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Form **990**

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

2011

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements

<u>A</u> _	For the 20	011 calen	dar year, or tax year beginning $11/01$, 2011, and endin	g 10/31	, 2012
5B	Check if app	ıcable	C	D Employer Id	lentification Number
	Address	change	Lake Mansfield Trout Club	03-01	35990
3	Name d	hange	4400 Nebraska Valley Road	E Telephone r	number
ř	Initial re	eturn	Stowe, VT 05672	(802)	253-7565
B ENVELOPE	Termina	ted			
1	Amende	ed return		G Gross receip	ots \$ 866,043.
5	Applicat	tion pending	F Name and address of principal officer	H(a) Is this a group return for	
=	U	. ,	·	H(b) Are all affiliates included	1 1100 1 1100
ī	Tax-exem	pt status	501(c)(3) X 501(c) (7) (insert no) 4947(a)(1) or 527	If 'No,' attach a list (see	instructions)
<u>خ</u> -	Website			H(c) Group exemption number	ar ►
<u>ٿ</u> ۔ K		ganization	X Corporation Trust Association Other▶ L Year of Formati		of legal domicile VT
P.	art i S	ummai	· 	<u> </u>	01.1090.100110
5			be the organization's mission or most significant activities. Social/Re	creational Cl	nh
		, 2000.	po no organización interior, or most organización dos misos poetada.	CTCACTOMBT OF	~~~~~~~
Š					
Activities & Governance					
8	2 Che	ck this be	ox If the organization discontinued its operations or disposed of mo	re than 25% of its net	assets.
Ö			oting members of the governing body (Part VI, line 1a)	1 .	3 15
Ø.	4 Nur	nber of in	dependent voting members of the governing body (Part VI, line 1b)	4	
ij			of individuals employed in calendar year 2011 (Part V, line 2a)	_ 5	
ŧ			r of volunteers (estimate if necessary)	_ 6	
4	1		ed business revenue from Part VIII, column (C), line 12	├	7a 7,285.
	b Net	unrelated	d business taxable income from Form 990-T, line 34		7ь 5,769.
				Prior Year	Current Year
ø	1		and grants (Part VIII, line 1h)	128,504	
Revenue			vice revenue (Part VIII, line 2g)	732,565	
ě	10 Inve	estment II	icome (Fait Viii, column (A), lines 5, 4, and 7d)	6,400	
п.	11 Oth	er revenu	ie (Part VIII, column (A), lines 5, 6d, 8c; 9c, 10c, and 11e).	15,543	
			e – add lines 8 through 11 (must equal at Millogumn)(A) lines 1.3)	883,012	866,043.
	13 Gra	nts and s	initinal arroants paid (rait ix, column) (x), anaes_123/		
	14 Ber	netits paid	I to or for members (Part IX, column (A), Interpretation		
ø	15 Sal		er compensation, employee benefits (Part-IX, column (A), lines 5-10)	318,306	334,046.
Expenses	16a Pro	fessional	fundraising fees (Part IX, column (A), line 11e)		
ĝ	b Total	al fundrai	sing expenses (Part IX, column (D), line 25)▶	一种地域的	
ú	17 Oth	er expen	ses (Part IX, column (A), lines 11a-11d, 11f-24e)	374,532	
)	•	ies Add lines 13-17 (must equal Part IX, column (A), line 25)	692,838	
	I .		s expenses. Subtract line 18 from line 12	190,174	
8 8				Beginning of Current Ye	
		al assets	(Part X, line 16)	2,657,717	
A P	21 Tot		es (Part X, line 26)	1,397,702	
Net Assot	22 Net		r fund balances, Subtract line 21 from line 20	1,260,015	
	art II S			1,200,013	1,330,324.
				the best of a least of	
CO	mplete Declar	ation of prej	declare that I have examined this return, including accompanying schedules and statements, and to larer (other than officer) is based on all information of which preparer has any knowledge	me best of my knowledge and	belief, it is true, correct, and
	, , , , , , , , , , , , , , , , , , , ,	AQ/	ma Martin	6/3/20	213
Si	gn	6 gnat	ure of officer	Date	
	ere	TA	NES INCINTURE TREASUREYZ		
		Type o	r print name and title	·	
	·····	Print/Type	preparer's name Preparet's signature Date	, Check of	PTIN
D-	aid	l **	een A Mahar CPA Wathleen A Mahar CPA 5/24/	self-employed	P01276914
	alu reparer	Firm's nam		sen-employed	11.012.10314
Ü	se Only	Firm's add			30-0662785
-	· - · · · · · · · · · · · · · · · · · ·	rum s add	Lake Elmore, VT 05657		02-888-3654
N 4-	av the IDC	discuss *		Phone no 80	
_			his return with the preparer shown above? (see instructions)	A01131 000000	
R	AM FORPA	perwork I	Reduction Act Notice, see the separate instructions. TEE	A0113L 08/18/11	Form 990 (2011)

