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990

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

2011

Open to Public  
Inspection

**A** For the 2011 calendar year, or tax year beginning 05/01/11, and ending 04/30/12

**B** Check if applicable:☐ Address change☐ Name change☐ Initial return☐ Terminated☐ Amended return☐ Application pending**C** Name of organization

MT MANSFIELD WINTER ACADEMY, INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

PO BOX 3269

Room/suite

City or town, state or country, and ZIP + 4

STOWE

VT 05672

**F** Name and address of principal officer**D** Employer identification number

03-0354068

**E** Telephone number

802-253-7409

**G** Gross receipts \$

661,688

**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

**H(c)** Group exemption number ▶**I** Tax-exempt status☒ 501(c)(3)☐ 501(c) ( )

(insert no)

☐ 4947(a)(1) or☐ 527**J** Website ▶ MMWA.ORG**K** Form of organization☒ Corporation☐ Trust☐ Association☐ Other ▶**L** Year of formation 1998**M** State of legal domicile VT

## Part I Summary

1 Briefly describe the organization's mission or most significant activities

PROVIDE ACADEMIC EDUCATION SERVICES DURING FOUR WINTER MONTHS TO STUDENTS TRAINING AS COMPETITIVE SKIERS.

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

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

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

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

6 Total number of volunteers (estimate if necessary)

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

b Net unrelated business taxable income from Form 990-T, line 34

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

Prior Year

Current Year

70,612

85,906

579,312

549,762

5

0

56,535

10,246

706,464

645,914

0

0

0

0

332,301

294,674

0

0

316,532

324,450

648,833

619,124

57,631

26,790

Beginning of Current Year

End of Year

1,454,578

1,452,182

1,143,575

1,114,389

311,003

337,793

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign  
Here

Signature of officer

Type or print name and title

Date

Paid

Preparer  
Use Only

Print/Type preparer's name

Julie A Marckres, CPA

Preparer's signature

Date

Check ☐ if

self-employed

PTIN

P00295705

Firm's name

Marckres Norder and Company, Inc.

Firm's EIN

03-0322133

Firm's address

PO Box 732, 481 Brooklyn St

Morrisville, VT 05661-8510

Phone no

802-888-7781

May the IRS discuss this return with the preparer shown above? (see instructions)

☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2011)

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**Part 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.

PROVIDE ACADEMIC EDUCATION SERVICES DURING FOUR WINTER MONTHS TO STUDENTS TRAINING AS COMPETITIVE SKIERS.

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

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

If "Yes," describe these changes on Schedule O

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code ) (Expenses \$ 502,631 including grants of \$ ) (Revenue \$ 547,687 )  
 PROVIDE ACADEMIC EDUCATION SERVICES DURING FOUR WINTER MONTHS TO STUDENTS TRAINING AS COMPETITIVE SKIERS.

**4b** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4c** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4d** Other program services (Describe in Schedule O )

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

**4e** Total program service expenses ► 502,631

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
<b>4</b> <b>Section 501(c)(3) organizations.</b> 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		X
<b>5</b> 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		X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
<b>9</b> Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
<b>b</b> Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
<b>c</b> Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII		X
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional		X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	X	
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?		X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

## Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to 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 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, 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	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	X
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)		
a 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
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	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? If "Yes," complete Schedule N, Part I	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	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	X
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
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 section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	X
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	X
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? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	X

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No
<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	<b>1a</b> 1		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	<b>1b</b> 0		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>		X
<b>2a</b> 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.	<b>2a</b> 69		
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	<b>2b</b>	X	
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>		X
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	<b>3b</b>		
<b>4a</b> 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)?	<b>4a</b>		X
<b>b</b> If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>		X
<b>c</b> If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>		
<b>6a</b> 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?	<b>6a</b>		X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b> 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?	<b>7a</b>		
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>		
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>		
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year.	<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>		
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>		
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>		
<b>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<b>8</b>		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b> Did the organization make any taxable distributions under section 4966?	<b>9a</b>		
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter:			
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12.	<b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter:			
<b>a</b> Gross income from members or shareholders.	<b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>		
<b>b</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.	<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand.	<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>		X
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	<b>14b</b>		

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI ☒

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	7		
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.			
<b>1b</b>	7		
Enter the number of voting members included in line 1a, above, who are independent.			
<b>2</b>			X
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?			
<b>3</b>			X
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?			
<b>4</b>			X
Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			
<b>5</b>			X
Did the organization become aware during the year of a significant diversion of the organization's assets?			
<b>6</b>			X
Did the organization have members or stockholders?			
<b>7a</b>			X
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?			
<b>7b</b>			X
Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			
<b>8a</b>	X		
Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
<b>8b</b>	X		
a. The governing body?			
<b>9</b>			X
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.			

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

	Yes	No
<b>10a</b>		X
Did the organization have local chapters, branches, or affiliates?		
<b>10b</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?		
<b>11a</b>	X	
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		
<b>12a</b>		X
Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12b</b>		
Did the organization have a written conflict of interest policy? If "No," go to line 13.		
<b>12c</b>		
Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
<b>13</b>		X
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.		
<b>14</b>		X
Did the organization have a written whistleblower policy?		
<b>15a</b>	X	
Did the organization have a written document retention and destruction policy?		
<b>15b</b>		X
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		
b. Other officers or key employees of the organization		
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>		X
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		
<b>16b</b>		
If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed: **None**

**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) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon request

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

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **JODY BUZZELL**  
**3576 MOUNTAIN ROAD**  
**STOWE VT 05672**

802-253-7409

**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 nor any related organizations compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BIDDLE DUKE DIRECTOR	1.00	X						0	0	0
(2) PETER VANRAALTE DIRECTOR	1.00	X						0	0	0
(3) ADAM GUTSTEIN DIRECTOR	1.00	X						0	0	0
(4) NICK SARGENT DIRECTOR	1.00	X						0	0	0
(5) LORI FURRER EXECUTIVE DIRECTOR	40.00			X				57,644	0	11,905
(6) DEB MARTIN PRESIDENT	1.00			X				0	0	0
(7) SCOTT CARPENTER VICE PRESIDENT	1.00			X				0	0	0
(8) EMILY COPELAND SECRETARY	1.00			X				0	0	0
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										



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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box unless person is both an officer and director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
<b>1b Sub-total</b>								57,644		11,905
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>								57,644		11,905

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

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

	Yes	No
<b>3</b>		X
<b>4</b>		X
<b>5</b>		X

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

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

**Section B. Independent Contractors**

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

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

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	85,906			
	g Noncash contributions included in lines 1a-1f	\$				
	<b>h Total. Add lines 1a-1f</b>		85,906			
<b>Program Service Revenue</b>		Busn. Code				
	2a TUITION & FEES	611600	399,807		399,807	
	b HOUSING	611600	116,950		116,950	
	c RESIDENTIAL APTS	532000	33,005		33,005	
	d					
	e					
	f All other program service revenue					
	<b>g Total. Add lines 2a-2f</b>		549,762			
<b>Other Revenue</b>	3 Investment income (including dividends, interest, and other similar amounts)					
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real (ii) Personal				
	b Less rental exps					
	c Rental inc or (loss)					
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other	484			
	b Less cost or other basis & sales exps		484			
	c Gain or (loss)					
	d Net gain or (loss)					
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a	16,340			
	b Less direct expenses	b	4,019			
	c Net income or (loss) from fundraising events		12,321			160
	9a Gross income from gaming activities See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances	a	9,196			
	b Less cost of goods sold	b	11,271			
	c Net income or (loss) from sales of inventory		-2,075	-2,075		
Miscellaneous Revenue		Busn. Code				
11a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
<b>12 Total revenue. See instructions</b>		645,914	-2,075	549,762	160	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
<b>2</b> Grants and other assistance to individuals in the U.S. See Part IV, line 22				
<b>3</b> Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees				
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	258,327	174,622	83,705	
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
<b>9</b> Other employee benefits	11,905		11,905	
<b>10</b> Payroll taxes	24,442	16,523	7,919	
<b>11</b> Fees for services (non-employees)				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting	1,620		1,620	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other				
<b>12</b> Advertising and promotion	12,568	12,568		
<b>13</b> Office expenses	10,648		10,648	
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy	82,880	82,880		
<b>17</b> Travel				
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest	66,484	66,484		
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	49,264	49,264		
<b>23</b> Insurance				
<b>24</b> 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.)				
<b>a</b> SUPPLIES	47,500	47,500		
<b>b</b> INSURANCE	25,623	25,623		
<b>c</b> AUTO	7,885	7,885		
<b>d</b> TRAINING TRIP	7,447	7,447		
<b>e</b> All other expenses	12,531	11,835	696	
<b>25</b> Total functional expenses. Add lines 1 through 24e	619,124	502,631	116,493	0
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash—non-interest bearing	18,472	1	16,827
	2 Savings and temporary cash investments	5,490	2	5,974
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	14,510	4	16,544
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,738,458		
	b Less: accumulated depreciation	10b 325,621	1,416,106	10c 1,412,837
	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 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	1,454,578	16	1,452,182
<b>Liabilities</b>	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue	2,500	19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	1,118,575	23	1,088,239
	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	22,500	25	26,150
	26 <b>Total liabilities.</b> Add lines 17 through 25	1,143,575	26	1,114,389
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> X and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets	311,003	27	337,793
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34</b>			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 <b>Total net assets or fund balances</b>	311,003	33	337,793
	34 <b>Total liabilities and net assets/fund balances</b>	1,454,578	34	1,452,182

