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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation)

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

OMB No 1545-0047 Open to Public Inspection

A F	or the	2011 calendar year, or tax year beginning and	ending	· · · · · · · · · · · · · · · · · · ·					
Bc	heck if	C Name of organization		D Employer identific	cation number				
aı	oplicable								
	Address change	MOUNTAIN VIEW COUNTRY CLUB, INC		ŀ					
	Name change	Doing Business As		 	143495				
_	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite						
<u> </u>	Termin- DO BOY 97 902-53								
<u> </u>	Jated]Amend∈		l		248,900.				
\ 	⊒return ∏Applica	City or town, state or country, and ZIP + 4 GREENSBORO, VT 05841		G Gross receipts \$					
L	Jtión pending			H(a) Is this a group re					
		F Name and address of principal officer JOE WOOD 160 LAKEVIEW RD, GREENSBORO, VT 05841		for affiliates?	Yes X No				
_				H(b) Are all affiliates inc					
		mpt status 501(c)(3) X 501(c) (7) ◀ (insert no) 4947(a)(1)	or 52	—	list (see instructions)				
		WWW.MVCCVT.COM	T	H(c) Group exemption					
		organization: X Corporation Trust Association Other	L Yea	ir of formation: 1898 N	State of legal domicile, \overline{VT}				
<u>Pa</u>		Summary							
ą.		riefly describe the organization's mission or most significant activities. RECR	REATIO	N & SOCIAL A	CTIVITIES				
Activities & Governance	<u>I</u>	FOR MEMBERS, GUESTS AND VISITORS.							
Ĕ	2 (Check this box 🕨 📖 if the organization discontinued its operations or dispo	osed of mo	re than 25% of its net as					
ð	3 1	lumber of voting members of the governing body (Part VI, line 1a)		3	11				
5	4 1	lumber of independent voting members of the governing body (Part VI, line 1b)		4	11				
Se	5 T	otal number of individuals employed in calendar year 2011 (Part V, line 2a)		5	9				
ŧ	6 T	otal number of volunteers (estimate if necessary)		6	25				
Ę	l .	otal unrelated business revenue from Part VIII, column (C), line 12		7a	10,774.				
⋖		let unrelated business taxable income from Form 990-T, line 34		7b	4,871.				
_				Prior Year	Current Year				
	8 (Contributions and grants (Part VIII, line 1h)		5,920.	2,653.				
Ę	l	Program service revenue (Part VIII, line 2g)							
Revenue	l	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	237,252.	235,764.					
æ	l .	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	3,220.	2,750.				
	1	ottal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	247,699.	241,735.				
_				0.	0.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	-	0.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
	1	Renefits paid to or for members (Part IX, column (A), line 4)		122,540.	127,699.				
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	' ⊢	122,340.	127,699.				
ë		Professional fundraising fees (Part IX, column (A), line 11e)			0.				
Š		otal fundraising expenses (Part IX, column (D), line 25)	<u>) 0 . </u>	100 140	10/ 556				
ш	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11-24e)	~_າວ _	122,142.	124,556.				
	18 7	Total expenses. Add lines 13-17 (must equal Part IX) column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 MAY 1 1 2012	Š	244,682.	252,255.				
		Revenue less expenses Subtract line 18 from line 12- MAY 1 1 2012		3,017.	-10,520.				
ze se	\	The same of the sa	1811	Beginning of Current Year	End of Year				
t Assets or od Balances	20 1	otal assets (Part X, line 16)	T	762,921.	784,303.				
g‡ gB	21	otal liabilities (Part X, line 26)		131,282.	162,978.				
캺	22 1	Net assets or fund balances. Subtract line 21 from line 20		631,639.	621,325.				
Pa	art II	Signature Block							
		ties of perjury, I declare that I have examined this return, including accompanying schedul			y knowledge and belief, it is				
true	correct	, and complete Declaration of preparer (other than officer) is based on all information of v	vhich prepar	er has any knowledge.					
Sigi	n	Signature of officer	1	Date					
Her	e	JOE WOOD, TREASURER		~ £/6	12012				
		Type or print name and title							
_		Print/Type preparer's name Preparer's signature	_		X PTIN				
Paid	ı	JENNIFER LUCAS Summer IC	icas	19-27-12 11 self-employ	P01432688				
Pre	parer	Firm's name JENNIFER LUCAS	-	Firm's EIN	20-5878731				
	Only	Firm's address 6 SOUTH STREET							
	•	BURLINGTON, VT 05401		Phone no. 8	02-658-4080				
May	/ the IF	S discuss this return with the preparer shown above? (see instructions)			X Yes No				
_	01 01-2		tions.		Form 990 (2011)				