913-16

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Form	n 990 (2011) Lake Mansfield Trout Club	- 03-0	13599	90	ı	Page 2
Pai	rt III Statement of Program Service Accomplishments					
	Check if Schedule O contains a response to any question in this Part III					
1	Briefly describe the organization's mission.					
	Social/Recreational Club					
2	Did the organization undertake any significant program services during the year which were not listed	on the prio	r			
	Form 990 or 990-EZ?			Yes	X	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	X	No
	If 'Yes,' describe these changes on Schedule O.					
4	Describe the organization's program service accomplishments for each of its three largest program service section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the others, the total expenses, and revenue, if any, for each program service reported.	ervices, as r amount of	neasur grants	ed by e and all	expen locatio	ses. ons to
	a (Code:	/Payanua	ė			
40	Maintain property for the use of it's members which includes la			hine	n	 ′
	other recreational activities including club facilities/lodging	Ke, uam	, _T	5117711	1 an	<u>u</u>
	other recreational activities including club facilities/longing	· -				
						- - -
		· -				
			-			
						
41	b (Code:) (Expenses \$)	(Revenue	\$)
		. 				-
		- 		- -		
				- .		
				_ _		
		·				
4	c (Code. (Expenses \$ Including grants of \$)	(Revenue	\$)
	, <u> </u>	`	·	-		—′
			-			
			-			
	d Other program services. (Describe in Schedule O.)					
4	(Expenses \$	Ś			`	
	e Total program service expenses ►	T				
	A 1 C/m. P. C Bratti del tred exherises .					

			res	140
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? Yes, complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
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	3		х
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	4		
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	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, 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 ³ f 'Yes,' complete Schedule D, Part III	8		х
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	9_		Х
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	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
;	a Did the organization report an amount for land, buildings and equipment in Part X, line 10 <i>'lf 'Yes,' complete Schedule D, Part VI</i>	11a	Х	
ı	Did the organization report an amount for investments- other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11b		х
•	Did the organization report an amount for investments- program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11c		х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11d		х
	e Did the organization report an amount for other liabilities in Part X, line 25?If 'Yes,' complete Schedule D, Part X	11e	Х	
1	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)7f 'Yes,' complete Schedule D, Part X	11f	-	Х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		Х
	b Was the organization included in consolidated, independent audited financial statements for the tax year?f 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	•	Х
	Is the organization a school described in section 170(b)(1)(A)(ii)?If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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	14b		х
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	15		х
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	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 (see instructions)	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
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? Yes, complete Schedule G, Part III	19		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2011) Lake Mansfield Trout Club

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? If 'Yes,' complete Schedule I, Parts I and II	21		Х_
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? If 'Yes,' complete Schedule I, Parts I and III.	22		<u> </u>
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? If 'Yes,' complete Schedule J	23		X
24 a	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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(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		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?.	24d		
25 a	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? If 'Yes,' complete Schedule L, Part I	25a		
ŀ	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-EZ3f 'Yes,' complete Schedule L, Part I	25b		
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? If 'Yes,' complete Schedule L, Part II	26		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? If 'Yes,' complete Schedule L, Part III	27		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):			·
i	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		<u>X</u>
ı	A family member of a current or former officer, director, trustee, or key employee? If 'Yes, 'complete Schedule L, Part IV	28b		<u>X</u>
(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? If 'Yes,' complete Schedule L, Part IV	28c		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Χ_
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		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>
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and 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 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		<u>x</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
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 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
3A/	1	Forn	9 90	(2011)