**Part 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	645,914
2	Total expenses (must equal Part IX, column (A), line 25)	2	619,124
3	Revenue less expenses Subtract line 2 from line 1	3	26,790
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	311,003
5	Other changes in net assets or fund balances (explain in Schedule O)	5	
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	337,793

**Part XII Financial Statements and Reporting**

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

	Yes	No
1 Accounting method used to prepare the Form 990 Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other <input type="checkbox"/> If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b Were the organization's financial statements audited by an independent accountant?		X
2c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis <input type="checkbox"/>		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		
3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

**SCHEDULE A**  
(Form 990 or 990-EZ)Department of the Treasury  
Internal Revenue Service**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

**2011**Open to Public  
Inspection

Name of the organization

MT MANSFIELD WINTER ACADEMY, INC

Employer identification number

03-0354068

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☒ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state.
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a Type I      b Type II      c Type III—Functionally integrated      d Type III—Other

- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box.

- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

- h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									

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

Schedule A (Form 990 or 990-EZ) 2011

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4</b> <b>Total.</b> Add lines 1 through 3						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
<b>6</b> <b>Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>11</b> <b>Total support.</b> Add lines 7 through 10						

**12** Gross receipts from related activities, etc. (see instructions)

12

**13** **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►**Section C. Computation of Public Support Percentage****14** Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))

14

%

**15** Public support percentage from 2010 Schedule A, Part II, line 14

15

%

**16a** **33 1/3% support test—2011.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization. ►**b** **33 1/3% support test—2010.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization. ►**17a** **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ►**b** **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ►**18** **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ►

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ►						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2010 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2010 Schedule A, Part III, line 17	<b>18</b>	%

**19a 33 1/3% support tests—2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

**b 33 1/3% support tests—2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►



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**Part IV Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information. (See instructions)

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**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

**2011****Open to Public  
Inspection**

Name of the organization

Employer identification number

MT MANSFIELD WINTER ACADEMY, INC

03-0354068

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		Yes No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		Yes No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)	
Preservation of land for public use (e.g., recreation or education)	Preservation of an historically important land area
Protection of natural habitat	Preservation of a certified historic structure
Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year	
a Total number of conservation easements	Held at the End of the Tax Year
b Total acreage restricted by conservation easements	2a
c Number of conservation easements on a certified historic structure included in (a)	2b
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2c
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►	2d
4 Number of states where property subject to conservation easement is located ►	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	Yes No
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►	
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	Yes No
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements	

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items	
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items	
(i) Revenues included in Form 990, Part VIII, line 1	► \$
(ii) Assets included in Form 990, Part X	► \$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
a Revenues included in Form 990, Part VIII, line 1	► \$
b Assets included in Form 990, Part X	► \$

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

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

- a** Public exhibition **d** Loan or exchange programs  
**b** Scholarly research **e** Other  
**c** Preservation for future generations

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

**5** During the year did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Yes No

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

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

Yes No

**b** If "Yes," explain the arrangement in Part XIV and complete the following table

- c** Beginning balance  
**d** Additions during the year  
**e** Distributions during the year  
**f** Ending balance

	Amount
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

**2a** Did the organization include an amount on Form 990, Part X, line 21?

Yes No

**b** If "Yes," explain the arrangement in Part XIV

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

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

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

- a** Board designated or quasi-endowment ▶ %  
**b** Permanent endowment ▶ %  
**c** Temporarily restricted endowment ▶ %

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

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

- (i) unrelated organizations  
(ii) related organizations

	Yes	No
<b>3a(i)</b>		
<b>3a(ii)</b>		
<b>3b</b>		

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land		75,190		75,190
<b>b</b> Buildings		1,518,291	222,997	1,295,294
<b>c</b> Leasehold improvements				
<b>d</b> Equipment		104,318	92,936	11,382
<b>e</b> Other		40,659	9,688	30,971
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				1,412,837

Schedule D (Form 990) 2011

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

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

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

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

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (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) SECURITY DEPOSITS	26,150
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25 )	26,150

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

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

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

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

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

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

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

**Part XIV Supplemental Information**

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

**Part XIV Supplemental Information** (continued)

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**SCHEDULE E**  
**(Form 990 or 990-EZ)**Department of the Treasury  
Internal Revenue Service**Schools**

- **Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.**
- **Attach to Form 990 or Form 990-EZ.**

OMB No 1545-0047

**2011****Open to Public Inspection**

Name of the organization

MT MANSFIELD WINTER ACADEMY, INC

Employer identification number

03-0354068

**Part I**

	YES	NO
<b>1</b> Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	X	
<b>2</b> Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	X	
<b>3</b> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II. POLICY IS POSTED IN THE SCHOOL. PUBLICIZED IN THE PAPER YEARLY, AND INCLUDED IN THE APPLICATION/INFORMATION PACKET.	X	
<b>4</b> Does the organization maintain the following?		
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II.	X	
<b>5</b> Does the organization discriminate by race in any way with respect to		
<b>a</b> Students' rights or privileges?		X
<b>b</b> Admissions policies?		X
<b>c</b> Employment of faculty or administrative staff?		X
<b>d</b> Scholarships or other financial assistance?		X
<b>e</b> Educational policies?		X
<b>f</b> Use of facilities?		X
<b>g</b> Athletic programs?		X
<b>h</b> Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.		X
<b>6a</b> Does the organization receive any financial aid or assistance from a governmental agency?		X
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II.		X
<b>7</b> Does the organization certify that it has complied with the applicable requirements of sections 401 through 405 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II.	X	

**Part II**

**Supplemental Information.** Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions).



**SCHEDULE G**  
**(Form 990 or 990-EZ)**Department of the Treasury  
Internal Revenue Service**Supplemental Information Regarding**  
**Fundraising or Gaming Activities**Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the  
organization entered more than \$15,000 on Form 990-EZ, line 6a  
▶ Attach to Form 990 or Form 990-EZ ▶ See separate instructions

OMB No 1545-0047

**2011**Open To Public  
Inspection

Name of the organization

MT MANSFIELD WINTER ACADEMY, INC

Employer identification number

03-0354068

**Part I Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17  
Form 990-EZ filers are not required to complete this part**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- |   |  |
|---|--|
| <b>a</b> Mail solicitations               | <b>e</b> Solicitation of non-government grants |
| <b>b</b> Internet and email solicitations | <b>f</b> Solicitation of government grants     |
| <b>c</b> Phone solicitations              | <b>g</b> Special fundraising events            |
| <b>d</b> In-person solicitations          |  |

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees  
or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

Yes No

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be  
compensated at least \$5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
<b>1</b>						
<b>2</b>						
<b>3</b>						
<b>4</b>						
<b>5</b>						
<b>6</b>						
<b>7</b>						
<b>8</b>						
<b>9</b>						
<b>10</b>						
<b>Total</b>						

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from  
registration or licensing

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))
		<u>BIKE RALLY</u> (event type)		<u>None</u> (total number)	
Revenue	1 Gross receipts	16,180			16,180
	2 Less Charitable contributions				
	3 Gross income (line 1 minus line 2)	16,180			16,180
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	4,019			4,019
	10 Direct expense summary Add lines 4 through 9 in column (d)				4,019
11 Net income summary Combine line 3, column (d), and line 10				12,161	

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	Yes % No	Yes % No	Yes % No	
	7 Direct expense summary Add lines 2 through 5 in column (d)				
	8 Net gaming income summary Combine line 1, column d, and line 7				

9 Enter the state(s) in which the organization operates gaming activities

a Is the organization licensed to operate gaming activities in each of these states?

9a Yes No

b If "No," explain

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

10a Yes No

b If "Yes," explain

- 11** Does the organization operate gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity operated in
- |          |                             |     |   |
|----------|-----------------------------|-----|---|
| <b>a</b> | The organization's facility | 13a | % |
| <b>b</b> | An outside facility         | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
- c** If "Yes," enter name and address of the third party

Name ▶

Address ▶

**16** Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer

Employee

Independent contractor

**17** Mandatory distributions

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

**Part IV Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No 1545-0047

**2011**

Open to Public  
Inspection

MT MANSFIELD WINTER ACADEMY, INC

Employer identification number

03-0354068

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990  
THE 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR, TREASURER AND PRESIDENT  
IMMEDIATELY. THE OFFICERS ARE INVITED TO COME IN AND REVIEW. THE FORM 990  
WILL BE HELD IN THE OFFICE FOR THAT TO HAPPEN AND THEREAFTER AVAILABLE UPON  
REQUEST.

