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Short Form
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)

Sponsoning organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

OMB No 1545-1150

93)			Return of Organization Exempt From In Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue (except black lung benefit trust or private foundation) Sponsonng organizations of donor advised funds, organizations that operate one or more hospital organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross rece sassets less than \$500,000 at the end of the year may use this form The organization may have to use a copy of this return to satisfy state re	icome	e Tax	2012			
Forr	n 9 9	0-EZ	except black lung benefit trust or private foundation)	outee and c	ertain controllu	_ ZUIZ			
Depa		of the Treasury	organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross rece	pts less than	\$200,000 and t	Otal Open to Public			
3 F		nue Service							
	F or th Check if		ndar year, or tax year beginning JUL 1, 2012 and end	ing JUN	30, 201				
	applicab	le '	Name of organization		D Employer	identification number			
	Addre	*	ssociation of Notre Dame Clubs, Inc						
NON	ᆜName	. oago	ermont		31-10				
	Initial	1000111	· ·	Room/suite	E Telephone number				
20	Termi		7 Mechanic Street		802-739-5410				
		ded letum	y or town, state or country, and ZIP + 4			Group Exemption			
			orth Bennington VT 05257			5053			
		ting Method	x Cash Accrual Other (specify) ▶			► x if the organization is not			
		e: ► <u>n/a</u>			1	to attach Schedule B			
			check only one) — x 501(c)(3)			0, 990-EZ, or 990-PF).			
	Check I		e organization is not a section 509(a)(3) supporting organization or a section 527 organization	-		•			
			I-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (s	ee instruction	ons) But if th	ie organization chooses to file			
		•	le a complete return						
			7b, to line 9 to determine gross receipts If gross receipts are \$200,000 or more, or if total	assets (Part					
	ine 25. art l		elow) are \$500,000 or more, file Form 990 instead of Form 990-EZ ie, Expenses, and Changes in Net Assets or Fund Balances (s	aa tha inetri	uotione for Pr				
	art i	_		יים נווס וווסנונ	JULIONS IOI F	ait i)			
	1		e organization used Schedule O to respond to any question in this Part I s, gifts, grants, and similar amounts received						
	2		r, girts, grants, and similar amounts received rice revenue including government fees and contracts		2				
	3	-	dues and assessments		3				
	4	Investment in			4				
	5a		nt from sale of assets other than inventory						
<u>~</u>	b		other basis and sales expenses 5b						
2013	6) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c				
	6		fundraising events						
		•	e from gaming (attach Schedule G if greater than						
CANNED DEC 1		\$15,000)	6a						
	b	Gross incom	e from fundraising events (not including \$ of contributions						
		from fundrais	sing events reported on line 1) (attach Schedule G if the sum of such						
لِللَّا		gross income	e and contributions exceeds \$15,000)						
	C	Less direct e	expenses from gaming and fundraising events						
Ą	d	Net income o	or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d				
ઝ	7a	Gross sales of	of inventory, less returns and allowances 7a						
•	b	Less cost of	goods sold 7b						
	C		or (loss) from sales of inventory (Subtract line 7b from line 7a)	-	7c	<u> </u>			
	8	Other revenu	e (describe in Schedule O)		. 8				
	9_		e. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		▶ 9	0.			
	10		to or for members RECEIVED		10				
	11			1001	11				
ses	12		er compensation, and employee benefits fees and other payments to independent contractors NOV 2 0 2013	임	12				
Expenses	13		101	RS-0	13				
EX	14		rent, utilities, and maintenance		14	 			
_	15	* .	lications, postage, and shipping		15	 			
	16		es (describe in Schedule U)		16				
	17		ses. Add lines 10 through 16		17	0.			
ş	18	-	eficit) for the year (Subtract line 17 from line 9)		18	0.			
Net Assets	19		fund balances at beginning of year (from line 27, column (A))		1.0				
¥ A	20		with end-of-year figure reported on prior year's return)		19	0.			
ž	20 21	-	es in net assets or fund balances (explain in Schedule 0)		20	0.			
<u> </u>			r fund balances at end of year. Combine lines 18 through 20	· · · · · · · · · · · · · · · · · · ·	▶ 21	0.			