The Enter the number reported in Box 3 of Form 1996. Enter -0 - if not applicable 1 a 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d 1 d	Check if Schedule O contains a response to any question in this Part V			
b Einter the number of Forms W-2C included in line 1 a. Enter -0- if not applicable Coll this organization congly with backup withholding rules for reportable payments to vendors and reportable gamming (gambling) winnings to prize winners? 26 26 27 28 Enter the number of employees reported and Form W-3, Transmittal of Wage and Tax State ments, filed for the calendar year ending with or within the year covered by this return 28 29 It at least one is reported on line 22, and the organization file all required federal employment tax returns? Note, If the sum of lines Is and 2a is greater than 250, you may be required too-file (see instructions) 30 It the organization have vertical business gross income of \$1 M00 or more during the year? 31 It Yes has it filed a Form 990-T for this year? If Wo, provide an explanation in Schedule 0 32 It Yes has it filed a Form 990-T for the year? If Wo, provide an explanation in Schedule 0 33 It Yes has it filed a Form 990-T for the year? If Wo, provide an explanation in Schedule 0 34 At any time during the calendary year, did the organization thay are mitted in or a significant or foreign country. 35 It Yes has it filed a Foreign country. 36 It Yes, and the organization that with suffer transaction at any time during the tax year? 38 It Yes a did not greater than 30 M00 more during the tax year? 39 It Yes, and the organization tier form 8855-T? 40 Joh any taxable party notify the organization file form 8855-T? 41 It Yes, induced the programation tier form 8855-T? 42 John organization that were not tax disclarable? 43 If Yes, induced the programation tier form 8855-T? 44 It Yes, induced the programation time organization an express statement that such contributions or grits were form that disclarable? 45 It Yes, induced the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided? 45 It Yes, indicate the curricular windicate that the value of the value of the goods or services provided? 46 It Yes,			Yes	No
c Did the arganization comply with backup withholding rules for reportable payments to vendors and reportable gaming (garthing) winnings to price winners? 2	1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		,	
(gambling) winnings to prize winners? 2	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
(gambling) winnings to prize winners? 2	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
ments, filed for the calendar year ending with or within the year covered by this return 2a	(gambling) winnings to prize winners?	1 c	Х	
Note, if the sum of lines Ia and 2 is greater than 250, you may be required toe-file, (see instructions) 3 bit if Yes' has it filed a Form 990-T for this year? If No. 'provide an explanation in Schedule 0 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)? 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization aparty to a prohibited tax shelter transaction? 6 a Does the organization have annual gross recepts that are normally greater than \$100,000, and did the organization solicit arry contributions that were not tax deductible? 5 bit If Yes, 'did the organization include with every solicitation an express statement that such contributions or gitts were not tax deductible? 6 bit If Yes, 'did the organization include with every solicitation and express statement that such contributions or gitts were not tax deductible? 7 bit If Yes, 'did the organization notify the donor of the value of the goods or services provided? 8 bit If Yes, 'indicate the number of Forms 8282 filled during the year? 9 bit If Yes, 'indicate the number of Forms 8282 filled during the year 10 bit the organization notify the donor of the value of the goods or services provided? 11 bit the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 12 bit the organization neerwed a contribution of qualified intellectual property, did the organization file Form 8899 as required? 13 bit the organization maintaining donor advised funds and section 593(XS) supporting organizational the special property is promoted to other sources a post property of the programization file Form 1084: 13 bit the organization maintai	2a 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 2a 26			
3a DX the organization have unrelated business gross income of \$1,000 or more during the year? bil "Yes' has it filed a Form 990-T for this year?!!" No, 'provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account). The foreign country is the signature of other financial account in a foreign country (such as a bark account, securities account, or other financial account)? See instructions for filing requirements for Form 10 Foreign Bank and Financial Accounts. Sa Was the organization or party to a prohibited tax shelter transaction at any time during the lax year? 5a Was the organization or party to be organization that it was or is a party to a prohibited tax shelter transaction? 6b Unit in the Sa or 5b, did the organization file Form 8886-T? 6a Does the organization network annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6c If Yes, 'did the organization netucle with very solicitation an express statement that such contributions or gifts were not tax deductible? 7b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made parity as a contribution and parity for goods and services provided to the payor? bil "Yes,' did the organization netity the donor of the value of the goods or services provided? cold the organization received a payment in excess of \$75 made parity as a contribution and parity for goods and services provided to the payor? bil "Yes,' did the organization netity the donor of the value of the goods or services provided? cold the organization of carry and the services of the goods or services provided? for maccollates the number of Forms 8822 filed during the year e Did the organization carry and the services of the goods or services provided to the payor? If the organization received a	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
b IV Yes: has it lited a Form 990-T for this year? If No., provide an explanation in Schedule O A a AI arm time during this calibration of the year 2 du the organization have an interest in, or a signature or other authority over, a financial account in a foreign country; which is a provided to the provided and in a foreign country; which is a substitution of the provided and in a foreign country; which is a provided and in a financial accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b IV Yes, to line 5a or 5b, did the organization that I was or is a party to a prohibited tax shelter transaction? 5c IV 1995, to line 5a or 5b, did the organization that I was or is a party to a prohibited tax shelter transaction? 5c IV 1995, to line 5a or 5b, did the organization that I was or is a party to a prohibited tax shelter transaction? 5c IV 1995, to line 5a or 5b, did the organization that I was or is a party to a prohibited tax shelter transaction? 5c IV 1995, to line 5a or 5b, did the organization that I was or is a party to a prohibited tax shelter transaction? 5c IV 1995, to line 5a or 5b, did the organization file form 8886-1? 6c IV 1995, to line 5a or 5b, did the organization file form 8896-1? 6c IV 1995, to line 5a or 5b, did the organization receive a payment in excess of \$75 made partity as a contributions of the payor? 7c IV 1995, indicate the number of Forms 8826. Ifted during the year of the payor and the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8262? 7d IV 1995, indicate the number of Forms 8262 filed during the year of the payor and the organization file a form 1995. 7d IV 1995, indicate the number of Forms 8262 filed during the year of the payor and	Note. If the sum of lines 1a and 2a is greater than 250, you may be required toe-file. (see instructions)			
4a A larry 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 innancial accounts). b if "yes, enter the name of the foreign country: " See instructions for filing requirements for Form TDF 90-22.1, Report of Foreign Bank and Financial Accounts. 5 a Was the organization party to a prohibited tax shelter transaction at any time during the tax year? 5 a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6 a Deas 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? 6 a Deas 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? 6 a Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9 b If "Yes," did the organization notify the donor of the value of the goods or services provided? 9 b If "Yes," indicate the number of forms 8828? filled during the year of the walue of the goods or services provided? 9 b If the organization received a contribution of qualited intellectual property, and the organization file of the programization received a contribution of cars, boats, arplanes, or other vehicles, did the organization file a Form 1096 C? 9 sponsoring organization, or a donor advised funds and section 509(a)(3) supporting organization file a Form 1096 C? 10 the organization maintaining donor advised funds. 10 b If the organization or form 900 part VIII, line 12 b Gross receipts, uncluded on Form 900 part VIII, line 12 b Gross receipts, uncluded on F	3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
b II "Yes," cell the name of the foreign country." See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization file form 8896-7? 5c C 6a 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? 6b If Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 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? 7 b II "Yes," did the organization notify the donor of the value of the goods or services provided? 10 If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 If the organization receive any funds, directly or indirectly, or pay premiums on a personal benefit contract? 9 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 3 Sponsoring organizations and price payments, directly or indirectly, or a personal benefit contract? 9 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1036-0? 8 Sponsoring organizations maintaining donor advised funds and section 509(aX3) supporting organization file a Form 8999 70 Payments, included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 1 Section 501(cX29) qualified nonprofit fleath insurance issuers. a Is seed on 547(x) promizations. Enter: a Gross income from other sources (D	b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b	X	
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9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b 10 Section 501(c)(X) organizations.Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b 11 Section 501(c)(X12) organizations.Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) nonexempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(X29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 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. c Enter the amount of reserves any payments for indoor tanning services during the tax year? b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O.	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business	8		
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11 Section 501(c)(12) organizations.Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) nonexempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 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? 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. c Enter the amount of reserves on hand 13b 13b 13b 14a X b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O. 14b	a Initiation fees and capital contributions included on Part VIII, line 12			
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14a Did the organization receive any payments for indoor tanning services during the tax year? b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O 14b	which the organization is licensed to issue qualified health plans .			
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O				
				<u> </u>
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		(000

