation	Current Depreciation
Turf for tees		06/11/96	0	2,929	100.00							0
Ice Machines		07/04/96	3,202		100.00			3,202	10.00	SL/NA	3,202	0
Charis		07/12/96	472		100.00			472	10.00	SL/HY	472	0
Water Softener		08/21/96	3,253		100.00			3,253	10.00	SL/NA	3,253	0
GHIN Computer		01/01/97	1,706		100.00			1,706	5.00	SL/HY	1,706	0
Maintenance Building		04/01/97	109,287		100.00			109,287	40.00	SL/NA	37,566	2,732
Lift-Hoist @ Maint. Building		04/18/97	4,111		100.00			4,111	10.00	SL/NA	4,042	0
Cushman Cart		04/21/97	3,500		100.00			3,500	7.00	SL/HY	3,500	0
E-Z Picker Range Equipment		04/29/97	8,113		100.00			8,113	7.00	SL/HY	8,113	0
Echo Trimmer		06/09/97	189		100.00			189	5.00	SL/HY	189	0
Wainscoting Hallways		07/01/97	3,338		100.00			3,338	20.00	SL/NA	2,254	167
Practice Range		07/01/97	0	12,792	100.00							0
Shed at Range		07/01/97	3,455		100.00			3,455	20.00	SL/NA	2,334	173
Bar Sink Imps - Funct Room		07/09/97	1,470		100.00			1,470	20.00	SL/NA	997	74
Jonsered Chainsaw		07/24/97	524		100.00			524	5.00	SL/HY	524	0
Satellite TV Dish		09/10/97	569		100.00			569	5.00	SL/HY	569	0
#10 Tee Renovation		10/01/97	0	5,832	100.00							0
Practice Green		10/15/97	0	15,004	100.00							0
93 Nat'l Mower (MOD 39-84)		11/21/97	4,800		100.00			4,800	7.00	SL/HY	4,800	0
Ford Tractor & Attachments		04/08/98	15,411		100.00			15,411	7.00	SL/HY	15,411	0
Various Tee Improvements		06/30/98	0	2,848	100.00							0
New #16 Green		09/01/98	0	26,972	100.00							0
Fairway Mower		06/01/99	36,614		100.00			36,614	7.00	SL/HY	36,614	0
Various Course Improvement		06/30/99	0	1,662	100.00							0
Various Equipment		06/30/99	1,719		100.00			1,719	7.00	SL/HY	1,719	0
#4 Tee Improvements		09/20/99	0	4,393	100.00							0
Carpet - Deck		10/05/99	5,615		100.00			5,615	7.00	SL/NA	5,615	0
Carpet - Pro Shop		10/05/99	1,240		100.00			1,240	7.00	SL/NA	1,240	0
Pump - #10 Pond		10/31/99	4,306		100.00			4,306	7.00	SL/HY	4,306	0
#8 Tee Improvements		12/08/99	0	2,665	100.00							0
#17 tee Improvements		12/08/99	0	2,631	100.00							0
New #2 Green Design		12/08/99	0	1,531	100.00							0
Pickup Truck		04/11/00	9,031		100.00			9,031	5.00	SL/HY	9,031	0
Deck Furniture		04/18/00	2,080		100.00			2,080	5.00	SL/HY	2,080	0
Stump Grinder		05/31/00	10,500		100.00			10,500	7.00	SL/HY	10,500	0
Tee Mower		06/07/00	1,784		100.00			1,784	7.00	SL/HY	1,784	0
Chemical Sprayer		06/20/00	17,597		100.00			17,597	7.00	SL/HY	17,597	0

Code: S = Sold, A = Auto, L = Listed, C = COGS

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Form 4562

Depreciation and Amortization Report

2011

Country Club of Barre, Inc.