Form 990 (2011)

Form 990 (2011) MOUNTAIN VIEW COUNTRY CLUB, INC 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	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			1
	dunng 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			V
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			177
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
_	Schedule D, Part III	8		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			x
40	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		<u> </u>
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	10		
• •	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
-	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			\vdash
	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
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	'Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	<u> </u>	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	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		ļ	١.,
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	<u> </u>	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	Į		
	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	446		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b	-	 ^
13	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
.0	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	l	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	17		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	18	1	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	Ť	t i	
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	agn	(2011)

Form 990 (2011) MOUNTAIN VIEW COUNTAIN VIEW

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		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? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	1		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		<u>X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			17
	Schedule K If "No", go to line 25	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	ا ا		
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
2 5a	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	ا م۔ ا		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "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	200		
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
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		Х
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	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		X
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		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II			x
22	•	32		
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	22		х
34	Was the organization related to any tax-exempt or taxable entity?	33		<u> </u>
-	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35a	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	- COG	-	├
_	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	ŀ	х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	T	<u> </u>	
	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		<u> </u>	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
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	X	
		Form	990	(2011)

Form 990 (2011)
| Part V | Sta Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response to any question in this Part V

				<u> </u>
	Estable 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 9 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			İ
С	(gambling) winnings to prize winners?		X	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1c		_
2 a	filed for the calendar year ending with or within the year covered by this return 2a 9			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2h	х	ŀ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	71	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	х	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
ь	If "Yes," enter the name of the foreign country.	74		
	See instructions for filing 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?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	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?	6a	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	X	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u> </u>	-
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	_		
9	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		-
	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	00		1
	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		1
10	Section 501(c)(7) organizations. Enter:	95		<u> </u>
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10, 206.			
11	Section 501(c)(12) organizations. Enter	1		
а	Gross income from members or shareholders	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt 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	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			1
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	<u> </u>	L	<u> </u>
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		1

Form 990 (2011) MOUNTAIN VIEW COUNTRY CLUB, INC 03-0143495 Page [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			X
Sec	tion A. Governing Body and Management	-		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 11			
	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 1b 1			
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		<u>X</u>
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	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	<u> </u>	
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or		 37	
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		v	
	The governing body?	8a	<u>X</u>	X
ь	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)	_9_		
<u> </u>	tion D. Fonotes (this section b requests information about policies not required by the internal nevertibe code)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	163	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	<u> </u>		
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			\Box
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c		<u> </u>
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?	ļ		,,
а	The organization's CEO, Executive Director, or top management official	15a	<u> </u>	X
b	Other officers or key employees of the organization	15b	<u> </u>	X
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
Tba	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	۱.,	1	v
L	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a	├	X
Б	in yes, and the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed ▶VT			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılat	ole	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, ar	nd fina	ncial	
	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	ition:	-	
	JENNIFER LUCAS - 802-658-4080			
	6 SOUTH STREET, BURLINGTON, VT 05401			

		•
Form	aan	(2011)