BAA

Form 990 (2011)

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 No Yes 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 in Schedule O. 14 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?. X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X 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 more Х members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b X stockholders, or other persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a X a The governing body? X b Each committee with authority to act on behalf of the governing body? 8b 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 Q9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Х 10a Did the organization have local chapters, branches, or affiliates? 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 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy if 'Yes,' describe in Schedule O how this is done. 12c 13 13 Did the organization have a written whistleblower policy? 14 Х 14 Did the organization have a written document retention and destruction policy? 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 See Schedule 0 15a 15b b Other officers of key employees of the organization 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 16a taxable entity during the year? 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 16b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None 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. Another's website Upon request Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to See Schedule 0 the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ Dean Economou 4400 Nebraska Valley Road Stowe VT 05672 802-253-4115

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Page 7 Pan: Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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.

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	n nor any	relate	d or			ion co	mpe	insated any current of	fficer, director, or trus	tee
	<u> </u>	(C) Position								
(A) Name and title	(B) Average hours	unles	(do not check more than one unless person is both an off and a director/trustee)		n an offic	box, er	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other	
	per week (describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensabon from the organizabon and related organizabons
(1) Dean Economou President	20	x		Х				39,024.	0.	0.
(2) Scott Boardman	20			Λ	 	 		33,024.	0.	
Vice President	2	X		Х		l		0.	0.	0.
(3) James McIntyre										
Treasurer	5	Х	1	X	1			0.	0.	0.
(4) Steven Riley								-		
Secretary	3	X		Х				0.	0.	0.
(5) Stuart Weppler]									
2nd VP	11	X	L	X	<u> </u>			0.	0.	0.
_(6) Thomas Brock	4	l						_		
Director	1	X			<u> </u>			0.	0.	0.
_(7)_Tim_Burke	1	l v								0
Director	1	X	\vdash	<u> </u>	├-		_	0.	0.	0.
(8) Peter Kunin	┨ 。	v							ا م	0
Director	1	X	╁	-				0.	0.	0.
(9) John Hynes Director	1	x			ĺ			0.	0.	0.
(10) Dale Neil	 -	 	\vdash	-	<u> </u>	i e	-		<u> </u>	
Director	1	X						0.	0.	0.
(11) Peter Nolan										
Director	1	X	<u> </u>					0.	0.	0.
(12) Wilbur Mann Jr										
Director	1	X			<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(13) Pall Spera	1		1	1	1	1				
Director	11	X	ļ	<u> </u>	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(14) Kenneth Valentine	1			1						_
Director	1	X		<u> </u>	<u></u>	<u> </u>	<u>L_</u>	0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont)										
				((()					
(A) Name and title	(B) Average hours	verage box, unless person is both						(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (describ	우집	'ns	Officer	Key	로	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization
	hours	tirect	ututio	cer	emp	hest o	mer			and related organizations
	for related	o, 17	nal tr		employee	e omp				
	organı- zations ın	Individual trustee or director	ustee		"	Highest compensate employee				
	Sch O)					ŧed				
(15) William Adams										
Director	1	X			_		\vdash	0.	0	0.
(16)										
(17)										
									· · · · · · · · · · · · · · · · · · ·	<u> </u>
(18)	1									
(19)										
		1_								
(20)										
(21)			 -		\vdash					
					<u> </u>					
(22)										
(23)										
(24)										
(25)										
1 b Sub-total		1	L	L	1	1		39,024.	0	0.
c Total from continuation sheets to Part VII, Section	Α						•	0.	0	
d Total (add lines 1b and 1c)							<u> </u>	39,024.	0	
2 Total number of individuals (including but not limite from the organization ► 0	d to th	ose	liste	d at	ove) wh	o re	ceived more than	\$100,000 of repo	ortable compensation
										Yes No
3 Did the organization list anyformer officer, director on line 1a? If 'Yes,' complete Schedule J for such it	or trus	tee, al	key	em	ploy	ee, d	or hi	ghest compensate	ed employee	3 X
4 For any individual listed on line 1a, is the sum of re	eportab	le co	omo	ensa	atıor	മെ	d oth	er compensation	from	***
the organization and related organizations greater such individual	than \$	50,0	000?	If 'Y	'es'	com	plete	Schedule J for		4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or	comper comple	nsatı te S	on fi	rom dule	any J fo	unr or su	elate	ed organization or erson	ındıvıdual	5 X
Section B. Independent Contractors									t #100 000 -4	
Complete this table for your five highest compensation from the organization. Report compensation.	itea inc ensatio	epei n for	the	cal	enda	ar ye	s ina	nding with or with	in the organization	on's tax year.
(A) Name and business addre	\$S							Description		(C) Compensation
	_									
	<u> </u>							-		
								 		