Tax Year 2011

Form 990 - / Form 990EZ

► Keep for your records

03-0103175

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
Various equipment		07/01/00	3,822		100.00			3,822	7.00	SL/HY	3,822	0
Members Lounge Exhaust System		07/26/00	2,680		100.00			2,680	20.00	SL/NA	1,407	134
Greens Mowers (3)		08/24/00	6,827		100.00			6,827	7.00	SL/HY	6,826	0
New #2 green Tee		10/31/00	0	30,442	100.00							0
Leaf Vacuum Machine		03/20/01	11,550		100.00			11,550	7.00	SL/HY	11,550	0
Used Dump Truck		04/25/01	2,000		100.00			2,000	5.00	SL/HY	2,000	0
New carts (with roofs/windshields)		04/30/01	165,649		100.00			165,649	7.00	SL/HY	165,649	0
Cart Gas Tank Systemf		06/14/01	4,233		100.00			4,233	7.00	SL/HY	4,233	0
Various Tee Improvements		06/15/01	0	5,082	100.00							0
Greens Covers		10/11/01	9,337		100.00			9,337	7.00	SL/HY	9,337	0
Toro Sand Pro w/Rake		03/07/02	2,000		100.00			2,000	7.00	SL/HY	2,000	0
Toro Triplex Mower		03/07/02	6,500		100.00			6,500	7.00	SL/HY	6,500	0
Hardwood Bakers Table / Shelves		04/04/02	1,050		100.00			1,050	7.00	SL/NA	1,013	0
Vertidrain Equipment		04/25/02	2,550		100.00			2,550	7.00	SL/HY	2,549	0
Kitchen Floor Improvements		05/01/02	2,871		100.00			2,871	20.00	SL/NA	1,246	144
Gas Fryer		05/01/02	1,159		100.00			1,159	7.00	SL/MQ	1,140	0
2 Door Freezer		05/01/02	2,864		100.00			2,864	7.00	SL/MQ	2,813	0
Portable Radios		05/01/02	1,764		100.00			1,764	5.00	SL/HY	1,764	0
3 Door Cooler		05/01/02	3,040		100.00			3,040	7.00	SL/MQ	2,984	0
Dishes / Flatware / Serv. Equip.		05/01/02	11,415		100.00			11,415	7.00	SL/MQ	11,212	0
Hot Dog Steamer		05/01/02	449		100.00			449	5.00	SL/MQ	439	0
Toaster		05/01/02	557		100.00			557	5.00	SL/MQ	542	0
Gas Broiler		05/01/02	3,509		100.00			3,509	7.00	SL/MQ	3,446	0
Misc. Equipment (Bonacorsi)		05/02/02	579		100.00			579	7.00	SL/MQ	569	0
SS Utility Cart, Etc.		05/07/02	722		100.00			722	7.00	SL/MQ	709	0
Chopper / Salad Prep / Sandwich		05/09/02	1,609		100.00			1,609	7.00	SL/MQ	1,581	0
Triplex Mower		05/11/02	4,200		100.00			4,200	7.00	SL/HY	4,200	0
Freezer		05/12/02	420		100.00			420	7.00	SL/MQ	413	0
2 Cash Registers		05/12/02	611		100.00			611	5.00	SL/MQ	595	0
SS Tables w/ Drawers		05/21/02	1,410		100.00			1,410	7.00	SL/MQ	1,383	0
Office Equipment		09/11/02	1,794		100.00			1,794	5.00	SL/HY	1,794	0
Misc. Equipment (auction)		09/26/02	594		100.00			594	7.00	SL/MQ	594	0
Blodgett Combination Oven		09/26/02	550		100.00			550	7.00	SL/MQ	550	0
Hobart 30 Qt Mixer		09/26/02	1,293		100.00			1,293	7.00	SL/MQ	1,293	0
Vulcan 10 Burner Dbl Oven		09/26/02	605		100.00			605	7.00	SL/MQ	605	0
Green Cover		10/10/02	664		100.00			664	7.00	SL/HY	664	0
Leaf Blower		10/12/02	4,250		100.00			4,250	7.00	SL/HY	4,250	0