MOUNTAIN VIEW COUNTRY CLUB, INC

03-0143495

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

Check if Schedule O contains a response 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 (A)	(B)	T	AI 1140		C)	ipei	isal	(D)	(E)	(F)
Name and Title	Average	 		Pos	itior) than		Reportable	Reportable	(F) Estimated
	hours per	box	, unle	ss pe	rson	tnan is boti or/trus	h an	compensation	compensation	amount of
	week	\vdash	cer an	lo a o	irecto	or/trus	tee)	from	from related	other
	(describe hours for	Individual trustee or director				ъ		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	tee or	rstee			Highest compensated employee		(W-2/1099-MISC)	(** =: *********************************	organization
	organizations	l trus	nal tri		loyee	ompe				and related
	in Schedule O)	lvidu	Institutional trustee	Officer	Key employee	phest of	Former			organizations
(1) NAT SMITH		Ĕ	Ë	동	2	포함	ਨ			
PRESIDENT	1.00	x		x				0.	0.	0.
(2) ROB BRIGHAM		 	\vdash	 	\vdash	 		<u> </u>		- 0.
VICE-PRESIDENT	1.00	X		x				0.	0.	0.
(3) JOE WOOD	"		<u> </u>							
TREASURER	1.00	X		Х				0.	0.	0.
(4) PAT HUSSEY										-
SECRETARY OF THE BOARD	1.00	Х		Х	L		L	0.	0.	0.
(5) NOELEEN MCINTYRE										
DIRECTOR	1.00	Х						0.	0.	0 .
(6) JULIA PORRAZZO										
DIRECTOR	1.00	Х			L	L		0.	0.	0.
(7) GARTH MCKINNEY				1	l					_
DIRECTOR	1.00	Х		_		<u> </u>		0.	0.	0.
(8) KATHY RUSSOTTO	1		1	l						
DIRECTOR	1.00	X	_		<u> </u>	L-	<u> </u>	0.	0.	0.
(9) MEGAN WRIGHT	1 00	X			İ		İ			
DIRECTOR (10) FRANCIE BENNETT	1.00	^		_	_	-	_	0.	0.	0
DIRECTOR	1.00	X						0.	0.	
(11) JOHN PATTERSON	1.00	┢	 	├	⊢	⊢	├	0.	0.	0
DIRECTOR	1.00	X	i					0.	0.	0
(12) PHIL GRAY	1.00	 ^	┢	 	<u> </u>	-		- 0.	0.	- · ·
SECRETARY OF THE CLUB	1.00			x				0.	0.	0
	1 2000	┢	╁		H					
				1				1		
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						1				
]				
							L			
		1			1	1				

	t VII Section A. Officers, Directors, Tru		mple	oyee			High	est		ees (continued)			_	
	(A)	(B)			•	C)			(D)	(E)			(F)	
	Name and title	Average	(do		Pos heck		than	one	Reportable Reportable		ŀ	Es	tımate	ed
		hours per					is bot		compensation	compensation	ĭ		nount	of
		week (describe	_	T		I	1	I	from	from related			other	
		hours for	recto						the	organizations			pensa	
		related	o o	25			sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	^(C)		om th	
		organizations	uste	frus		8	ig ig		(W-2/1099-WISC)			_	anızat d relat	
		ın Schedule	E E	tona	١. ١	yold	ž si	Ļ					anızatı	
		O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				o.g.	11 11 Zuti	0110
			Ť		٣	Ť		<u> </u>	-					-
											-			
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	Out Askal	1		<u> </u>	L	L	_	<u> </u>	0.		0.			_
	Sub-total								0.		0.			0.
	Total from continuation sheets to Part V	II, Section A							0.		0.			0.
	Total (add lines 1b and 1c)									<u> </u>				0.
2	Total number of individuals (including but r	ot limited to th	nose	liste	ed a	bov	e) wi	no r	eceived more than \$100	0,000 of reportabl	е			0
	compensation from the organization									· · ·			V	0 No
_	5.11										ſ		Yes	NO
3	Did the organization list any former officer,			e, ke	ey er	npk	oyee	, or	highest compensated e	mployee on		_		v
_	line 1a? If "Yes," complete Schedule J for s										-	3		X
4	For any individual listed on line 1a, is the si									the organization				,,
_	and related organizations greater than \$15										- }	4		X
5	Did any person listed on line 1a receive or							relat	ted organization or indiv	idual for services				,,
	rendered to the organization? If "Yes," com	iplete Schedul	e J	or s	uch	per	son					_ 5		X
	tion B. Independent Contractors											_		
1	Complete this table for your five highest co	-	-								pens	ation '	from	
	the organization Report compensation for	the calendar y	ear/	end	ng v	vith	or w	<u>rithir</u>		year.				
	(A)	addrass	3.7	^**	_			l	(B)		_		>)	
	Name and business	address	N	ON	땁			_	Description of s	services		ompe	nsatio	n
														