232171 01-11-13

documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) 34	Pa	Other Information (Note the Schedule A and personal benefit contract statement requirements for Part VI Cheek if the organization used Sch. O to respond to any questions.					
33 Define organization engage a may significant activity not previously reported to the IRSP 11"Yee," provide a detailed description of each activity in Schedule IO Be organization activity IO Be organization activity IO Be organization activity		instructions for Part V) check if the organization used Sch. O to respond to any questi	711 111				
actively in Schedule 0 33 Ware an wagnificant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amendad documents if they reflect a change to the organization's name (threewise, explain the change on Schedule 0 (see instructions) 34	33	Did the organization engage in any significant activity not previously reported to the IRS2 if "Ves." provide a detailed description of each		163	140		
34 Ware any significant changes made to the organization or governing documents? If Yes', attach a conformed copy of the annexed documents if they ridited a change to the organization is among others? 35 Did the organization have unrelated business gress secone of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? 36 Was the organization asciden 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy lax requirements days have the organization asciden 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy lax requirements during the year? If Yes', complete applicable parts of Schedule N at 1 and set the annual of pointed sepanditures, direct or indirect, as described in the instructions 37 Enter amount of pointed sepanditures, direct or indirect, as described in the instructions 38 Doth the organization he Form 1120-PDL for this year? 39 Enter amount of pointed sepanditures, direct or indirect, as described in the instructions 38 Section 501(c)(7) organizations at the end of the tax year covered by this exturn? 39 If Yes's complete Schedule I, Part II and interfer the total amount involved the exturn? 39 If Yes's complete Schedule I, Part II and interfer the total amount involved the exturn? 39 If Yes's complete Schedule I, Part II and enter the total amount involved the exturn of the part forms 990 in 990-E27 if Yes's complete Schedule I, Part II and enter the total amount involved the exturn of the Yes's complete Schedule I, Part II and enter the total amount involved the exturn of the Yes's complete Schedule I, Part II and enter the total amount involved the exturn of the Yes's complete Schedule I, Part II and enter the total amount involved the exturn of the Yes's complete Schedule I, Part II and enter the total amount involved the exturn of the Yes's complete Schedule I, Part II and enter the tax microsome of the Yes's complete Schedu	00		33		×		
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Saperage	•		34		x		
on insex 2, 6a, and 7a, among others)? If Yes, 1 to miss 5a, has the organization field a Form 990-T for the year? If Yio,* provide an explanation in Schedule 0 Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If Yes,* complete Schedule C, Part III 35b	35 a		<u> </u>				
18 If Yes, 1c lines 35s, has the organization field a Form 990-T for the year? If Yeo, 1 provide an explanation in Schedule 0. Was the organization ascellar of 10(4)(-8, 10(1)(6)), 65 (10(1)(6)), 65			35a	1	x		
to Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule (- Part III and the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," and the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," and the organization before the form 1129-POL for this year? 37 Enter amount of political expenditures, direct or indirect, as described in the instructions 38 X 38 X 39 Did the organization before from ro-make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 39 Did the organization before from ro-make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 39 Different trust of the still of the organizations of the system of the still of the system of t	b		35b	N/A			
38 bit the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "yes," complete applicable parts of Schedule N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions b Did the organization file form 1120-PCL for this year? 37b Did the organization form or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a pinor year and still outstanding at the end of the tax year covered by this return? b If "Yes," complete Schedule L. Part II and enter the total amount involved Section 501(c)(7) organizations Enter amount of tax imposed on the organization during the year under section, 4911 ▶ 0. section 4912 ▶ 0. section 4915 ▶ 0. section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section, 4911 ▶ 0. section 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax mine 40c reimbursed by the organizations All any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "xes," complete Form 8886-T List the states with which a copy of this inclume sheld ▶ None Telephone no ▶ 802-739-5410 ZIP+4 ▶ 02237 At any time during the calendar year, did the organization manatian an office outside of the							
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372 Section 371 Chief amount of political sependitures, direct or indirect, as described in the instructions	36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes,"					
b Did the organization the Form 1120-P0L for this year? 37b		complete applicable parts of Schedule N					
38a bit the organization borrow from, or make any loans to, any officer, director, fusitee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b if it'ses, complete Schedule L, Part II and enter the total amount involved 38b N/A 38ction 501(c)(7) organizations Enter in a controlled on line 9 b Gross recepts, included on line 9, for public use of club facilities 39b N/A 39	37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions					
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b if Yes,* complete Schedule L, Part II and enter the total amount involved 38 Section 501(c)(7) organizations Enter a initiation fees and capital contributions included on line 9 5 Gross receipts, included on line 9, for public use of club facilities a section 501(c)(3) organizations Enter amount of fax imposed on the organization during the year under section 4911	38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made					
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b Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0., section 4955 ▶ 0. b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-E2? If "Yes," complete Schedule I., Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualined persons during the year under sections. 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T Located at № 27 Mechanic Street, North Bennington, VT List the states with which a copy of this return is filed ▶ None 42a The organization's books are in care of ▶ ₱xian McKenna Located at № 27 Mechanic Street, North Bennington, VT All any time during the calendar year, did the organization have an interest in or a signature or other financial account in a foreign country lover a financial account in a foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 4 Alay time during the calendar year, did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ in the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ c Did the organization operate one or more hospital facilities during the year? If "	39	Section 501(c)(7) organizations Enter					
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	400		45.		٠		
	_	312(U)(13)/ II Tes, Form 390 and Schedule in may need to be completed instead of Form 390-EZ (\$88 instructions)		00-E2			

Form 990-EZ (2012)

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.