- Form 990, Part VI, Line 15a - Compensation Process for Top Official  
THE BOARD MEMBERS REVIEW AND COMPARE THE DUTIES AND SALARY OF THE EXECUTIVE  
DIRECTOR ANNUALLY.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation  
THE ORGANIZATION MAKES GOVERNING AND FINANCIAL DOCUMENTS AVAILABLE ON  
REQUEST AND ARE KEPT IN THE ADMINISTRATION OFFICE.

Forms  
**990 / 990-PF****Mortgages and Other Notes Payable****2011**

For calendar year 2011, or tax year beginning 05/01/11, and ending 04/30/12

Name

Employer Identification Number

MT MANSFIELD WINTER ACADEMY, INC

03-0354068

## Form 990, Part X, Line 23 - Additional Information

Name of lender

Relationship to disqualified person

(1) TD BANKNORTH

NONE

(2)

(3)

(4)

(5)

(6)

(7)

(8)

(9)

(10)

Original amount  
borrowed

Date of loan

Maturity  
date

Repayment terms

Interest  
rate

(1) 1,250,000

10/21/05

11/01/30

MONTHLY PMTS OF \$8,068.36

6.000

(2)

(3)

(4)

(5)

(6)

(7)

(8)

(9)

(10)

Security provided by borrower

Purpose of loan

(1) BUILDING

PURCHASE BUILDING

(2)

(3)

(4)

(5)

(6)

(7)

(8)

(9)

(10)

Consideration furnished by lender

Balance due at  
beginning of yearBalance due at  
end of year

(1) 1,118,575

1,088,239

(2)

(3)

(4)

(5)

(6)

(7)

(8)

(9)

(10)

Totals

1,118,575

1,088,239

Year Ended April 30, 2012

03-0354068

MT MANSFIELD WINTER ACADEMY, INC  
PO BOX 3269  
STOWE, VT 05672

**Electing out of Bonus Depreciation Allowance for  
All Eligible Depreciable Property**

The taxpayer elects out of first-year bonus depreciation allowance under IRC Section 168(k) for all eligible asset classes of depreciable property acquired after December 31, 2007. This election applies to all eligible depreciable property placed in service during the tax year.

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
<b>Prior MACRS:</b>									
3	BUILDING	10/21/05	1,430,460			1,430,460	39 MMS/L	184,921	36,678
5	EQUIPMENT	10/21/05	50,000			50,000	7 MQ200DB	41,880	5,267
6	LAB EQUIPMENT VENTHOOD	3/07/07	2,342			2,342	7 HY 200DB	1,785	209
7	BOILER	3/06/06	3,935			3,935	15 HY 150DB	1,568	245
8	WASHER & DRYER	12/21/06	2,650			2,650	5 HY 200DB	2,446	204
9	SIGN	12/01/06	3,673			3,673	7 HY 200DB	2,799	328
10	BUILDING IMPROVEMENT KITCHEN I	5/20/08	2,343			2,343	39 MMS/L	178	60
11	SPIN BIKE	1/10/08	2,000		X	1,000	7 HY 200DB	1,667	95
12	POTTERT VENT	11/27/07	1,788			1,788	7 HY 200DB	1,192	170
13	2 REFRIGERATORS	11/27/07	2,490			2,490	5 HY 200DB	2,012	287
14	3 COMPUTERS	2/07/08	5,960		X	2,980	5 HY 200DB	5,388	343
15	FURNITURE AND EQUIPMENT	11/01/07	4,492			4,492	7 HY 200DB	2,995	428
16	LAND IMPROVEMENTS	4/02/09	16,728			16,728	15 HY 150DB	3,743	1,298
17	COMPUTER	7/08/09	1,328			1,328	5 HY 200DB	691	255
18	LAND IMPROVEMENTS	11/12/09	6,946			6,946	15 HY 150DB	1,007	594
			<u>1,537,135</u>			<u>1,533,155</u>		<u>254,272</u>	<u>46,461</u>
<b>Other Depreciation:</b>									
1	CHEVY SUBURBAN	1/07/02	21,465			21,465	5 MO S/L	21,465	0
4	LAND	10/21/05	75,190			75,190	0 -- Land	0	0
19	CHALET #2 BOILER	4/20/11	43,420			43,420	39 MO S/L	0	1,113
20	PAVING	11/22/10	13,050			13,050	15 MO S/L	363	870
21	COMPUTER (LORI)	10/12/10	2,203			2,203	5 MO S/L	257	441
22	GENERAL FURNITURE	12/09/11	1,584			1,584	7 MO S/L	0	94
23	BUILDING-YURT & SETUP	2/07/12	44,411			44,411	39 MO S/L	0	285
	<b>Total Other Depreciation</b>		<u>201,323</u>			<u>201,323</u>		<u>22,085</u>	<u>2,803</u>
	<b>Total ACRS and Other Depreciation</b>		<u>201,323</u>			<u>201,323</u>		<u>22,085</u>	<u>2,803</u>
	<b>Grand Totals</b>		1,738,458			1,734,478		276,357	49,264
	Less: Dispositions and Transfers		0			0		0	0
	Less: Start-up/Org Expense		0			0		0	0
	<b>Net Grand Totals</b>		<u>1,738,458</u>			<u>1,734,478</u>		<u>276,357</u>	<u>49,264</u>

## Federal Statements

## Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
MISCELLANEOUS	\$ 5,458	\$ 5,458		
PAYROLL FEES	2,148	1,452	696	
STAFF EDUCATION	1,832	1,832		
STUDENT ACTIVITIES	1,775	1,775		
INDEPENDENT CONTRACTORS	1,318	1,318		
Total	\$ 12,531	\$ 11,835	\$ 696	\$ 0



18-17-11



**MT. MANSFIELD WINTER ACADEMY**

*A private, independent school that  
emphasizes quality academics and athletics  
for students in grades 8-12*

**Cook Positions available Full or Part Time.**

Please call 253-7409 or e-mail [info@mmwa.org](mailto:info@mmwa.org).

*Mt Mansfield Winter Academy is an equal opportunity employer*



## MT. MANSFIELD WINTER ACADEMY

*A private, independent school that  
emphasizes quality academics and athletics  
for students in grades 8-12*

**Teaching positions now available: Math, Art,  
Foreign Languages, Science, Health, English and Social Studies.  
Morning and afternoon classes available.**


**Please call 253-7409 or e-mail [info@mmwa.org](mailto:info@mmwa.org).**

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Changes for Friday - 9/2 & Oct 1

9/1/11  
Mike Durran

9/8 @ 9/15



**MT. MANSFIELD WINTER ACADEMY**  
*A private independent school that  
emphasizes quality academics & athletics  
for students in grades 8-12*

Teaching positions now available: Math, Art, Foreign Languages,  
Science and Social Studies. Morning and afternoon classes available  
Kitchen & Dorm staff positions available as well.

Please call 253-7409 or e-mail:  
[mmwa@mt-mansfield.com](mailto:mmwa@mt-mansfield.com) [info@mmwa.org](mailto:info@mmwa.org)

Mt. Mansfield Winter Academy is an equal opportunity employer

Health, English,

← move this line down

# CLASSIFIEDS

**BASIC RATES: 35¢/A WORD • \$6.00 MINIMUM CHARGE • DEADLINE: MONDAYS AT 5 P.M.**

**GET 10% OFF WHEN YOU RUN YOUR CLASSIFIED LINE AD FOR THREE WEEKS 6TH WEEK FREE WHEN YOU RUN YOUR CLASSIFIED LINE AD FOR FIVE CONSECUTIVE WEEKS**

THE EDITOR AND PUBLISHER RESERVE THE RIGHT TO EDIT OR REJECT ANY OR ALL ADVERTISING. FAIR HOUSING RULES APPLY TO ALL RENTAL ADS. THE WATERBURY RECORD IS NOT RESPONSIBLE FOR ERRORS. ADVERTISERS ARE RESPONSIBLE FOR CHECKING THE ACCURACY OF THE AD CONTENT AND ADVISE THE WATERBURY RECORD OF ERRORS.

*Reach 8,900 households in Stowe/Waterbury/The Mad River Valley for just \$1.00 a word. Call 253-2101 and ask for Tracey Mooney for details!*

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**THE STICKER FANATICS AT** Websticker.com need an organized, motivated individual with excellent communication skills to join our team as a **QUOTING/CUSTOMER SERVICE** ADMINISTRATOR. Job requires strong writing/e-mail, phone and computation skills as well as being consistently friendly and overly helpful. E-mail resume to [chris@websticker.com](mailto:chris@websticker.com) or call 253-2011.