								- 1						
												_		
2	Total number of independent contractors (-	not I	ımıte	d to		_	sted	d above) who received r	nore than		-		
	\$100,000 of compensation from the organ	ızatıon 🕨					0							

		(A) Total revenu	(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	Federated campaigns 1a				
r D p	Membership dues 1b				
S A S	Fundraising events				
<u> </u>	d Related organizations 1d				
<u>နှံ့ဋ</u> e	Government grants (contributions)				
t SE			1		
호취	similar amounts not included above 1f 2,	653.			
	Noncash contributions included in lines 1a-1f \$				
<u>ම් </u>	Total. Add lines 1a-1f	2,65	53.		
	Busine	ss Code			
ဗ္ဂ 2 a	MEMBERSHIP DUES 713	3910 183,17	4. 183,174.		
e G	GUEST FEES 713	3910 19,56	19,560.		
Program Service Revenue Revenue Revenue		3910 13,01	9. 13,019.		
	GOLF CART & LOCKER REN 713	3910 9,02	7,116.	1,910.	
Par e		3910 7,58		7,588.	
ž f	713	3910 3,39		566.	
	Total. Add lines 2a-2f	_ ▶ 235,76		-	
3	Investment income (including dividends, interest, and				
	other similar amounts)	▶ 56	58.	568.	
4	Income from investment of tax-exempt bond proceed	s •			
5	Royalties	•	-		
	· · · · · · · · · · · · · · · · · · ·	ersonal			-
6 a	a Gross rents				
l t	b Less: rental expenses		\	;	
ا ا	Rental income or (loss)				
	d Net rental income or (loss)				
	· · · · · · · · · · · · · · · · · · ·	Other			
	assets other than inventory				
_ l	Less: cost or other basis				
	and sales expenses	Į.	ļ		
	Gain or (loss)				
	d Net gain or (loss)	—			
	a Gross income from fundraising events (not				
2	including \$ of				
Š	contributions reported on line 1c) See			:	
جّ	Part IV, line 18				
Other Revenue	b Less: direct expenses b				
<u>`</u> ۱	c Net income or (loss) from fundraising events	—			
- 1	a Gross income from gaming activities See				
	Part IV, line 19				
,	b Less: direct expenses				
- 1	c Net income or (loss) from gaming activities				
	a Gross sales of inventory, less returns				
"		,915.			
, l		,165.			
	c Net income or (loss) from sales of inventory	2,7	50. 2,608.	142.	1
 -		ess Code	=,333.		
11 8		202 2040	1		
	b				
	c				
ı	d All other revenue		 -	 	
1	e Total. Add lines 11a-11d				
12	Total revenue. See instructions.	241,7	35. 228,308.	10,774.	0
132009 01-23-12				, , , . <u>_ , , </u>	Form 990 (201