2012

Open to Public

Name of the organization **Employer identification number** Association of Notre Dame Clubs, Inc. -Vermont 31-1075476 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.) 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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. **b** Type II a Type I c X Type III - Functionally integrated Type III - Non-functionally integrated e X 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Νo the governing body of the supported organization? 11g(i) Х (ii) A family member of a person described in (i) above? 11g(ii) Х (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(ili) Type of organization (described on lines 1-9 above or IRC section	(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 US?		(vii) Amount of monetary support	
		(see instructions))	Yes	No	Yes	No	Yes	No		
University of										
Notre Dame du Lac	35-0868188	2	x		x	_	x		0.	
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Total 1									0.	

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

Schedule A (Form 990 or 990-EZ) 2012

232021

	Organizations			

(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.)

Sec	tion A. Public Support						
Calei	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to			İ			
	the organization without charge			!			
4	Total. Add lines 1 through 3						
	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)						
6	Public support. Subtract line 5 from line 4						-
	tion B. Total Support	<u></u>		<u> </u>			· · · · · · · · · · · · · · · · · · ·
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	.,				.,	
8	Gross income from interest,						
	dividends, payments received on	ļ					
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						**
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc. (see instructi	ons)			12	-
	First five years. If the Form 990 is for			rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3)	
	organization, check this box and stor	here					▶□
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2012 (line 6, column (f) d	ivided by line 11,	column (f))		14	%
15	Public support percentage from 2011	Schedule A, Part	li, line 14			15	<u>%</u>
16a	33 1/3% support test - 2012. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or i	more, check this bo	ox and
	stop here. The organization qualifies	as a publicly supp	orted organization	1			▶
b	33 1/3% support test - 2011. If the	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/39	% or more, check th	nis box
	and stop here. The organization qual	ifies as a publicly :	supported organiz	ation			▶∟
17a	'a 10% -facts-and-circumstances test - 2012. 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 tes	t - 2011. If the org	anization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	he "facts-and-circu	ımstances" test, c	heck this box and	stop here. Explai	n in Part IV how the	
	organization meets the "facts-and-circ	cumstances" test.	The organization	qualifies as a publ	icly supported org	anızation	▶□
18	Private foundation. If the organization	on did not check a	box on line 13, 16	ia, 16b, 17a, or 17	b, check this box	and see instruction	s >
					Sch	edule A (Form 990	or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 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 helow, places complete Port II.)

Sec	ction A. Public Support	slow, please comp	olete Part II.)			<u>.</u>	
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and	(a) 2008	(b) 2009	(6) 2010	(d) 2011	(6) 2012	(i) Total
•	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,					 	
-	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the						
2	organization's tax-exempt purpose Gross receipts from activities that					 	
3	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-	 -			 		
4	ization's benefit and either paid to						
	or expended on its behalf						
_	·				-	 	
5	The value of services or facilities						
	furnished by a governmental unit to						
^	the organization without charge						
	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
ı	3 received from disqualified persons				 .		
•	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					-	
	Add lines 7a and 7b				}		
	Public support (Subtract line 7c from line 6)			<u> </u>	<u> </u>	<u> </u>	
	ction B. Total Support	4-1 0000	4.) 0000	1.3.0040	(20044	4-) 0040	(0 T-4-1
	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6 Gross income from interest,			· - · · - · · · · · · · · · · · ·			
100	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
•	Unrelated business taxable income	1					
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business						
••	activities not included in line 10b,		İ				
	whether or not the business is	1					
12	regularly carried on Other income. Do not include gain	•					
	or loss from the sale of capital						
40	assets (Explain in Part IV.)					 	
	Total support. (Add lines 9, 10c, 11, and 12)					504(3)(0)	
14	First five years. If the Form 990 is for	the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	ation,
<u></u>	check this box and stop here	in Command Da			·		
	ction C. Computation of Publ					14-1	
	Public support percentage for 2012 (column (f))		15	
	Public support percentage from 2011					16	%
_	ction D. Computation of Inves					47	
	Investment income percentage for 20			ne 13, column (f))		17	%
	investment income percentage from					18	%
19:	a 33 1/3% support tests - 2012. If the						I / Is not
	more than 33 1/3%, check this box a						. ▶□
	o 33 1/3% support tests - 2011. If the						
	line 18 is not more than 33 1/3%, che						▶⊣
20	Private foundation. If the organization	<u>n did not check a</u>	box on line 14, 19	a, or 19b, check t	his box and see in	structions	▶∟

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization	Association of Notre Dame Clubs, Inc Vermont	Employer identification number 31-1075476
Form 990-EZ, Part III,	Primary Exempt Purpose - Promote alumni fellowship;	
provide scholarships f	or Notre Dame	
Form 990-EZ, Part V, I	vine 35	
This Alumni Club did r	not file Form 990-T because revenue generated does	. .
not constitute unrelat	ed business income because:	
a. the activities do r	not constitute a trade or business, and;	
b. they are not regula	arly carried on, and;	
	substantially related to the Clubs exempt purpose	
	ties are conducted by volunteers, so they are	
exempt under IRS Secti	on 513(a)(1)	