## FOR RENT

**CHARMING 2 BEDROOM** cottage adjacent to brook, hiking, cross country trails Waterbury Center. 802-272-7773

## FOR RENT:



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Teaching positions now available: Math, Art, Foreign Languages, Science, Health, English and Social Studies. Morning and afternoon classes available.

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We have seasonal manufacturing and processing positions available immediately in our Richmond smokehouse. Working in a refrigerated environment handling fresh and smoked meat.

No experience necessary, we will train you.

Apply in person

Mon - Fri, 8 a.m. to 5 p.m.

210 East Main St., Richmond

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of Vermont

## GOLDEN EAGLE RESORT



**Massage Therapist** Sun/Mon/Tues Shifts  
**Breakfast Server**

**Housekeeping** Part-Time

APPLY IN PERSON. 511 MOUNTAIN ROAD, STOWE

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Or have a wide variety of Stowe connections?**

TOWNPOOL has an exciting sales opportunity with a growing online daily deal advertising site. TOWNPOOL is redefining local online advertising and social commerce.

### Responsibilities:

- Develop and cultivate leads for TOWNPOOL
- Secure advertising commitments from the most popular merchants in the Stowe area

Salary plus commission

Send resume to: [Info@TownPool.com](mailto:Info@TownPool.com)

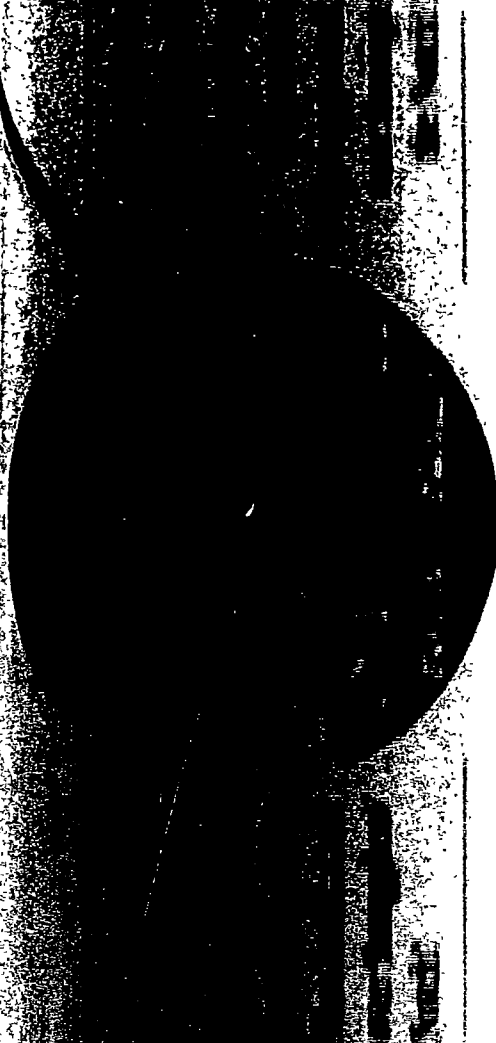


## YEAR-ROUND PART-TIME AND SEASONAL CDL BUS DRIVERS

Green Mountain Transit Agency (GMTA) is hiring year-round part-time bus drivers in the Washington County area. We are also recruiting for seasonal drivers for our winter services in both Stowe and Sugarbush. Drivers must

# MT. MANSFIELD WINTER ACADEMY

Presents:



## September 4th, 2011

Entry includes: Pre-ride food, after ride meal,  
route support & tech shirt!

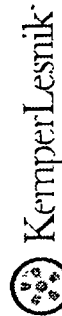
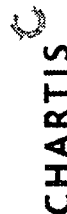
Pre-start energy supplies include fresh fruit, bagels, VT PEANUT BUTTER,  
AND MOCEAN MATÉ. Refuel meal provided by CARBECUE.



**3 routes: 25/50/ Metric Century (62.5 miles)**

Entry fee: \$30 = 25 Mile / \$60 = 50 Mile / \$100 = Metric Century /  
\$25 for under 18

Morgan Stanley



**www.mmwa.org 802.253.7409**

**QUESTIONS FOR YOUR LEGISLATOR?**  
**EMAIL TO: NEWS@STOWEREPORTER.COM**

## BEWARE OF INTERNET PUPPY SCAMS!



Visit the American Kennel Club's website  
(www.akc.org) for tips on how to avoid  
getting scammed and to find a responsible  
breeder. If you have been the victim of a  
scam, report it to your local authorities  
and your local BBB (www.bbb.org).



- 88 Emily Pajulis, Morrisville F, 20-20, 1:11.13 2
- 14 Peter Moore, Coon M, 40-40, 43:51.6
- 17 Tyler Samler, Waterbury Center M, 20-29, 42:03.2
- 18 Milan Kubala, Stowe M, 30-39, 43:45.8
- 19 Luke Gregoire, Montreal QC M, 20-29, 43:55.2
- 20 Lars Blackmore, Norwich M, 40-49, 44:02.4
- 35 Steve Messier, Jeffersonville M, 50-59, 47:49.5
- 39 Bob Emmmons, S Duxbury M, 50-59, 48:43.0
- 52 Joel Ernst, Waterbury Center M, 30-39, 50:48.6
- 54 Ron Osborn, Johnson M, 50-59, 51:14.7
- 62 Kalev Freeman, Duxbury M, 30-39, 52:32.4
- 63 John Haase, Waterbury Center M, 40-49, 52:38.1
- 98 Phil Grant, Morrisville M, 40-49, 58:46.4
- 110 Andrew McConnell, Waterbury M, 30-39, 1:01:31.1
- 112 Scott Gerry, Stowe M, 50-59, 1:02:01.6
- 117 Job Heintz, Waterbury Ctr M, 40-49, 1:04:12.0
- 132 Robert Thomson, Jeffersonville M, 0-99, 1:09:09.5

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*Reach 8,900 households in Stowe/Waterbury/The Mad River Valley for just \$1.00 a word. Call 253-2101 and ask for Tracey Mooney for details!*

## EMPLOYMENT

**HOUSEKEEPING ASST** Stone Hill Inn in Stowe is looking for a person to assist our head housekeeper with laundry & cleaning, as well as assist with breakfast service. This is a seasonal position that is perfect for a person who wants to earn extra cash for the holidays. Hours will be roughly 8:30 to 2pm, both weekdays and weekends now until the 3rd week of October. Interviews by appointment only. Call 802-253-6282 and ask for Tony.

**SEWERS NEEDED** immediately. Call Joanne 496-5137. **THE STICKER FANATICS** VT Websticker.com need an organized, motivated individual with excellent communication skills to join our team as a **QUOTING/CUSTOMER SERVICE ADMINISTRATOR**. Job requires strong writing/e-mail, phone and computation skills as well as being consistently friendly and overly helpful. E-mail resume to [chris@websticker.com](mailto:chris@websticker.com) or call 253-2011.

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**FREE CLOTHING AND SHOES** for flood victims at Sally's Second Act Thrift Shop in Middlesex, VT. Tuesday through Saturday 10-6. For more info please call 802-585-6215.

## REAL ESTATE

### FOR SALE

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**HOUSEMATE WANTED** to share Waterbury home on 10 acres. W/D, private bath. Easy access to Stowe, Montpelier, Burlington. Pets ok. \$600/mo utilities included, plowing extra. 802-999-0717.

## Food Service Part-Time Cashier/Assistant

Waterbury-Duxbury School District is seeking a responsible person who is good with money, loves to cook and enjoys working with middle school-age students. This is a 15-hour/week position, 5 days/week when school is in session 10:00 a.m.-1:00 p.m. Candidates must have computer experience. Prior cash handling is a plus. Job requires accurate data entry skills, prep work and cleaning. Must be able to work in a high-pressure environment, have basic cooking skills, and maintain health code standards. Please submit a letter of interest, resume, and three references to:

Erika Dolan c/o Cressett Brook Middle School  
5672 Vt. Rte. 100, Duxbury, VT 05676  
(802) 244-6100 • [edolan@wdsdvt.org](mailto:edolan@wdsdvt.org)

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Please call 253-7409 or e-mail [info@mmwa.org](mailto:info@mmwa.org)

Vermont Sports Pub  
8/15/11

070

# SPORTS FANS: THE GOOD, THE BAD, AND THE UGLY

OUT &  
ABOUT  
BY  
JOHN MORTON



Although it already seems like ancient history, like many sports enthusiasts, I became engrossed in the recent Stanley Cup finals between the Boston Bruins and the Vancouver Canucks. Televised ice hockey typically isn't much of a draw for me, but two loosely related issues pulled me in. Early in the series it was mentioned that Tim Thomas, the star goalkeeper for the Bruins, was a graduate of the University of Vermont, so I was eager to see how a player with strong ties to Vermont fared on the international stage. Needless to say, Thomas did very well, leading Boston to victory and earning recognition as the Most Valuable Player of the championship series.