Code: S = Sold, A = Auto, L = Listed, C = COGS

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Form 4562

Country Club of Barre, Inc.
Form 990 - / Form 990EZ

Depreciation and Amortization Report

Tax Year 2011

Keep for your records

2011

03-0103175

Asset Description	Code	Date in Service	Cost (net of land)	Land	Business Use %	Section 179	Special Depreciation Allowance	Depreciable Basis	Life	Method/ Convention	Prior Depreciation	Current Depreciation
Toro 4WD Fairway Mower		10/12/02	37,607		100.00			37,607	7.00	SL/HY	37,605	0
Greens Aerator		10/14/02	12,425		100.00			12,425	7.00	SL/HY	12,425	0
Cushman Cart		10/14/02	16,680		100.00			16,680	7.00	SL/HY	16,680	0
Toro Mowers		05/19/03	45,716		100.00			45,716	7.00	SL/HY	45,716	0
Television		07/17/03	668		100.00			668	5.00	SL/HY	668	0
Tractor Accessories		08/05/03	1,061		100.00			1,061	7.00	SL/HY	1,061	0
Improvements		08/05/03	1,393		100.00			1,393	20.00	SL/NA	518	70
Garland Convection Range		04/16/04	5,708		100.00			5,708	7.00	SL/HY	5,301	407
Water Purifier / Softener		04/24/04	1,136		100.00			1,136	10.00	SL/NA	739	114
Under-Counter Refrigerator		05/20/04	2,508		100.00			2,508	7.00	SL/HY	2,329	179
3 Custom Greens Mowers		05/20/04	1,450		100.00			1,450	7.00	SL/HY	1,346	104
Misc Kitchen Equipment		06/04/04	957		100.00			957	7.00	SL/HY	888	68
Cushman Aerifier		08/05/04	7,000		100.00			7,000	7.00	SL/HY	6,500	500
Chairs - Members Lounge		09/14/04	1,007		100.00			1,007	7.00	SL/HY	935	72
Office Furniture & Equipment		09/15/04	1,145		100.00			1,145	5.00	SL/HY	1,145	0
Miscellaneous equipment		11/09/04	1,828		100.00			1,828	7.00	SL/HY	1,698	130
Cash Register		12/28/04	1,860		100.00			1,860	5.00	SL/HY	1,860	0
Refrigeration		05/02/05	3,600		100.00			3,600	10.00	SL/HY	1,980	360
Mower		05/31/05	4,770		100.00			4,770	7.00	SL/HY	3,748	681
2003 Chevy P/U Truck		06/10/05	12,000		100.00			12,000	5.00	SL/HY	12,000	0
Misc. Kitchen Equipment		07/01/05	1,362		100.00			1,362	7.00	SL/HY	1,070	194
18' Honda Mower		03/29/06	795		100.00			795	5.00	SL/HY	716	79
Deck Improvements		05/31/06	13,320		100.00			13,320	20.00	SL/NA	3,108	666
Jonsered Trimmer		07/14/06	403		100.00			403	5.00	SL/HY	363	40
Kubota #3400 HSD Tractor w/loader		09/01/06	18,427		100.00			18,427	7.00	SL/HY	11,846	2,632
Alum Dump Body for Golf Cart		09/29/06	400		100.00			400	5.00	SL/HY	360	40
Various Cart Path Improvements		01/01/07	2,241		100.00			2,241	39.00	SL/HY	201	57
Various Cart Path Improvements		01/01/07	3,370		100.00			3,370	39.00	SL/HY	302	86
Various Cart Path Improvements		01/01/07	2,500		100.00			2,500	39.00	SL/HY	224	64
Cart Path Improvements		01/01/07	3,585		100.00			3,585	39.00	SL/HY	322	92
Various Cart Path Improvements		01/01/07	7,130		100.00			7,130	39.00	SL/HY	640	183
Cart Path Improvements		01/01/07	1,774		100.00			1,774	39.00	SL/HY	159	45
Well		01/01/07	5,863		100.00			5,863	39.00	SL/HY	526	150
Drainage Improvement		01/01/07	2,894		100.00			2,894	39.00	SL/HY	260	74
Driveway paving		01/01/07	1,220		100.00			1,220	39.00	SL/HY	109	31
Well		01/01/07	9,503		100.00			9,503	39.00	SL/HY	853	244
Granite Tee signs		01/01/07	4,800		100.00			4,800	39.00	SL/HY	431	123

Code: S = Sold, A = Auto, L = Listed, C = COGS

**Application for Extension of Time To File an
Exempt Organization Return**

OMB No 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only ☐*All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns***Enter filer's identifying number, see instructions**

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	<u>Country Club of Barre, Inc.</u>	<input checked="" type="checkbox"/> <u>03-0103175</u>
	Number, street, and room or suite number. If a P.O. box, see instructions	Social security number (SSN)
	<u>P.O. Box 298</u>	<input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	<u>Barre</u>	<u>VT 05641</u>

Enter the Return code for the return that this application is for (file a separate application for each return)

☐ 01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► Frances A. Rawden

Telephone No. ► (802) 476-7658

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Aug 15, 20 12, to file the exempt organization return for the organization named above.
The extension is for the organization's return for:

- ☒ calendar year 20 11 or
- ☐ tax year beginning _____, 20 _____, and ending _____, 20 _____.

- 2 If the tax year entered in line 1 is for less than 12 months, check reason. ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

BAA For Paperwork Reduction Act Notice, see Instructions.Form **8868** (Rev 1-2012)