2 Total number of independent contractors (including \$100,000 in compensation from the organization)	_	ot lin	nited	l to	thos	e lis	ted	above) who recei	ved more than	

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u>, </u>	1 a	Federated campaigns 1a					1
ξŞ		Membership dues . 1b					ĺ
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS							,
		1		•			
		Related organizations 1d					i
	е	Government grants (contributions) 1 e					}
SIBUTIO OTHER:		All other contributions, gifts, grants, and similar amounts not included above	98,793.				
돌	g	Noncash contributions included in Ins 1a-1f: \$,
	h	Total, Add lines 1a-1f .	. •	98,793.			
3			Business Code		~ 		
PROGRAM SERVICE REVENUE	2a	Membership Dues & Assessments 9	00099	741,695.	741,695.		
Æ	b						
빌	С						
<u> </u>	d						
Σ							
ig A	e	All other program envisor revenue				<u> </u>	
စ္က		All other program service revenue		741 605			
-	9	Total. Add lines 2a-2f		741,695.			
	3	Investment income (including dividends,	interest and	7,285.		7,285.	
ĺ	_	other similar amounts)		1,203.		1,203.	
- 1	4	Income from investment of tax-exempt to	· · · · · · · · · · · · · · · · · · ·				
	5	Royalties	· •				ļ
		(ı) Real	(ii) Personal				
	6a	Gross rents			1		1
	b	Less, rental expenses			•		1
	c	Rental income or (loss).				l	
	d	Net rental income or (loss)	▶				
		(i) Securities	(ii) Other				1
	/a	Gross amount from sales of assets other than inventory					,
		•					,
	b	Less, cost or other basis					;
		and sales expenses.					
		Gain or (loss)	<u></u>			·	
	d	Net gain or (loss)					
OTHER REVENUE	8 a	Gross income from fundraising events (not including \$					
3		of contributions reported on line 1c).]				
~		See Part IV, line 18 a					1
Œ	Ŀ	Less: direct expenses b					
0	ا	: Net income or (loss) from fundraising ev	vents >			}	
		Gross income from gaming activities. See Part IV, line 19					
		Less direct expenses b					
	t .	: Net income or (loss) from gaming activi	ties >			1	1
							
	10 a	Gross sales of inventory, less returns and allowances					
	١.	•···• • • · · · · · · · · · · · · · · ·	<u> </u>				
		b Less: cost of goods sold b	nton:		 	· · · · · · · · · · · · · · · · · · ·	
	<u> </u>	Net income or (loss) from sales of inver	itory			 	
	<u> </u>	Miscellaneous Revenue	Business Code	10 070	10 070		
	11 a	Fees/Miscellaneous	900099	18,270.	18,270.		
	!	b		·	ļ	<u> </u>	-
	•	c					
	•	d All other revenue					
	1	e Total. Add lines 11a-11d	· •	18,270.		<u> </u>	
	12	Total revenue. See instructions	•	866,043.		7,285.	0.

Page 10

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 re-	sponse to any question	in this Part IX		<u>,</u>
Do n 6b, 7	ot include amounts reported on lines b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	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				200
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				and the state of t
4	Benefits paid to or for members			TO MAKE AND ASSESSMENT OF THE PARTY OF THE P	
5	Compensation of current officers, directors, trustees, and key employees	39,024.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages .	243,385.			
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	21,535.			
10	Payroli taxes	30,102.			
	Fees for services (non-employees):				
а	Management				<u> </u>
b	Legal				
C	Accounting .	• 			
C	Lobbying		A Compact Allow 1 17	19 15	
e	Professional fundraising services See Part IV, line 17			36 5 B 5 7 1	<u> </u>
	Investment management fees				
ç	Other				ļ
12	Advertising and promotion	894.	ļ		
13	Office expenses				
14	Information technology			<u> </u>	
15	Royalties	-			
16	Occupancy .				
17	Travel .				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19		26 515	ļ	-	
	Interest	36,515.	 	 	
21	Payments to affiliates	60 600		 	-
22	Depreciation, depletion, and amortization	69, 688.			
23	Insurance	38,277.	100 March 100 Ma		
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 Purchases	105, <u>255</u> .		ļ	<u> </u>
1	Property Repairs/Improvements	40,637.			
	c Property Taxes	26,973.			<u> </u>
	d Supplies	21,176.			
	e All other expenses.	54,273.			ļ
25	Total functional expenses Add lines 1 through 24e	727,734.			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
	Check here ► ☐ if following				
	SOP 98-2 (ASC 958-720)	I	Ī	1	1