I also had a soft spot in my heart for Vancouver because that city had done such a remarkable job hosting the 2010 Winter Olympic Games. My wife, Kay, and I spent a wonderful week at the Olympics, which included the very exciting, early round, ice hockey matchup of Team USA and the host Canadians. A small group of us in red, white, and blue were engulfed by a sea of red and white maple leaves, many of whom were amply fueled by Molsons and Labatts. At one point during the game, as the young guys behind us returned from the concession stand with yet more refreshment, one of our group bravely turned and requested that the beer didn't end up all over us.

The Canadians laughed heartily. As you may recall, that first cross-border matchup of the 2010 Olympics ended in a victory for the USA, thanks in large part to the heroics of the American goalie. As we filed from our seats, I risked a subdued comment to the stunned Canadian fans a row behind us, "Sorry about the final score, but it was a hell of a hockey game."

"Aw, don't worry about it mate," came the immediate response, "we'll get you in the gold medal round." Which of course, they did, in dramatic fashion.

It was especially because of this memory, that I was so disappointed to learn about the violence and mayhem that followed the final Stanley Cup game in Vancouver. For several hours, the streets were filled with raging people who clashed with police, looted stores, and started fires. The frustration and disappointment of having the Stanley Cup snatched from their grasp so close to victory may have been the catalyst for the violence that followed, but a frightening example of mob mentality quickly took over.

I have experienced that type of outrageous behavior in other sporting events. At the 1974 World Biathlon Championships in Minsk, then part of the Soviet Union, the hosting Russian team had done poorly in the opening events. Their chance for redemption, in front of an estimated 120,000 fanatic, local fans, was to defeat the arch-rival

Finns in the relay. The first three skiers from each team battled it out on the shooting range, and the ski tracks kept the outcome in question until the final leg. The Soviet hero, Aleksandr Tikhonov, matched strides and shots with Finland's anchor, Heikki Ikola, until the final stage of shooting when Tikhonov got to the sking loop first. Those were the days of sticky, klister wax for icy or warming snow conditions. The course was lined with Soviet spectators. As soon as their hero passed, they threw pine and spruce needles onto the tracks to sabotage Ikola's skis. After the race, Heikki confided to me, "Today, I would have feared for my life if I had won."


In contrast, I have another vivid memory, this one from the '94 Winter Olympics in Lillehammer. The hosting Norwegians consider skiing as much a part of their heritage as the Vikings, and they had been preparing their athletes to succeed at Lillehammer for a decade. But as the Games unfolded, some of the Norwegian spectators and

officials feared that they had overdone it. I remember being asked by concerned Norwegians if other countries might think that the host team was hogging the medals.

The Olympic men's cross-country relay had been a recurring battle between the Italians and the Norwegians, often resulting in a photo finish after 40 kilometers of racing. In Lillehammer, more than 100,000 passionate, Norwegian fans screamed the two anchor men toward the line, then fell totally silent, uncertain which athlete had finished first. When the Italians were declared the winners, the Norwegian crowd remained stunned for a few seconds, then they roared their approval of one of the most exciting races they would ever see. [7]

*John Morton is a former Olympic biathlete and Nordic ski coach. He lives in Thetford Center, where he designs Nordic ski trails. You can reach him through his website, [www.mortontrails.com](http://www.mortontrails.com).*

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*Presents:*



Challenging and extraordinary route winding through Stowe, Morrisville and over Smugglers Notch!

Aid stations and support vehicles along all routes. Only supported ride through the Notch!

**September 4th, 2011**

Entry includes: Pre-ride food, after ride meal, route support & tech shirt!  
Pre-start energy supplies include fresh fruit, bagels, VT PEANUT BUTTER, AND MOCCAN MATÉ. Refuel meal provided by CARBQUE.

3 routes: 25/50/ Metric Century (62.5 miles)  
Entry fee: \$30 = 25 Mile / \$60 = 50 Mile / \$100 = Metric Century / \$25 for under 18

**Morgan Stanley**

CHARTIS Kona Classic PUMA

[www.mmwa.org](http://www.mmwa.org) 802.253.7409

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**ROOMS FOR RENT**  
MONTHLY No pets please For more information call 802-279-8759.

**STOWE VILLAGE, PRIME**  
commercial/office or retail space. Main Street. Good visibility. From 750 sq.ft up to 2500 sq.ft. 802-272-7773.

## FOR RENT: HOUSES

**3 BEDROOM HOUSE** in Sterling Valley available for rent. Early October through end of May. \$1600/month plus utilities. 802-253-6084.

**GREAT SKI HOME** located off Mt Road 1/2 way between the village and ski area 3-4 bedrooms, 3 baths. LR with cathedral ceiling and fireplace. \$2200/month. References required 207-647-2813

**WOLCOTT RENTAL**, year round. 4,000 sq.ft. Close to 3 ski areas. 20 minutes to Stowe Village. Beautiful country setting with great views and swimming pond. 4BR, 3 1/2 Baths, laundry room, den living room with bar and gas fireplace, large kitchen with breakfast seating, 2 decks and 2-car garage. \$1600/month plus utilities. First month rent, security deposit and references. 802-888-8960 or 802-585-5756.

## FOR RENT:

## A.J.'S SKI AND SPORTS IS HIRING!

### CLOTHING AND ACCESSORIES SALES POSITION

**SOFTGOODS SALES:** We have a full-time and part-time position open, selling outdoor clothing, footwear, and accessories. Applicants must be outgoing, neat, self-motivated and very good at talking to people. Previous retail experience and a passion for winter sports a must!

Resumes should be sent to **A.J.'s Ski and Sports.**  
**ATTN: Luke, P.O. Box 1545, Stowe, VT 05672.**  
E-mail resumes to: **Lmoore@ajssports.com.**



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*A private, independent school that emphasizes quality academics and athletics for students in grades 8-12*

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Please call **253-7409** or e-mail **info@mmwa.org**.

*Mt Mansfield Winter Academy is an equal opportunity employer*

### LAMOILLE SOUTH SUPERVISORY UNION ELMORE • MORRISTOWN • STOWE

**Morristown School District**  
**Coaching Vacancies** - The Morristown School District is seeking coaches for the following positions  
JV Girls' Basketball  
Middle Level Girls' Basketball  
JV Boys' Basketball  
Middle Level Boys' Basketball

**Stowe School District**  
**Coaching Vacancies** - The Stowe School District is seeking coaches for the following positions  
Varsity Girls' Basketball  
Middle School Girls' Basketball  
JV Boys' Basketball  
Middle School Boys' Basketball

Interested applicants for any of the above positions should send a letter of interest and resume by email to **lisac@lamollesouthsu.org** or by mail to Lamolli South Supervisory Union 46 Coulton Avenue, Stowe, VT 05672

## YEAR-ROUND PART-TIME AND SEASONAL CDL BUS DRIVERS

Green Mountain Transit Agency (GMTA) is hiring year-round part-time bus drivers in the Washington County area. We are also recruiting for seasonal drivers for our winter services in both Stowe and Sugarbush. Drivers must have excellent customer service skills. Pre-employment background check testing are required.

**Experience:** A CDL is preferred but GMTA is willing to train the right candidates for their CDL endorsements. Previous driving experience is essential to apply for this position, please download an application from **www.gmta.org**. Submit the application, along with a cover letter and resume, in one of the following ways (no phone calls please): via email to **jobs@gmta.org**, via fax to (802) 864-5564, or via mail to GMTA, 19 Indust Parkway, Burlington, VT 05401, Attn: Human Resources

GMTA IS AN EQUAL OPPORTUNITY EMPLOYER AND IS COMMITTED TO A DIVERSE WORKFORCE

# HARRISON

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2-bedroom apartment with all appliances in exchange for 2 persons providing 8-10 hours weekday house cleaning (between 8am-4pm), outdoor maintenance and occasional pet care on private estate - for total 20-25 hours/week

Utilities not included

Provide three personal references and resumes to

stoweacaretakei@hotmail.com

## News Tip?

E-mail

news@stowareporter.com

## YEAR-ROUND PART-TIME AND SEASONAL CDL BUS DRIVERS



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To apply for this position, please download an application from [www.gmta.org](http://www.gmta.org). Submit the application, along with a cover letter and resume, in one of the following ways (no phone calls please) via email to [jobs@gmta.org](mailto:jobs@gmta.org), via fax to (802) 864-5564, or via mail to CCTA, 15 Industrial Parkway, Burlington, VT 05401, Attn: Human Resources.

GMTA IS AN EQUAL OPPORTUNITY EMPLOYER AND IS COMMITTED TO A DIVERSE WORKFORCE



## Children's Integrated Services Program Manager

The Lamoille Family Center seeks a Manager for 32 hours/week to oversee our Children's Integrated Services program. This position provides an exciting opportunity to further the integration of existing early childhood services in the Lamoille Valley in an effort to most effectively serve young children and their families. Responsibilities include staff support and supervision, budget oversight, data analysis and reporting, intake and referral.