Form 990 (2011) MOUNTAIN VIEW 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 respon	se to any question in thi			لــا
Do r 7b, i	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and			<u> </u>	
	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 salanes and wages	113,170.	-		
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	14,529.			
11	Fees for services (non-employees):				
а	Management				
b	Legal		, , = = =		
C	Accounting	13,157.			
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other		<u>.</u>		
12	Advertising and promotion	156.			
13	Office expenses	2,999.			
14	Information technology				
15	Royalties				
16	Occupancy	6,633.	, ,,,,,,,,,,		
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials			ļ <u>.</u>	
19	Conferences, conventions, and meetings	3,223.			
20	Interest	3,223.			<u> </u>
21	Payments to affiliates	38,785.	· · · · · · · · · · · · · · · · · · ·		
22	Depreciation, depletion, and amortization	10,774.			
23	Other expanses Itemyze expanses not severed	10,774.			
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				1
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	GOLF EXPENSE	22,713.			
b	PROPERTY TAX	14,070.			
c	TENNIS EXPENSE	5,355.		-	
d	FEDERAL & STATE INCOME	2,482.		· ·	-
e	All other expenses	4,209.			
25	Total functional expenses. Add lines 1 through 24e	252,255.		-	· · · · · · · · · · · · · · · · · · ·
26	Joint costs. Complete this line only if the organization				<u> </u>
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Pai	rt X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1,027.	1	858.
	2	Savings and temporary cash investments		66,028.	2	85,596.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		3,900.	4	1,500.
	5	Receivables from current and former officers, directors	, trustees, key			
		employees, and highest compensated employees. Coi	nplete Part II			
		of Schedule L			5	
	6	Receivables from other disqualified persons (as define	d under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B),	and contributing	-		
		employers and sponsoring organizations of section 50	1(c)(9) voluntary			
	1	employees' beneficiary organizations (see instructions			6	
ets	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use		2,712.	8	3,109.
-	9	Prepaid expenses and deferred charges			9	3,109. 759.
	10a	Land, buildings, and equipment: cost or other		-		
		basis Complete Part VI of Schedule D 10a	1,006,666. 314,185.			
	b	Less: accumulated depreciation 10b	314,185.	689,254.	10c	692,481.
	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)	762,921.	16	784,303.
	17	Accounts payable and accrued expenses	1,771.	17	784,303. 11,914.	
	18	Grants payable		18		
	19	Deferred revenue		3,679.	19	1,415.
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability Complete Part IV	of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trus	tees, key employees,			
iap		highest compensated employees, and disqualified per	sons. Complete Part II			
		of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated th	ird parties	64,532.	23	63,249.
	24	Unsecured notes and loans payable to unrelated third	parties		24	
	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		61,300.	25	86,400.
	26	Total liabilities. Add lines 17 through 25		131,282.	26	162,978.
	Ì	Organizations that follow SFAS 117, check here	and complete			
es		lines 27 through 29, and lines 33 and 34.				
anc anc	27	Unrestricted net assets			27	
3al	28	Temporanly restricted net assets			28	
Ď	29	Permanently restricted net assets			29	
Ē	1	Organizations that do not follow SFAS 117, check h	iere ▶ 🐰 and			
<u>5</u>		complete lines 30 through 34.				
ets	30	Capital stock or trust principal, or current funds		29,300.	30	28,400.
4SS	31	Paid-in or capital surplus, or land, building, or equipme	ent fund	514,465.	31	28,400. 515,665.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income,	or other funds	87,874.	32	77,260.
Z	33	Total net assets or fund balances		631,639.	33	621,325.
	34	Total liabilities and net assets/fund balances		762,921.	34	784,303.

Form	990 (2011) MOUNTAIN VIEW COUNTRY CLUB, INC	03-01	L43495	Pag	e 12	
Par	t XI Reconciliation of Net Assets		_			
	Check if Schedule O contains a response to any question in this Part XI				X	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		L,7:		
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,2		
3	Revenue less expenses. Subtract line 2 from line 1	3		5.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	631	L, <u>6</u> 3		
5	Other changes in net assets or fund balances (explain in Schedule O)	5			06.	
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	62:	1,3:	25.	
Par	t XIII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII				X	
				Yes	No	
1	Accounting method used to prepare the Form 990. Cash X Accrual Other		_	İ		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	: O				
2 a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?				<u> </u>	
b	b Were the organization's financial statements audited by an independent accountant?				X	
С	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 issue	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis			Ì		
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt				
	Act and OMB Circular A-133?		3a		<u>X</u>	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ııred audıt				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b			