Page 11

Pa	rt X	Balance Sheet								
					(A) Beginning of year		(B) End of year			
	1	Cash - non-interest-bearing			169,341.	1	192,537.			
	2	Savings and temporary cash investments		ſ	204,966.	2	185,232.			
	3	Pledges and grants receivable, net	dges and grants receivable, net							
	4	Accounts receivable, net			2,226.	4	10,157.			
	5	Receivables from current and former officers, director and highest compensated employees. Complete Part	rs, trus	stees, key employees, schedule L		5				
	6	Receivables from other disqualified persons (as defin persons described in section 4958(c)(3)(B), and contributions of section 501(c)(9) voluntal organizations (see instructions)			6					
S	7	Notes and loans receivable, net			7					
A S E T S	8	Inventories for sale or use			31,057.	8	37,778.			
S	9	Prepaid expenses and deferred charges.				9				
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	2,242,048.	٠ - ٤٠	``				
- 1		Less: accumulated depreciation	10b	318,167.	1,944,204.	10c	1,923,881.			
	11	Investments – publicly traded securities	010/10/1	305, 923.	11	350,651.				
	12	Investments – other securities. See Part IV, line 11			300/3201	12	330,032.			
	13	Investments – program-related. See Part IV, line 11	Í	<u></u>	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	241		2,657,717.	16	2,700,236.			
	17	Accounts payable and accrued expenses	34)		-2,237.	17	-392.			
	18	Grants payable		2,231.	18					
	19	Deferred revenue	•			19				
,	20	Tax-exempt bond liabilities				20	······································			
Ī	21	Escrow or custodial account liability. Complete Part	IV of S	Schedule D		21				
A B	22	•								
L		highest compensated employees, and disqualified pe of Schedule L	rsons.	Complete Part II		22				
E S	23	Secured mortgages and notes payable to unrelated t	hird pa	arties .	855,739.	23	697,029.			
S	24	Unsecured notes and loans payable to unrelated third	d parti	es .		24				
	25	Other liabilities (including federal income tax, payabl and other liabilities not included on lines 17-24). Con	es to r nplete	elated third parties, Part X of Schedule D	544,200.	25	605,275.			
	26	Total liabilities. Add lines 17 through 25			1,397,702.	26	1,301,912.			
N F		Organizations that follow SFAS 117, check here►	∐ a	nd complete lines			, ,			
Ť		27 through 29 and lines 33 and 34.			h		· · · · · · · · · · · · · · · · · · ·			
Ş	27	Unrestricted net assets			<u> </u>	27				
ASSETS	28	Temporarily restricted net assets				28				
	29	Permanently restricted net assets				29				
R	1	Organizations that do not follow SFAS 117, check h	ere►	X and complete			4			
F		lines 30 through 34.								
FUZD	30	Capital stock or trust principal, or current funds			240,600.	30	240,600.			
	31	Paid-in or capital surplus, or land, building, or equip-	ment f	und	87,739.	31	87,739.			
Ë	32	Retained earnings, endowment, accumulated income			931,676.	32	1,069,985.			
BALANCES	33	Total net assets or fund balances			1,260,015.	33	1,398,324.			
Š	34	Total liabilities and net assets/fund balances			2,657,717.	34	2,700,236.			
BA					· · · · · · · · · · · · · · · · · · ·		Form 990 (2011)			

BAA

Form 990 (2011)

Form	1 990 (2011) Lake Mansfield Trout Club	03-0135990		Page 12			
Par	t XI Reconciliation of Net Assets			_			
	Check 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		,043.			
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		,734.			
3	Revenue less expenses. Subtract line 2 from line 1 .	3	-	,309. ,015.			
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))						
5	Other changes in net assets or fund balances (explain in Schedule O)	5		0.			
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	1,398	324.			
Par	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII						
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		Y (es No			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			,			
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X			
ŀ	b Were the organization's financial statements audited by an independent accountant?		2b	X			
C	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	nt of the audit,	2 c	_			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		沙				
•	d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both:	e issued on a	SHE ST	4			
	Separate basis Consolidated basis Both consolidated and separate basis						
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	n the Single	3a	Х			
1	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	e required audit	3ь				
BAA	1		Form 9	90 (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