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Please call 253-7409 or e-mail [info@mmwa.org](mailto:info@mmwa.org)

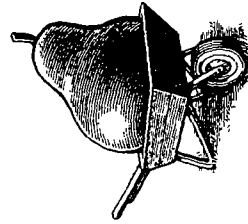
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## GOLDEN EAGLE RESORT



**Massage Therapist** Sun/Mon/Tues Shifts  
**Breakfast Server**  
**Housekeeping** Part-Time

APPLY IN PERSON. 511 MOUNTAIN ROAD, STOWE



h a r v e s t  
m a r k e t

1031 MOUNTAIN ROAD

Harvest Market is taking applications for PT/FT experienced retail help:

- ❖ Prefer candidates with exceptional customer service skills, an eye for merchandising and an enthusiastic attitude.
  - ❖ PT pastry baking for winter season.
- PLEASE COME BY AND FILL OUT AN APPLICATION. NO PHONE CALLS PLEASE.

## STERLING AREA SERVICES COMMUNITY SUPPORT POSITIONS AVAILABLE

2 BEDROOM APT. GAS place, open floor plan, parking, mowing included, pets, references, first, last security. 802-253-9600.

2 BEDROOM Carriage Farm completely renovated. \$1 month plus utilities 253-321-537-3870

AVAILABLE 10/1 Furnished bedroom apartment in private home with large, safe yard, school bus route. Rent \$ includes \$40 toward electricity plus plowing, heat, hot water cable & wireless. Nonsmoking no pets 802-253-2202.

AVAILABLE OCTOBER 1st bedroom apartment. Nebraska Valley includes utilities, snow plowing, pickup \$800/month. First security. No pets, nonsmoking. 253-4757

BRICK HOUSE APT. \$330/month. Off-street parking, fireplace, 1.5 baths, onsite laundry \$12 month includes heat and water. First/last/security deposit required. Call 802-279-49 evenings.

CHARMING 1 BEDROOM Apartment or office space in Stowe village on second floor \$700/month. Nice views. Nonsmoking. Available October. 802-774-2454.

COZY 2 BEDROOM APT., 2nd floor, Stowe location. Wall-to-wall carpet. Utilities and heat included. No pets \$900/month. Security deposit, references. lease 279-4571

COZY, FURNISHED 2 bedroom

# STOWE REPORTER CLASSIFIEDS

super views Non smoking, no pets References required, security required Year lease \$800/-mo Plus utilities 617-512-7394 or 253-7491.

**1 BEDROOM VILLAGE APT**  
Completely renovated \$850/-month 253-9004, 321-537-3870

**1 BEDROOM, DECK, Mt view.**  
backyard, convenient location No pets, lease, security \$600 plus utilities 253-4795

**1 BEDROOM, Village apt., large living area** built in 2005 with fenced back yard, views of river & church, first floor, W/D, off street parking space \$975/-month plus utilities Call Ken at 793-2002

**2 BEDROOM Carriage House,** completely renovated, \$1125/-month plus utilities 253-9004, 321-537-3870

**AVAILABLE 10/1. Furnished 2 bedroom apartment** in private home with large, safe yard, on school bus route. Rent \$1200 includes \$40 toward electric, plus plowing, heat, hot water, cable & wireless Nonsmoking, no pets 802-253-2202

**BEAUTIFUL, Clean furnished 1 bedroom apt., 3 miles** from center of Stowe Lots of amenities Available 10/1 No pets, nonsmoking Security deposit with references. Minimum 6-month stay All inclusive \$1200/-month Call for viewing 802-249-2954

**BRICK HOUSE APTS 3 BR**  
Apt. off-street parking, fireplace, 1.5 baths, onsite laundry \$1295/-month includes heat and hot water First/last/security deposit

## VOLUNTEERS NEEDED

The Stowe Home Tour  
A fundraiser for the Helen Day Art Center  
Saturday, Oct. 1st



All volunteers can tour the four distinctive homes for free and receive lunch, as well.

802-253-8358

Helen Day Art Center



## Child Care Mentor

The Lamoille Family Center, with funding from the Birth - Three Project, is seeking a part-time Child Care Mentor to support area Home Child Care providers for approximately 15 hours per week. The mentor will work with interested providers, primarily in their homes, to assist them with participation in STARS, obtaining early childhood credentials, and enhancing program quality. The mentor will administer new incentives offered to providers who engage in this project.

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Please send cover letter and resume by October 5 to:

Lamoille Family Center, 480 Cadys Falls Road,  
Morrisville, VT 05661

or email to [info@lamoillefamilycenter.org](mailto:info@lamoillefamilycenter.org).

United Way Community Partner



**MT. MANSFIELD WINTER ACADEMY**  
*A private, independent school that emphasizes quality academics and athletics for students in grades 8-12*

Teaching positions now available: Math, Art, Foreign Languages, Science, Health, English and Social Studies. Morning and afternoon classes available.

Please call 253-7409 or e-mail [info@mmwa.org](mailto:info@mmwa.org)

*Mt. Mansfield Winter Academy is an equal opportunity employer*

COUNTRY WALKERS

## International Tour Operator seeks TOUR MANAGER

The Tour Manager is responsible for managing 12-15 international tours including day-to-day operations and logistics, guide and guest management, tour pricing and profitability, and writing and marketing of itineraries. This role works closely with marketing and sales.

### Qualifications:

- 2-5 years of management experience (ideally within the travel industry)
- Exemplary verbal and written communication skills
- Extremely detail-oriented/able to multi-task
- Strong computer and budget skills
- Enthusiasm and connection to the travel industry and walking
- Experience with Latin America destinations strongly preferred

Full time/full benefits package.

Email cover letter and resume by October 3 to:

[jamen@countrywalkers.com](mailto:jamen@countrywalkers.com)

No phone calls please

[www.countrywalkers.com](http://www.countrywalkers.com) [EOE]

**Lamoille Community Connections**  
*is a designated provider of developmental and mental*

## RN Required

BSN preferred

Excellent clinical and communication skills

# STOWE REPORTER CLASSIFIEDS

**FOR RENT**  
ROOMS FOR RENT  
MONTHLY No pets please. For more information call 802-279-8759.

**STOWE VILLAGE, PRIME**  
commercial/office or retail space. Main Street. Good visibility. From 750 sq.ft. up to 2500 sq ft 802-272-7773

## FOR RENT: HOUSES

3 BEDROOM HOUSE in Sterling Valley available for rent Early October through end of May. \$1600/month plus: utilities 802-253-6084.

**GREAT SKI HOME** located off Mt. Road 1/4 way between the village and ski area. 3-4 bedrooms, 3 baths LR with cathedral ceiling and fireplace. \$2200/month. References required. 207-647-2813

**WOLCOTT RENTAL**, year round. 4,000 sq.ft. Close to 3 ski areas 20 minutes to Stowe Village Beautiful country setting with great views and swimming pond. 4BR, 3 1/2 Baths, laundry room, den living room with bar and gas fireplace, large kitchen with breakfast seating, 2 decks and 2-car garage. \$1600/month plus utilities. First month rent, security deposit and references 802-888-8960 or 802-585-5756

## FOR RENT:

## A.J.'S SKI AND SPORTS IS HIRING!

### CLOTHING AND ACCESSORIES SALES POSITION

**SOFTGOODS SALES:** We have a full-time and part-time position open, selling outdoor clothing, footwear, and accessories. Applicants must be outgoing, neat, self-motivated and very good at talking to people. Previous retail experience and a passion for winter sports a must!

Resumes should be sent to **A.J.'s Ski and Sports.**  
**ATTN: Luke, P.O. Box 1545, Stowe, VT 05672.**  
E-mail resumes to: **Lmoore@ajssports.com**



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## LAMOILLE SOUTH SUPERVISORY UNION ELMORE • MORRISTOWN • STOWE

### Morristown School District

**Coaching Vacancies** - The Morristown School District is seeking coaches for the following positions

JV Girls' Basketball  
Middle Level Girls' Basketball

JV Boys' Basketball  
Middle Level Boys' Basketball

### Stowe School District

**Coaching Vacancies** - The Stowe School District is seeking coaches for the following positions

Varsity Girls' Basketball  
Middle School Girls' Basketball

JV Boys' Basketball  
Middle School Boys' Basketball

Interested applicants for any of the above positions should send a letter of interest and resume by email to **lsac@lamollesouthsu.org** or by mail to Lamoille South Supervisory

## YEAR-ROUND PART-TIME AND SEASONAL CDL BUS DRIVERS



Green Mountain Transit Agency (GMTA) is hiring year-round part-time bus drivers in the Washington County area. We are also recruiting for seasonal drivers for our winter services in both Stowe and Sugarbush. Drivers must have excellent customer service skills. Pre-employment background checks and testing are required.

**Experience:** A CDL is preferred but GMTA is willing to train the right candidates for their CDL endorsements. Previous driving experience is essential. To apply for this position, please download an application from **www.gmta-de.org**. Submit the application, along with a cover letter and resume, in one of the following ways (no phone calls please): via email to **jobs@gmta-de.org**, via fax to (802) 864-5564, or via mail to CCTA, 15 Industrial Parkway, Burlington, VT 05401, Attn: Human Resources.

GMTA IS AN EQUAL OPPORTUNITY EMPLOYER AND IS COMMITTED TO A DIVERSE WORKFORCE

# HARRISON

CONCRETE CONST. INC. & REDI MIX CORP.

**MORRISVILLE PLANT**  
Opening October 1, 2011

Looking to hire:

# Concrete Mixer Drivers

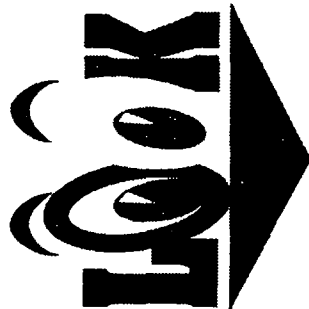
Call 802-849-6688 CDL REQUIRED.

**We feature great sandwiches, pizza and pasta.**

Central Vermont's Best  
Selection Of Quality Tools

Discount Prices!

802-479-3363 800-462-7656



## ONGOING DEALS WITH THE PAPER!

Place a classified advertisement  
for three consecutive weeks and  
receive a **10% discount!**

Place a classified advertisement  
for five consecutive weeks and  
get a **sixth ad for FREE!**

Advertise for multiple weeks in our  
Business & Services and Save BIG!  
(5-, 10-, 20- or 26-week packages)

### INTRODUCTORY OFFER!

Buy three advertisements, and get a  
**fourth CONSECUTIVE week FREE!**

### Combination Advertising

Ask about our combination advertising  
between the Stowe Reporter, Waterbury  
Record, Valley Reporter and other  
Burlington area newspapers.

**ads@stowereporter.com**  
**(802) 253-2101**

Mt. Mansfield Winter Academy

A private, independent school that  
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for students in grades 8-12

Teaching positions now available: Math, Art,  
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*Mt. Mansfield Winter Academy is an equal opportunity employer*

## Positions available at... Best Western Waterbury

**Housekeepers.** Full and part time

- Must be reliable and responsible
- Friendly customer service attitude

**Maintenance Person.** Full time

- Varied duties
- Must be reliable and responsible

Call Best Western Waterbury to schedule an appointment.  
**802-244-7822.**

## BOOKKEEPER & FINANCE/OFFICE MANAGER

The **Lamoille County Planning Commission (LCPC)** seeks a full-time,  
skilled, self-motivated, Bookkeeper/Finance Manager/Office Manager

The successful candidate will be responsible for full charge bookkeeping, other finan-  
cial tasks and the smooth operation of the Commission's office. Work is performed  
under the supervision of the Executive Director and significant interaction with staff  
and outside service providers is required. The ideal candidate will have an  
Associate's Degree in Accounting and three years of experience or an equivalent  
amount of professional experience, preferably at a non-profit or government agency.  
Successful candidates will demonstrate proficiency with QuickBooks and Microsoft  
Office applications and an understanding of fund accounting.

Applications are due via email by **October 10, 2011**, to [bonnie@lcpvt.org](mailto:bonnie@lcpvt.org)  
Information, including a job description, is available at [www.lcpvt.org](http://www.lcpvt.org).

LCPC IS AN EOE

# Kinney DRUGS

## JOB OPPORTUNITIES

Growing Drug Chain, since 1903, seeking cashiers, stock clerks, pharmacy clerks,  
pharmacy technicians for part-time positions. Opportunity for advancement. Please drop  
off applications to the attention of Kathy Ennis, Kinney Drugs, 80 So. Main St., Waterbury,  
VT 05676 or applications may be submitted online at [www.kinneydrugs.com](http://www.kinneydrugs.com) [EOE]



## HELP WANTED

The Green Mountain Inn is looking for the following positions:

**Executive Chef • Housekeeping • Houseman**  
**FT Massage • Bellman**

Stop by the Inn to fill out an application  
or email a resume to: [Meghann@gminn.com](mailto:Meghann@gminn.com)



LAMOILLE  
FAMILY  
CENTER

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United Way Community Partner



# CLASSIFIEDS

**BASIC RATES: 35¢/A WORD • \$6.00 MINIMUM CHARGE • DEADLINE: MONDAYS AT 5 P.M.**

**GET 10% OFF WHEN YOU RUN YOUR CLASSIFIED LINE AD FOR THREE WEEKS 6TH WEEK FREE WHEN YOU RUN YOUR CLASSIFIED LINE AD FOR FIVE CONSECUTIVE WEEKS**

THE EDITOR AND PUBLISHER RESERVE THE RIGHT TO EDIT OR REJECT ANY OR ALL ADVERTISEMENTS. ADVERTISERS ARE RESPONSIBLE FOR CHECKING THE "CLASSIFIED" ADVERTISING RULES. THE WATERBURY RECORD IS NOT RESPONSIBLE FOR ERRORS. ADVERTISERS ARE RESPONSIBLE FOR CHECKING THE "CLASSIFIED" ADVERTISING RULES.

Reach 8,900 households in Stowe/Waterbury/The Mad River Valley for just \$1.00 a word. Call 253-2111 and ask for Tracey Mooney for details.

**Tool Warehouse Outlet, Inc.**

Rt. 302 • Barre-Montpelier

**Central Vermont's Best**

**Selection of Quality Tools**

Discount Prices!

**802-479-3363**

**800-402-7656**

**TOOLS REPAIRED**

**Air • Electric • Hydraulic**

**Reduce,  
Reuse,  
Recycle**



**MT. MANSFIELD WINTER ACADEMY**

A private, independent school  
emphasizes quality academics and character  
in students in grades 7-12

**Cook Positions available Full or Part Time.**

Please call 253-7409 or e-mail [info@mmwa.org](mailto:info@mmwa.org)

*Mt. Mansfield Winter Academy, a 501(c)(3) equal opportunity organization*

## BUSINESS

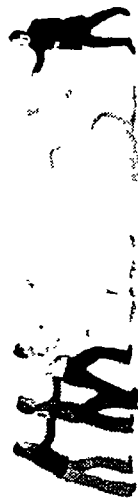
### OPPORTUNITIES

**LOCAL GRAPHICS BUSINESS FOR SALE:** Well established sign and graphics business offered for sale with financing. Steady cash allows for investment plan as short as one year. loyal customer base is the mark of this company. Contact: Reid L. Williams, Co-Business, Inc. Cell, 617-8151 [rwilliams@countness.net](mailto:rwilliams@countness.net)

## EMPLOYMENT

**BUSY GARAGE:** COMPANY is looking for experienced garage door installer. Must have clean driving record. Full time. Please call 888- or email resume to [sales@aol.com](mailto:sales@aol.com)

**STOWE VERMONT - Gil:** practice law office seeks attorney with one or more years experience in family law



**HELP PUT THE  
PIECES TOGETHER**

Bring your technical skills to one of the country's

**STOWE LAUNDRY CO.**

**FT / PT COUNTER PERSON - ATTENDANT**

Weeknights: 2:00-9:00 • Weekends: 8:00-1:00, 1:00-6:00

Great second job or perfect job for retiree.

Computer experience helpful, but not necessary.

Will train. Applicant must be mature, neat, reliable and have references. Call 253-2668.

**Stowe REPORTER**

we have carefully reviewed the contracts and made the best decision for Stowe's ratepayers."

Normally, confidentiality in power contracts is no problem. Utility rates and practices are subject to review by the Vermont Public Service Board but contracts to buy power are between the utility and its suppliers. Whatever deals they make between themselves are not subject to Vermont's public-records laws.

However, the 15 municipal electric companies in the state are government agencies, subject to the public-records law. In addition to Stowe, municipal electric departments exist in Hyde Park, Johnson, Morrisville, Hardwick, and Northfield, plus a handful of communities elsewhere in the state.

But in the Hydro-Quebec power-purchase agreement it signed, and is asking voters to approve, Stowe Electric pledges not to obey Vermont's public-records law unless a court orders it to.

## Copies requested

On Monday, the Stowe Reporter requested unredacted copies of the contracts from Stowe Electric, the Vermont Department of Public Service, and the Vermont Public Service Board.

The public service board oversees major power deals, the department of public service represents the interests of Vermont ratepayers in public service board proceedings. Vermont law gives government agencies three days to respond to public records requests. Because Monday was a holiday, the agencies have until Feb. 24 to respond.

The Reporter has also requested any protective agreements — contracts between parties, agreeing which information they will keep confidential — signed by Stowe Electric.

On Wednesday, Stowe Electric supplied redacted copies of the contracts, and a rundown on its confidentiality agreements.

French had said Tuesday that it was unlikely the contracts would be

does the public need to know that?" Kreis said. "Who in the town of Stowe uses that information meaningfully?" To which my reply is, "That makes no difference."

Kreis thinks asking voters to approve something they're not allowed to actually read violates the spirit of Vermont's open records laws.

"If the law of this state means a decision has been placed on municipal voters based on such a slim disclosure of relevant information it says something about democracy, doesn't it?" he said.

"We find this kind of disturbing," said Jim Condos, Vermont's secretary of state. "I don't understand how people can vote on something when they don't know what it means."

Condos said his office lacks the authority to enforce Vermont's public records laws — under Vermont statute, it's up to citizens to challenge what they see as violations of the law.

## 'It's challenging'

Clauses in the contracts ask Stowe Electric to do everything in its power to avoid disclosing information.

In the Hydro-Quebec contract for example, Stowe Electric agreed not to follow Vermont's public-records law unless a court ordered it to do so.

The clause reads: "A party may after written notice to the other parties, disclose terms and conditions of this agreement or information exchanged between the parties in connection with this agreement (i) in order to comply with any applicable law (including Vermont's Open Meeting and Access to Public Records Laws, if ordered by a court of competent jurisdiction."

State and local officials defend keeping portions of the contract secret.

"There is a somewhat challenging balancing act we perform between the need for folks to get the whole pricing structure and the competitive disadvantage of full

## PUBLIC INFORMATION SESSIONS

• Friday mornings at Black Cap Coffee | 10 am-12 pm | Free Coffee!



facebook.com/keepstowearena

email: friendsofjacksonarena@gmail.com



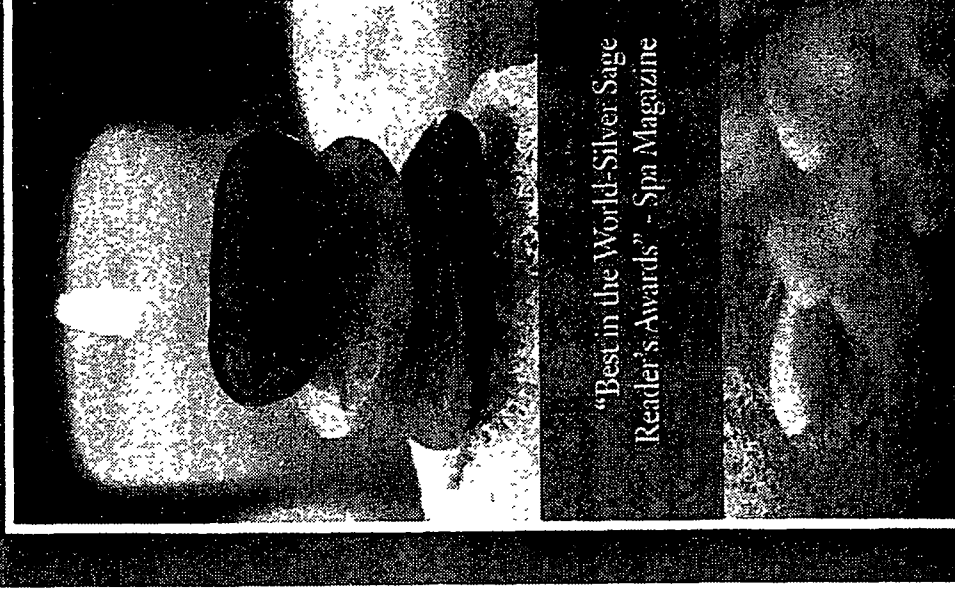
You Tube On Thin Ice--Jackson Arena's Future in Stowe, Vermont



The Mt. Mansfield Winter Academy does not discriminate on the basis of race, color, national origin, sex, disability or age in its programs and activities. The following person has been designated to handle inquiries regarding the non-discrimination policies:



Lou Furrer, Director  
Mt. Mansfield Winter Academy  
3576 Mountain Road  
Stowe, VT 05672  
802-253-7409



*In the midst of nature...  
and the height of luxury*



{ \$29 SPA NOTE }

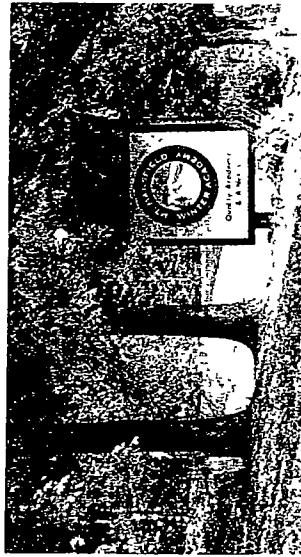
## It's a Leap Year - Extra Day Means Extra Savings!

By nature, we all aspire to be healthy. We all could use an extra day of relaxation! This Leap Year from February 26th through March 16th, visit The Spa and Wellness Center at Stowe Mountain Lodge and receive \$29 off any 50 or 80 minute massage, facial or body treatment Monday through Friday in celebration of February 29th!

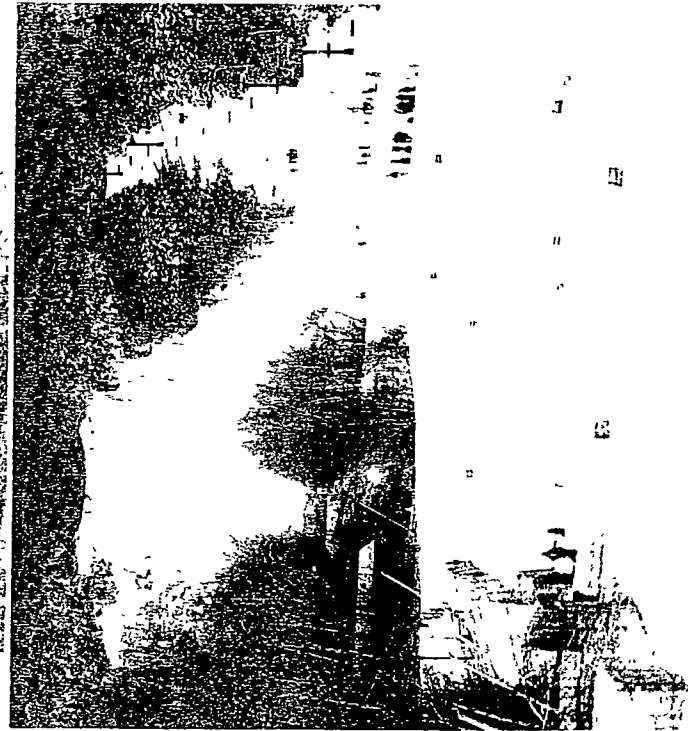
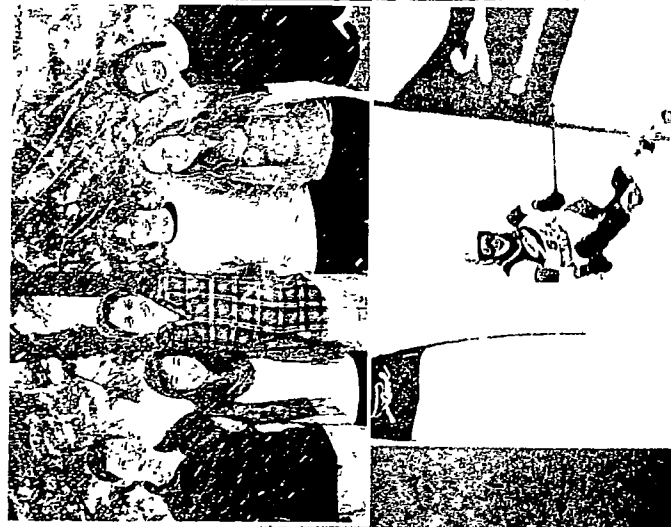
With the cna



MT. MANSFIELD WINTER ACADEMY  
WWW.MMWA.ORG



MT. MANSFIELD SKI & SNOWBOARD CLUB  
WWW.TEAMMMSC.ORG



STOWE, VERMONT



# WE PUT YOUR GOALS WITHIN REACH...

MT. COMMUNITY & EXCELLENT COLLEGE ACCEPTANCE



Form **4562**Department of the Treasury  
Internal Revenue Service

(99)

**Depreciation and Amortization**  
(Including Information on Listed Property)

▶ See separate instructions

▶ Attach to your tax return.

OMB No 1545-0172

**2011**Attachment  
Sequence No **179**

Name(s) shown on return

MT MANSFIELD WINTER ACADEMY, INC

Identifying number

03-0354068

Business or activity to which this form relates

Indirect Depreciation

**Part I Election To Expense Certain Property Under Section 179**

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

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2010 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12	13	

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

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

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	2,803

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

17	MACRS deductions for assets placed in service in tax years beginning before 2011	17	46,461
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**

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

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

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

**Part IV Summary (See instructions)**

21	Listed property Enter amount from line 28	21	
22	Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	49,264
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2011)

DAA

There are no amounts for Page 2