Form **990** (2011)

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number 03-0143495 MOUNTAIN VIEW COUNTRY CLUB, INC

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts. Complete if the				
	organization answered "Yes" to Form 990, Part IV, line		5 -				
		(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 advis	sed funds				
	are the organization's property, subject to the organization's		Yes No				
6	Did the organization inform all grantees, donors, and donor a	idvisors in writing that grant funds can be					
	for chantable purposes and not for the benefit of the donor of		-				
	impermissible private benefit?	, , , , , , , , , , , , , , , , , , , ,	Yes No				
Pai		ganization answered "Yes" to Form 990, I					
1	Purpose(s) of conservation easements held by the organizat	• "					
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an his	storically important land area				
	Protection of natural habitat		tified historic structure				
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last				
	day of the tax year						
			Held at the End of the Tax Year				
а	Total number of conservation easements		2a				
ь	Total acreage restricted by conservation easements		2b				
С	Number of conservation easements on a certified historic str	2c					
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struct	ure				
	listed in the National Register		2d				
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	e organization during the tax				
	year ▶						
4	Number of states where property subject to conservation ea	sement is located >					
5	Does the organization have a written policy regarding the pe	nodic monitoring, inspection, handling of					
	violations, and enforcement of the conservation easements i	t holds?	Yes No				
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements of	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	ve satisfy the requirements of section 170	O(h)(4)(B)(i)				
	and section 170(h)(4)(B)(ii)?		Yes No				
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expens	e statement, and balance sheet, and				
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	the organization's accounting for				
	conservation easements.						
Pa	t III Organizations Maintaining Collections o	•	other Similar Assets.				
	Complete if the organization answered "Yes" to Form						
1a	If the organization elected, as permitted under SFAS 116 (AS						
	historical treasures, or other similar assets held for public ext		ance of public service, provide, in Part XIV,				
	the text of the footnote to its financial statements that descr						
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statemen	t 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 tre		al gain, provide				
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:					
a	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$				
b	Assets included in Form 990, Part X		▶ \$				

Sche		VIEW COU						-014349	
Par	t III Organizations Maintaining C	ollections of Ar	t, Hist	orical Tr	easures, c	r Other	Similar /	Assets (cont	tinued)
3									
	(check all that apply)								
а	Public exhibition	d			hange progra	ms			
b	Scholarly research	е		Other			_		
С	Preservation for future generations								
4	Provide a description of the organization's co	· ·		=	_			ın Part XIV	
5	During the year, did the organization solicit or		•		·-	er sımılar a	ssets		
	to be sold to raise funds rather than to be ma							Yes Yes	No_
Par	t IV Escrow and Custodial Arrang reported an amount on Form 990, Part		ete if the	organizatio	on answered '	'Yes" to Fo	orm 990, Pa	art IV, line 9, o	r
							-1 -11		
та	Is the organization an agent, trustee, custodia	an or other intermed	nary for	contribution	is or other as	sets not in	ciuaea		┌┐,,
	on Form 990, Part X?							L Yes	∟ No
b	If "Yes," explain the arrangement in Part XIV a	and complete the fo	ollowing	table.					
	_							Amour	<u>nt</u>
С	Beginning balance						1c		
	Additions during the year						1d		
_	Distributions during the year						1e		
f	Ending balance	. 000 D- 1V 1	040				1f		
	Did the organization include an amount on Fo	orm 990, Part X, line	217					L Yes	L No
Par	If "Yes," explain the arrangement in Part XIV.	the executation on		"Voo! to Fo	000 Post	IV June 10			
Гаі	t V Endowment Funds. Complete if							a bask Lt V Fav	ur veere book
4	B	(a) Current year	(D) P	nor year	(c) Two year	S Dack (d) Three years	S Dack (e) Ful	ir years back
	Beginning of year balance				 				
	Contributions				 				
	Net investment earnings, gains, and losses				 				
	Grants or scholarships	-			 	-+			
е	Other expenditures for facilities					ļ			
_	and programs		-		 				
	Administrative expenses				 				
g	End of year balance	ont was and bolos	// 1				_		
2	Provide the estimated percentage of the cum	ent year end balant		g, column (a)) neid as:				
	Board designated or quasi-endowment		_%						
	Permanent endowment								
С	Temporarily restricted endowment	%							
0-	The percentages in lines 2a, 2b, and 2c should be the second and the percentages in lines 2a, 2b, and 2c should be the second and the second s		otion thi	-+ ara bald s	and administr	rad far the			
3a	Are there endowment funds not in the posse	ssion of the organiz	ation th	at are neid a	and administe	erea for the	organizati	on	Yes No
	Dy.							(a-(i)	Yes No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations 3a(ii)								
	b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 1. December in Part VIV the intended uses of the organization's endowment funds.								
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.									
L	Description of property	(a) Cost or o			t or other	(c) Acc	cumulated	(d) Bo	ok value
	Description of property	basis (investi			(other)		eciation	(0) 50	ok value
45	Land	223/0 (1111031			26,378.	СОРІ		1 7 2	26,378.
	Land				00,905.		85,372	2. 41	$\frac{10,573.}{5,533.}$
	Buildings Leasehold improvements			 	,		,		
	Equipment			 	····	-			
	Other	———		31	79,383.	2	28,813	3. 15	50,570.
	I. Add lines 1a through 1e. (Column (d) must e	gual Form 990. Pari	X, colu				- , ·		2,481.
		<u> </u>							