Lak	ke Mansfield Trout Club				03-0135990	
Par		r Advised Funds or Othe to Form 990, Part IV, line	r Similar Fune 6.			ete ıf
		(a) Donor advised f	unds	(b) Fu	inds and other acc	counts
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 do funds are the organization's property, subject	nor advisors in writing that the to the organization's exclusive	assets held in do legal control?	nor advised	Yes	No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private ben	the benefit of the donor or don	ng that grant func or advisor, or for	ls can be any other	Yes	☐ No
Pai	t II Conservation Easements. Comp	lete if the organization ar	swered 'Yes'	to Form 99	0, Part IV, line	e 7.
1	Purpose(s) of conservation easements held b	y the organization (check all the	at apply).		· · ·	
	Preservation of land for public use (e.g.,	recreation or education)	Preservation o	f an historica	lly important land	area
	Protection of natural habitat		Preservation o	f a certified h	istoric structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organizat last day of the tax year.	ion held a qualified conservation	n contribution in	the form of a	conservation ease	ement on the
				Н	eld at the End of t	he Tax Year
ä	Total number of conservation easements.			2a		
ŀ	Total acreage restricted by conservation ease	ments		2b		
•	Number of conservation easements on a cert	fied historic structure included	ın (a)	2c		
•	d Number of conservation easements included structure listed in the National Register	ın (c) acquired after 8/17/06, ar	id not on a histor	1C 2d		
3	Number of conservation easements modified, tax year ▶	transferred, released, extinguis	shed, or terminat	ed by the org	anization during th	ne
4	Number of states where property subject to c	onservation easement is locate	d►	_		
5	Does the organization have a written policy reand enforcement of the conservation easeme	egarding the periodic monitoring nts it holds?	g, inspection, har	ndling of viola	itions, Yes	No
6	Staff and volunteer hours devoted to monitori	ng, inspecting, and enforcing c	onservation ease	ments during	the year	_
7	Amount of expenses incurred in monitoring, i ▶\$	nspecting, and enforcing conse	rvation easemen	ts during the	year	
8	Does each conservation easement reported of 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	in line 2(d) above satisfy the re-	quirements of se	ction	Yes	No
9	In Part XIV, describe how the organization re include, if applicable, the text of the footnote conservation easements.	ports conservation easements i to the organization's financial s	n its revenue and statements that d	d expense states the	atement, and balar organization's acc	nce sheet, and ounting for
Pa	rt III Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical wered 'Yes' to Form 990,	Treasures, or Part IV, line	Other Sim 8.	ilar Assets.	· · · · · · · · · · · · · · · · · · ·
1:	If the organization elected, as permitted under art, historical treasures, or other similar asse in Part XIV, the text of the footnote to its final.	ts held for public exhibition, edi	ucation, or reseal	nue statemen rch in furthera	t and balance she ance of public serv	et works of vice, provide,
1	b If the organization elected, as permitted under historical treasures, or other similar assets he following amounts relating to these items:					
	(i) Revenues included in Form 990, Part VIII	l, line 1			► \$	
	(ii) Assets included in Form 990, Part X				► \$	
2	If the organization received or held works of amounts required to be reported under SFAS			or financial g	ain, provide the fo	llowing
	a Revenues included in Form 990, Part VIII, lin	e 1			- \$	
	b Assets included in Form 990, Part X				► \$	

Schedule D (Form 990) 2011 Lake				03-013		Page 2
Part III Organizations Mainta	ining Collecti	ons of Art, Histo	rical Treasures, or	Other Similar Ass	ets (con	tinued)
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		. <u> </u>		
c Preservation for future gener	ations					
4 Provide a description of the orga Part XIV.		·			se in	
5 During the year, did the organiza assets to be sold to raise funds r					Yes	No
Part IV Escrow and Custodia line 9, or reported an	I Arrangement amount on Fo	its. Complete if print of the series of the	the organization an line 21.	swered 'Yes' to Fo	rm 990, P	art IV,
1a is the organization an agent, trus	stee, custodian,	or other intermediary	for contributions or oth	er assets not		
included on Form 990, Part X?	up Bost VIV and	, accomplate the follows	na table:		Yes	∐No
b If 'Yes,' explain the arrangement	in Part XIV and	complete the following	ng table:		Amount	
c Beginning balance				1c	Amount	
d Additions during the year				1d		
e Distributions during the year			•	1e		
f Ending balance	,			1f		
2a Did the organization include an a	mount on Form	990. Part X. line 21?		<u> </u>	Yes	No
b If 'Yes,' explain the arrangement				[٠٠٠ـ
Part V Endowment Funds. Co		organization and	swered 'Yes' to For	m 990, Part IV, line	e 10.	
	(a) Current yea	r (b) Prior year	(c) Two years back	(d) Three years back	(e) Four y	ears back
1a Beginning of year balance						
b Contributions .	-					
c Net investment earnings, gains, and losses						
d Grants or scholarships						1
e Other expenditures for facilities and programs						
f Administrative expenses						-
g End of year balance]
Provide the estimated percentag	e of the current	year end balance (iın	e 1g, column (a)) held	as:		
a Board designated or quasi-endov	vment ►	%				
b Permanent endowment ▶	%					
c Temporarily restricted endowmer		<u></u> %				
The percentages in lines 2a, 2b,	and 2c should e	qual 100%				
3a Are there endowment funds not a organization by:	n the possession	n of the organization	that are held and admii	nistered for the	Yes	s No
(i) unrelated organizations					3a(i)	\top
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(ii), are the related of	organizations list	ed as required on So	chedule R?		3b	
4 Describe in Part XIV the intender	d uses of the org	janization's endowme	ent funds.			
Part VI Land, Buildings, and	Equipment.	See Form 990, P	art 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			393,171.			3,171.
b Buildings	<u> </u>		1,595,346.	262,954.		32,392.
c Leasehold improvements	· _		141,634.	8,566.		3,068.
d Equipment	ļ. <u></u>		99,226.	40,652.	5	8,574.
e Other			12,671.	5,995.		<u>6,676.</u>
Total. Add lines 1a through 1e. (Colum	nn (d) must equa	l Form 990, Part X, o	column (B), line 10(c) ₋)	. •		<u> 3,881.</u>
BAA				Sched	dule D (Form	990) 2011

TEEA3302L 01/16/12

Schedule **D** (Form 990) 2011

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).

Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)

605,275.

	edule D (Form 990) 2011 Lake Mansfield Trout Club	03-0135990	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements	N/A	
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	·	
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	per Return N/A	
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:	4 14	
	Net unrealized gains on investments.	,	
	Donated services and use of facilities . 2b		
	Recoveries of prior year grants . 2c	· ' '	
	d Other (Describe in Part XIV.)		
	e Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line1:		
	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV.)	 	
	Add lines 4a and 4b	4c	
	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses pe		
	Total expenses and losses per audited financial statements	1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	a Donated services and use of facilities 2a	j ,	
	Prior year adjustments	-	
	C Other losses 2c		
	d Other (Describe in Part XIV.)	 	
	e Add lines 2a through 2d		
3	Subtract line 2e from line 1	2 e	
3	Amounts included on Form 990, Part IX, line 25, but not on line1:	3	
4,			
	o Other (Describe in Part XIV.) 4a 4b		
	Add lines 4a and 4b	4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Par	t XIV Supplemental Information		
Com Part any	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; IV, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also consider additional information	Part IV, lines 1b and 2b; omplete this part to provid	le
		· 	
		·	
		·	
		·	
		· 	-

TEEA3304L 05/25/11

Schedule **D** (Form 990) 2011

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Scheaule D	(Form 990) 2011 Lake Mansileid Irout Club	03-0135990	Page 5
Part XIV	Supplemental Information (continued)		
			
			-
- -			
-			
-			
 -			
		- 	
			
-			
-		- 	
- 			
-			

TEEA3305L 05/25/11

Schedule **D** (Form 990) 2011

BAA

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Open to Public Inspection

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. Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number 03-0135990 Lake Mansfield Trout Club Form 990, Part VI, Line 11b - Form 990 Review Process Director reviews Form 990 and compares to in-house financials to insure return amounts tie to reconciled accounting reports, that all other information is complete and accurate. Director provides copy to Officers prior to submission. Form 990, Part VI, Line 15a - Compensation Review & Approval Process for CEO, Exec. Dir., or Top Mgtment Executive Director salary is annually reviewed and approved by the Board of Directors. Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available Tax Return(s), governing documents etc. are made available to public upon written request received by the Board of Directors.

General Elections

Page 1

Lake Mansfield Trout Club

03-0135990

Election to Not Claim Additional Depreciation Pursuant to IRC Section 168(k) (2) (D) (iii), the Organization hereby elects to not claim the additional depreciation for the following classes of property in the tax year ended 10/31/12.

Class Lives 3, 5, 7, 10, 15

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

If you are filing for an Automatic 3-Month Extension, complete only Part and check this box.

	re filing for an <mark>Additional (Not Automatic) 3-Mo</mark> plete Part II unless you have already been gran					
Electronic 1 corporation request an Associated	illing (e-file). You can electronically file Form & required to file Form 990-T), or an additional (extension of time to file any of the forms listed With Certain Personal Benefit Contracts, which ling of this form, visitwww irs gov/efile and clic	368 if you need (not automatic) I in Part I or Pa I must be sent	i a 3-month automatic extension of time 3-month extension of time. You can ele art II with the exception of Form 8870, In to the IRS in paper format (see instructi	to file (6 months for a ctronically file Form 8868 formation Return for Tran	sfers	
Part I A	utomatic 3-Month Extension of Time	. Only subn	nit original (no copies needed).			
A corporation	on required to file Form 990-T and requesting	an automatic 6	-month extension- check this box and co	mplete Part I only	▶ 🔲	
All other co income tax	rporations (including 1120-C filers), partnershi returns	ps, REMICS, a		an extension of time to fi		
	Name of exempt organization or other filer, see instructions		End me stadiu	Employer identification number (
Type or						
print	Lake Mansfield Trout Club			X 03-0135990	03-0135990	
File by the due date for	Number, street, and room or suite number. If a P.O. box, s	ee instructions		Social security number (SS)	N)	
filing your return See	4400 Nebraska Valley Road					
instructions	City, town or post office, state, and ZIP code For a foreign	address, see instru	ctions	<u> </u>		
	Stowe, VT 05672					
Enter the R	eturn code for the return that this application i	s for (file a sep	parate application for each return)	01		
Application is For		Return Code	Application Is For		urn de	
Form 990		01	Form 990-T (corporation)	0	7	
Form 990-E	BL	02	Form 1041-A	0	8	
Form 990-E	Z	01	Form 4720	0	9	
Form 990-F	<u> </u>	04	Form 5227		0	
Form 990-T (section 401(a) or 408(a) trust)		05	Form 6069		1	
Form 990-T	(trust other than above)	06	Form 8870	<u>ll</u>	2	
Telephor If the or If this is check to the extra until The e 2 If the	ension is for less an automatic 3-month (6 months for a corespondent to $\frac{6}{15}$, $\frac{20}{13}$, to file the exemplextension is for the organization's return for: calendar year 20 or	four digit Group pp, check this b poration require t organization r	be United States, check this box Exemption Number (GEN) and attach a list with the nated to file Form 990-T) extension of time eturn for the organization named above.			
	hange in accounting period					
	s application is for Form 990-BL, 990-PF, 990-Tefundable credits. See instructions	T, 4720, or 606	9, enter the tentative tax, less any	3a \$	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.

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

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.

0.

0.

3b \$

3c \$