(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) line 15)

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUES LIABILITY	84,769.
(3) GIFT CERTIFICATES	320.
(4) PAYROLL LIABILITIES	841.
(5) SALES TAX PAYABLE	70.
(6) VT MIN CORP TAX PAYABLE	400.
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	▶ 86,400.

_	dule D (Form 990) 2011 MOUNTAIN VIEW COUNTRY CLUB						0143495	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audi	ited Financ	cial S	Staten	nent	S	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			_1				
2	Total expenses (Form 990, Part IX, column (A), line 25)			2				
3	Excess or (deficit) for the year Subtract line 2 from line 1			3				· ·
4	Net unrealized gains (losses) on investments			4	_			
5	Donated services and use of facilities			5				
6	Investment expenses			6				
7	Prior period adjustments			7				
8	Other (Describe in Part XIV)			8				
9	Total adjustments (net) Add lines 4 through 8			9				
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 an			10		_		
Pai	t XII Reconciliation of Revenue per Audited Financial Stateme	nts V	Vith Rever	nue p	er Re	turn	l	
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		1					
а	Net unrealized gains on investments	2a						
b	Donated services and use of facilities	2b	<u> </u>					
С	Recovenes of prior year grants	2c	<u> </u>					
d	Other (Describe in Part XIV.)	2d	1			ŀ		
е	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:				}			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				ŀ		
þ	Other (Describe in Part XIV)	4b						
С	Add lines 4a and 4b				L	4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		MELL E			5		
	t XIII Reconciliation of Expenses per Audited Financial Statem	ents	with Expe	nses	per H	tetu	<u>rn</u>	
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:	١.	1					
a	Donated services and use of facilities	2a	 					
b	Prior year adjustments	2b	<u>.</u>					
C	Other losses	2c	 					
d	Other (Describe in Part XIV) Add lines 2a through 2d	2d				.		
е 3	Subtract line 2e from line 1				-	2e		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				⊢	3	•	
	Investment expenses not included on Form 990, Part VIII, line 7b	1 40	1					
a b	Other (Describe in Part XIV)	4a 4b	• • • • • • • • • • • • • • • • • • • •					
	Add lines 4a and 4b	40	<u> </u>			4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				⊢	5		
	t XIV Supplemental Information					<u> </u>		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	lines	1a and 4: Pa	rt IV I	nes 1h	and S	2h: Part V. lin	ο Λ· Dart
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp							c 4, rait
,			no part to pro	7.00 a	i, addi	o.i.ai	momation	
	<u> </u>				-			

SCHEDULE O

Supplemental Information to Form 990 or 990-EZ (Form 990 or 990-EZ) Department of the Treasury

Internal Revenue Service

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 Open to Public Inspection

Name of the organization **Employer identification number** MOUNTAIN VIEW COUNTRY CLUB. INC 03-0143495 FORM 990, PART VI, SECTION A, LINE 6: THE TERM STOCKHOLDER IS ANY PERSON OR PERSONS WHO HOLD 20 SHARES OF CAPITAL STOCK OF THIS ORGANIZATION. EACH STOCKHOLDER IS ENTITLED TO ONE VOTE ONLY. MVCC HAS THE FOLLOWING CLASSES HONORARY LIFE, REGULAR, JUNIOR, AND SOCIAL. OF MEMBERSHIP: SOCIAL MEMBERS ARE NOT REQUIRED TO, BUT MAY, HOLD STOCK. FORM 990, PART VI, SECTION A, LINE 7A: THE BOARD OF DIRECTORS CONSISTS OF TWELVE PERSONS WHO ARE ELECTED BY THE STOCKHOLDERS OF THE CLUB AT THE ANNUAL MEETING. CURRENTLY ONE VACANCY EXISTS. FORM 990, PART VI, SECTION A, LINE 7B: STOCKHOLDERS VOTE ON THE ELECTION OF BOARD MEMBERS, BYLAWS CHANGES, AND LARGE CAPITAL EXPENDITURES. FORM 990, PART VI, SECTION A, LINE 8B: THE EXECUTIVE COMMITTEE HAS DOCUMENTED ONE MEETING ON A LARGE CAPITAL EXPENDITURE, BUT NO OTHER MEETINGS. FORM 990, PART VI, SECTION B, LINE 11: THE MVCC TREASURER WILL REVIEW FORM 990 BEFORE FILING AND SUBMIT TO THE BOARD AND MEMBERSHIP BY THE ANNUAL MEETING IN AUGUST. FORM 990, PART VI, SECTION C, LINE 19: DOCUMENTS ARE AVAILABLE UPON REQUEST. FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

OTHER CHANGES IN NET ASSETS FROM CAPITAL DONATED BY CURRENT

206.

Name of the organization MOUNTAIN VIEW COUNTRY CLUB, INC	Employer identification number 03-0143495
OR RESIGNING MEMBERS.	
TOTAL TO FORM 990, PART XI, LINE 5	206.
	-

ELECTION MADE UNDER SEC. 1.168(I)-6(I)(1)

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization

(Including Information on Listed Property) See separate instructions.

Attach to your tax return.

23

Attachment Sequence No 179

OMB No 1545-0172

Name(s) shown on return Business or activity to which this form relates Identifying numbe MOUNTAIN VIEW COUNTRY CLUB. FORM 990 PAGE 10 03-0143495 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 500,000. Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000. 3 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-5 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (c) Elected cost (a) Description of property (b) Cost (business use only) 6 7 7 Listed property. Enter the amount from line 29 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 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 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax vear 14 15 Property subject to section 168(f)(1) election 15 38,785 16 Other depreciation (including ACRS) 16 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 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 Section B - Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and (d) Recovery (a) Classification of property (f) Method (g) Depreciation deduction only - see instructions) 19a 3-year property b 5-year property 7-year property С 10-year property d 15-year property f 20-year property S/L 25-year property 25 yrs. q 27.5 yrs. MM S/L Residential rental property h 27 5 yrs MM S/L 1 ММ S/L 39 yrs Nonresidential real property MM S/L Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System 20a S/L Class life 12-year 12 yrs S/L b 40-year 40 yrs MM S/L Part IV | Summary (See instructions.) 21 21 Listed property. Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 38,785.

portion of the basis attributable to section 263A costs

23 For assets shown above and placed in service during the current year, enter the

Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr