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Department of the Treasury Internal Revenue Service

Form 990

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545 0047 2013

Open to Public Inspection

| Α                         | For the     | e 2013 calend        | lar year, or tax year beginning $11/01$ , 2013, and ending   | 10/3           | 31                            |               | 2014                                  |  |
|---------------------------|-------------|----------------------|--|----------------|-------------------------------|---------------|---------------------------------------|--|
| В                         | Check if    | applicable           | С  |                | D Employ                      |               | ation Number                          |  |
|                           | Add         | dress change         | LAKE MANSFIELD TROUT CLUB  |                | 03-0                          | 01359         | 90                                    |  |
|                           | Nar         | me change            | 4400 NEBRASKA VALLEY ROAD  |                | <b>E</b> Telepho              |               |                                       |  |
|                           | $\vdash$    | ial return           | STOWE, VT 05672  |                | 802                           | -253-         | 7565                                  |  |
|                           | Н           | minated              |  |                | 002                           | 233           | 7,505                                 |  |
|                           | $\vdash$    | ended return         |  |                | <b>G</b> Gross re             |               | 011 606                               |  |
|                           | $\vdash$    |                      | F Name and address of principal officer  | M(a) is this a | group return                  |               | 844,686.                              |  |
|                           | ∐ App       | olication pending    | · ·  | • •            | - '                           |               | ☐ 163 <u>131</u> 110                  |  |
|                           | T           |                      | SAME AS C ABOVE  | If 'No,'       | subordinates<br>attach a list | (see instru   | ictions)                              |  |
| <u> </u>                  |             | xempt status         | 501(c)(3) X 501(c) (7 ) (Insert no ) 4947(a)(1) or 527   |                |                               | _             |                                       |  |
| <u>」</u>                  |             | site: N/             |  | H(c) Group (   | exemption nu                  |               | <del></del>                           |  |
| K                         |             | of organization      | X Corporation Trust Association Other ► L Year of formation  | on             |                               | tate of leg   | al domicile                           |  |
| Pa                        |             | Summar               |  |                |                               |               |                                       |  |
|                           | 1 1         | Briefly describ      | be the organization's mission or most significant activities <u>SOCIAL/R</u>   | <u>ECREAT</u>  | <u>IONAL</u>                  | <u>CLUB</u>   |                                       |  |
| ě                         |             |                      |  |                |                               |               |                                       |  |
| Governance                |             |                      |  |                |                               |               |                                       |  |
| ᇤ                         | l           |                      |  |                |                               |               |                                       |  |
| Š                         | 2 (         |                      | x I if the organization discontinued its operations or disposed of more  | than 25%       | of its net                    |               | 1 5                                   |  |
|                           |             |                      | ting members of the governing body (Part VI, line 1a) dependent voting members of the governing body (Part VI, line 1b)  |                |                               | 3 4           | 15                                    |  |
| es                        |             |                      | of individuals employed in calendar year 2013 (Part V, line 2a)  |                |                               | 5             | <u> </u>                              |  |
| ₹                         |             |                      | of volunteers (estimate if necessary)  |                |                               | 6             | 0                                     |  |
| Activities &              |             |                      | d business revenue from Part VIII, column (C), line 12   |                |                               | 7 a           | 9,837.                                |  |
| _                         | 1           |                      | business taxable income from Form 990-T, line 34   |                |                               | 7 b           | 14,017.                               |  |
|                           |             |                      | · · · · · · · · · · · · · · · · · · ·  | ГР             | rior Year                     |               | Current Year                          |  |
| _                         | 8 (         | Contributions        | and grants (Part VIII, line 1h)  | <del>-</del> - | 171,4                         | 55.           | 166,471.                              |  |
| Ξe                        | 1           |                      | ice revenue (Part VIII, line 2g)   |                | 624,7                         |               | 639,476.                              |  |
| Revenue                   |             | _                    | come (Part VIII, column (A), lines 3, 4, and 7d)   |                | 7,987.                        |               | 9,837.                                |  |
| æ                         | 11 (        | Other revenue        | e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)   |                | 17,2                          |               | 28,902.                               |  |
|                           | 12          | Total revenue        | - add lines 8 through 11 (must equal Part VIII, column (A), line 12)   |                | 821,3                         |               | 844,686.                              |  |
|                           | 13 (        | Grants and si        | milar amounts paid (Part IX, column (A), lines 1-3)  |                |                               |               |                                       |  |
|                           | 14          | Benefits paid        | to or for members (Part IX, column (A), line 4)  |                |                               |               |                                       |  |
|                           | 15          | Salaries, othe       | er compensation, employee benefits (Part IX, column (A), lines 5-10)   |                | 338,4                         | 91.           | 363,231.                              |  |
| Expenses                  | 16 a        | Professional :       | fundraising fees (Part IX, column (A), line 11e)   |                |                               |               |                                       |  |
| ĕ                         | L           |                      | sing expenses (Part IX, column (D), line 25)   |                |                               |               |                                       |  |
| ă                         |             |                      |  |                | 205 5                         |               | · · · · · · · · · · · · · · · · · · · |  |
|                           |             | Otner expens         | es (Part IX, column (A), lines 11a-11d, 11f 24e)   |                | 385,7                         |               | 379,931.                              |  |
|                           | 18          | lotal expense        | es Add lines 13-17 (must equal Part IX) column (A) line 25) 2015 expenses Subtract line 18 from line 12  |                | 724,2                         |               | 743,162.                              |  |
| 8 8                       |             | Revenue less         |  |                | 97,1                          |               | 101,524.                              |  |
| <b>1</b>                  |             |                      | - AGA-W-U-   |                | ng of Curren                  |               | End of Year                           |  |
| Net Assets<br>Fund Balanc | 20          |                      | (Part X, line 16)  | 2              | 2,708,7                       |               | 2,754,460.                            |  |
| t p                       | 21          |                      | s (Part X, line 26)  | 1              | ,213,3                        | 346.          | 1,157,497.                            |  |
| <u>-</u> -                | 22          | Net assets or        | fund balances Subtract line 21 from line 20  | 1              | L,495,4                       | 39.           | <u>1,596,963</u> .                    |  |
| Pa                        | art II      | Signatui             | re Block   |                |                               |               |                                       |  |
| Unde                      | er penaltie | es of perjury, I dec | lare that I have examined this return, including accompanying schedules and statements, and to the best<br>ifer (other than officer) is based on all information of which preparer has any knowledge | of my knowled  | dge and belief                | , it is true, | correct, and                          |  |
| com                       | piete De    | ciaration of prepa   | mer (other than officer) is based on an information of which preparer has any knowledge  |                |                               | -,-           |                                       |  |
|                           |             | D gold               | ma Magne   |                |                               | <u> 2/15</u>  |                                       |  |
| Sig                       | gn          | Sagnatu              | re of officer  | Da             | ate                           |               |                                       |  |
| He                        | re          |                      | ES MC INTYRE   | TREAS          | SURER                         |               |                                       |  |
|                           | _           | Type or              | print name and title   | 1              |                               |               |                                       |  |
|                           |             | Print/Type           | preparer's name Preparer's signature Date  | 1 -            | Check                         | ıf P          | TIN                                   |  |
| Pa                        | id          | CARRII               | E E. MARTIN, CPA (Price) Burling 13  | 115            | self-employ                   | ed F          | 01202832                              |  |
| Pr                        | epare       |                      | CARRIE MARTIN & ASSOCIATES, INC.   | T              |                               |               |                                       |  |
|                           | e On        |                      |  |                | Firm's EIN                    | <b>03-</b>    | 0359198                               |  |
|                           |             |                      | MORRISVILLE, VT 05661  |                | Phone no                      | (802          |                                       |  |
| Ma                        | v the II    | OS discuss th        | is return with the preparer chewn above? (see instructions)  |                |                               | ,             | TVI Van II Na                         |  |

|   | AKE MANSFIELD 1  |  |  |  |  | 03-0                     | 13599             | 90               | <u> </u>         | aç  |
|---|--|--|--|--|--|--------------------------|-------------------|------------------|------------------|-----|
|   | ent of Program Se  | •  |  |  |  |                          |                   |                  |                  |     |
|   | Schedule O contains a r  |  | any line in this P   | art III                                |  |                          |                   |                  |                  |     |
| <del>-</del>  | the organization's missi   |  |  |  |  |                          |                   |                  |                  |     |
| SOCIAL/RE   | CREATIONAL CLUB  |  |  | . <b></b>                              | <b></b> _                                |                          |                   |                  |                  | _   |
|   |  |  |  |  |  |                          |                   |                  |                  | _   |
|   |  |  |  |  |  |                          |                   |                  |                  |     |
|   |  |  |  |  |  |                          |                   |                  |                  |     |
| 2 Did the organiza                                    | ation undertake any signi  | ıfıcant program ser  | vices during the y   | ear which we                           | ere not listed on th                     | e prior                  |                   |                  |                  |     |
| Form 990 or 99  | 0-EZ?  |  |  |  |  |                          |                   | Yes              | X                | 1   |
| If 'Yes,' describ                                     | e these new services on  | Schedule O   |  |  |  |                          | _                 |                  | _                |     |
| 3 Did the organiza                                    | ation cease conducting, o  | or make significant  | changes in how i   | t conducts, a                          | any program servic                       | es?                      | Π                 | Yes              | X                | į   |
| If 'Yes,' describ                                     | e these changes on Sch   | edule O  |  |  |  |                          |                   |                  |                  |     |
| Describe the ord<br>Section 501(c)(cothers, the total | ganization's program ser<br>3) and 501(c)(4) organiza<br>expenses, and revenue | vice accomplishme<br>ations and section<br>, if any, for each pr | ents for each of its<br>4947(a)(1) trusts<br>rogram service re | three larges<br>are required<br>ported | st program service<br>to report the amou | s, as mea<br>int of grar | isured<br>nts and | by exp<br>alloca | enses<br>tions t | 0   |
| 4a (Code  | ) (Expenses \$   | 739,465.   | ncluding grants o  | f \$                                   | ) (R                                     | evenue                   | \$                |                  |                  |     |
| MAINTAIN  | PROPERTY FOR TH  |  |  |  | NCLUDES LAKE                             | E, DAM                   | FI:               | SHIN             | G AN             | D   |
|   | REATIONAL ACTIV  |  |  |  |  |                          |                   |                  |                  | -   |
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| b (Code   | ) (Expenses \$   |  | including grants o   | f \$                                   | ) (F                                     | Revenue                  | \$                |                  |                  |     |
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|   | <del></del> .  |  |  |  |  |                          |                   |                  |                  |     |
| <b>c</b> (Code  | ) (Expenses \$   |  | including grants o   | of \$                                  | ) (F                                     | Revenue                  | \$                |                  |                  | _   |
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|   |  |  |  |  |  |                          |                   |                  |                  |     |
|   |  |  |  |  |  |                          |                   | ·                |                  | -   |
| 4 d Other program                                     | services (Describe in S  | chedule O )  |  | -                                      |  |                          |                   | _                |                  |     |
| (Expenses   | \$   | including grants   | of \$  |  | (Revenue \$                              |                          |                   |                  | )                |     |
| 4 e Total program                                     | service expenses -   | 739,   | 465.   |  |  |                          |                   |                  |                  |     |
| AA  |  |  | TEEA0102L 07/02/   |  |  |                          | _                 | For              | n <b>990</b>     | ľ   |

| _    |   |      | Yes | No         |
|------|---|------|-----|------------|
| 1    | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A   | 1    |     | Х          |
| 2    | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?   | 2    |     | X          |
| 3    | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I  | 3    |     | Х_         |
| 4    | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II  | 4    |     |            |
| 5    | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III   | 5    |     | Х          |
| 6    | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I  | 6    |     | X          |
| 7    | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II  | 7    |     | Х          |
| 8    | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III   | 8    |     | X          |
| 9    | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV              | 9    |     | <u>X</u> _ |
| 10   | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V  | 10   |     | Х          |
| 11   | If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable   |      |     | , ,        |
| ā    | Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI  | 11 a | Х   |            |
| ŀ    | 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   | 11 b |     | Х          |
| (    | Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII   | 11 c |     | Х          |
| (    | d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX  | 11 d |     | Х          |
|      | Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X   | 11 e | X   |            |
|      | 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  | 11 f | _   | Х          |
| 12 a | a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII   | 12a  |     | X          |
|      | b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional   | 12 b |     | X          |
|      | Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E   | 13   |     | X          |
|      | a Did the organization maintain an office, employees, or agents outside of the United States?   | 14a  |     | <u>X</u>   |
| ı    | b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV | 14b  |     | Х          |
| 15   | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV  | 15   |     | Х          |
| 16   | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV  | 16   |     | Х          |
| 17   | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)   | 17   |     | Х          |
| 18   | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II  | 18   |     | Х          |
| 19   | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III  | 19   | _   | Х          |
|      | a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H   | 20   |     | X          |
|      | b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?  | 20 b |     | <u> </u>   |

Form 990 (2013) LAKE MANSFIELD TROUT CLUB

Part IV | Checklist of Required Schedules (continued)

|      |   |      | Yes         | No     |
|------|---|------|-------------|--------|
| 21   | Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II   | 21   |             | х      |
| 22   | Did the organization report more than \$5,000 of grants or 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   |             | х      |
| 23   | Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>   | 23   |             | х      |
| 24 a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No,'go to line 25a                              | 24a  | _           | х      |
| t    | 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  |             |        |
| C    | Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?   | 24d  |             |        |
| 25 a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I   | 25a  |             |        |
| Ł    | 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  |             |        |
| 26   | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II                                    | 26   |             | Х      |
| 27   | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III | 27   |             | х      |
|      | 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)  |      |             |        |
| ā    | A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV   | 28a  |             | Х      |
| ŀ    | A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV  | 28b  |             | Х      |
| •    | 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  |             | х      |
| 29   |   | 29   |             | Х      |
| 30   | contributions? If 'Yes,' complete Schedule M  | 30   |             | Х      |
| 31   | Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I  | 31   |             | Х      |
| 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   |             | Х      |
| 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   |             | х      |
|      | 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   |             | х      |
| 35 : | a Did the organization have a controlled entity within the meaning of section 512(b)(13)?   | 35a  | ļ           | Х      |
| ļ    | b If 'Yes' to line 35a, 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  |             |        |
| 36   | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2  | 36   |             |        |
| 37   | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI   | 37   |             | х      |
| 38   | Note. All Form 990 filers are required to complete Schedule O   | 38   | Х           |        |
| BAA  |   | Forn | 9 <b>90</b> | (2013) |

Form 990 (2013) LAKE MANSFIELD TROUT CLUB 03-0135990 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 a b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 27 X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  $\overline{X}$ 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a X b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O 3 b 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? **b** If 'Yes,' enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 c 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization X solicit any contributions that were not tax deductible as charitable contributions? 6 a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible Х 6 h Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and 7 a services provided to the payor? b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f q If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7 h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9 a 9 b **b** Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10 a 0 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b 0. 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12 b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13 a Note. See the instructions for additional information the organization must report on Schedule O **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13 c

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14 a

Form 990 (2013) LAKE MANSFIELD TROUT CLUB 03-0135990 Page 6 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 or note to any line in this Part VI Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year 15 1 a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are independent 14 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х a The governing body? 8 a  $\overline{X}$ b Each committee with authority to act on behalf of the governing body? 8 b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates? 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a X **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12 h c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done 120 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 Х Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official SEE SCHEDULE O 15 a Х b Other officers of key employees of the organization 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions ) 16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16 a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16 b Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply X Upon request Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year SEE SCHEDULE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization

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

Check if Schedule O contains a response or note to any line in this Part VII

### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

| Check this box if neither the organization | n nor any r  | elated   | orga                  |                        |  | comp                         | ens  | ated any current office  | er, director, or trustee                   |  |
|--|--|--|-----------------------|------------------------|--|------------------------------|--|--|--|--|
|  |  |  |                       | (C                     | )  |                              |  |  |  |  |
| (A)<br>Name and Title                      | (B) Average hours per  | Average one box, unless per officer and a dire |                       | heck<br>ersor<br>recto | more the standard more than the standard more | ;)                           | (D)  Reportable compensation from the organization | Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation |  |
|  | any hours<br>for related<br>organiza-<br>tions<br>below<br>dotted<br>line) | Individual trustee or director                 | Institutional trustee | Officer                | Key employee   | Highest compensated employee | Former   | (W-2/1099-MISC)  | (W-2/1099-MISC)                            | from the<br>organization<br>and related<br>organizations |
| (1) DEAN ECONOMOU                          | _ 20 _   |  |                       |                        |  |                              |  |  |  | -  |
| PRESIDENT                                  | 0  | X  | Ш                     | Х                      |  |                              |  | 48,362.  | 0.   | 0.   |
| (2) SCOTT BOARDMAN                         | 2  | ]  |                       |                        |  |                              |  |  |  |  |
| VICE PRESIDENT                             | 0  | X  |                       | Х                      |  |                              |  | 0.   | 0.   | 0.   |
| _(3) JAMES MCINTYRE                        | 5  | ļ  |                       |                        |  |                              |  |  |  |  |
| TREASURER                                  | 0  | X  |                       | Х                      |  |                              |  | 0.   | 0.   | 0.   |
| (4) STEVEN RILEY                           | 3  | ļ  |                       |                        |  |                              |  |  |  |  |
| SECRETARY                                  | 0  | X  |                       | X                      |  |                              |  | 0.   | 0.   | 0.   |
| (5) STUART WEPPLER                         | 11   | 1  |                       |                        |  |                              |  |  |  |  |
| 2ND VP                                     | 0  | X  |                       | Х                      |  |                              |  | 0.   | 0.   | 0.   |
| _(6) THOMAS BROCK                          | 11   | ]  |                       |                        |  |                              |  |  | _  | _  |
| DIRECTOR                                   | 0  | X  | lacksquare            |                        |  |                              |  | 0.   | 0.   | 0.   |
| BURKE                                      | 11   | ļ  |                       |                        |  |                              |  | _  |  | _  |
| DIRECTOR                                   | 0  | X  |                       |                        |  |                              |  | 0.   | 0.   | 0.   |
| _(8)_PETER_KUNIN                           | 11   | 1  |                       |                        |  |                              |  | _  |  |  |
| DIRECTOR                                   | 0  | X  | _                     |                        |  |                              | _  | 0.   | 0.   | <u> </u>   |
| (9) JOHN HYNES                             | 11   | 1  |                       |                        |  |                              |  |  |  |  |
| DIRECTOR                                   | 0  | X  |                       |                        |  |                              |  | 0.   | 0.   | 0.   |
| (10) DALE_NEIL                             | 11   | 1  |                       |                        |  |                              |  |  | _  |  |
| DIRECTOR                                   | 0  | X  |                       |                        |  |                              | <u> </u>   | 0.   | 0.   | 0.   |
| (11) PETER NOLAN                           | 11   | 1  |                       |                        |  |                              |  |  |  |  |
| DIRECTOR                                   | 0  | X  |                       |                        |  |                              |  | 0.   | 0.   | <u> </u>   |
| (12) WILBUR MANN JR                        | 1  | 1  | 1                     |                        |  |                              |  |  |  |  |
| DIRECTOR                                   | 0  | X  | <u> </u>              |                        |  |                              |  | 0.   | 0.   | 0.   |
| (13) PALL SPERA                            | 11   | 1  |                       |                        |  |                              |  |  |  |  |
| DIRECTOR                                   | 0  | X  |                       | <u> </u>               |  |                              |  | 0.   | _ 0.                                       | 0.   |
| (14) KENNETH VALENTINE                     | 11   | ļ  |                       |                        |  |                              |  |  | _  |  |
| DIRECTOR                                   | 0  | X  |                       |                        |  |                              |  | 0.   | 0.   | 0.   |

Page 8

| Part VII   Section A. Officers, Directors, Trus   |   | Key                               | Em                    |                     |                         | es,                          | an               | d Highest Cor                       | npensated Emp                            | ployees (continued)  |
|---|---|-----------------------------------|-----------------------|---------------------|-------------------------|------------------------------|------------------|-------------------------------------|--|--|
| <b>(A)</b><br>Name and title  | Average<br>hours<br>per   | box,                              | unles                 | s per               | ition<br>more<br>rson i | than o<br>s both<br>r/truste | an l             | (D)  Reportable compensation from   | <b>(E)</b> Reportable compensation from  | <b>(F)</b> Estimated amount of other                                     |
|   | week<br>(list any<br>hours<br>for<br>related<br>organiza<br>tions<br>below<br>dotted<br>line) | Individual trustee<br>or director | Institutional trustee | Officer             | Key employee            | Highest compensated employee | Former           | the organization<br>(W 2/1099 MISC) | related organizations<br>(W 2/1099 MISC) | compensation<br>from the<br>organization<br>and related<br>organizations |
| (15) WILLIAM ADAMS DIRECTOR   | $-\frac{1}{0}$  | х                                 |                       |                     |                         |                              |                  | 0.                                  | 0.                                       | 0.   |
| (16)  |   |                                   |                       |                     |                         |                              |                  |                                     |  |  |
| (17)  |   |                                   |                       |                     |                         |                              |                  |                                     |  |  |
| (18)  |   |                                   |                       |                     |                         |                              |                  |                                     |  |  |
| (19)  |   |                                   |                       |                     |                         |                              |                  |                                     |  |  |
| (20)  |   |                                   |                       |                     |                         |                              |                  |                                     |  |  |
| (21)  |   |                                   |                       |                     |                         |                              |                  |                                     |  |  |
| (22)  |   |                                   |                       |                     |                         |                              |                  |                                     |  |  |
| (23)  |   |                                   |                       |                     |                         |                              |                  |                                     | · -                                      |  |
| (24)  |   |                                   |                       |                     |                         |                              |                  |                                     |  |  |
| (25)  | <del> </del>  |                                   |                       |                     |                         |                              |                  |                                     |  |  |
| 1 b Sub-total   |   |                                   | -                     |                     |                         |                              |                  | 48,362.                             | 0.                                       | 0.   |
| c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)   | A   |                                   |                       |                     |                         |                              | <b>^</b>         | 0.<br>48,362.                       | 0.                                       | 0.   |
| 2 Total number of individuals (including but not limited from the organization ▶ 0  | to thos   | e list                            | ed al                 | bov                 | e) w                    | ho re                        | ecei             |                                     |  | compensation   |
| 3 Did the organization list any <b>former</b> officer, director   | or trus   | tee. k                            | ev e                  | emo                 | love                    | e or                         | hia              | hest compensated                    | employee                                 | Yes No   |
| on line 1a <sup>3</sup> If 'Yes,' complete Schedule J for such ii  4 For any individual listed on line 1a, is the sum of re | ndıvıdua  | I '                               |                       | Ċ                   | •                       | ,                            | J                |                                     |  | 3 X  |
| the organization and related organizations greater ti<br>such individual  | nan \$150   | 0,000                             | ? If                  | f 'Ye               | es' c                   | ompl                         | lete             | Schedule J for                      |  | 4 X  |
| 5 Did any person listed on line 1a receive or accrue or for services rendered to the organization? If 'Yes,'                | ompens<br><i>complet</i>  | ation<br>e Sci                    | from<br>hedu          | n an<br><i>le J</i> | y ur<br><i>for</i>      | relat<br>such                | ed<br><i>pei</i> | organization or ind<br>rs <i>on</i> | lividual                                 | 5 X  |
| 1 Complete this table for your five highest compensations   | ed indep  | ende                              | nt co                 | ontr                | acto                    | rs tha                       | at r             | eceived more than                   | \$100,000 of                             |  |
| compensation from the organization Report compe   | nsation   | for th                            | e cal                 | lenc                | dar y                   | ear e                        | endi             | ing with or within t                | he organization's ta                     | x year<br>(C)  |
| Name and business address   | ss  |                                   |                       |                     |                         |                              |                  | Description                         |  | Compensation   |
|   |   |                                   |                       | -                   |                         |                              |                  |                                     |  |  |
|   |   |                                   |                       |                     |                         |                              | _                |                                     |  |  |
| 2 Total number of independent contractors (including \$100,000 of compensation from the organization                        | but not   | limite                            | ed to                 | tho                 | se li                   | sted                         | abo              | ove) who received                   | more than                                | *                                  |
| BAA   |   | TEEAG                             | 108                   | 11/                 | 11/13                   |                              |                  |                                     |  | Form <b>990</b> (2013)   |

|  |      | Check if Schedule O contains a respon  | nse or note to any l | line in this Part VII                          | l   |                                     |                               |
|--|------|--|----------------------|--|---|-------------------------------------|-------------------------------|
| * :  | . ;  |  | * .                  | (A)<br>Total revenue                           | (B)<br>Related or<br>exempt                   | <b>(C)</b><br>Unrelated<br>business | (D) Revenue excluded from tax |
|  |      |  |                      |  | function<br>revenue                           | revenue                             | under sections<br>512-514     |
| 2 <u>₹</u>   |      | Federated campaigns 1 a  |                      | ŝ  |   |                                     | , ,                           |
| 8 8<br>8   |      | Membership dues 1 b  | 97,496.              | *  | *       |                                     | ` ~,                          |
| A S  |      | Fundraising events 1 c   |                      | 1 1.   | , <u>, , , , , , , , , , , , , , , , , , </u> |                                     | i ii ii i                     |
| 늉뛸   |      | Related organizations 1 d Government grants (contributions) 1 e                    |                      | <i>t</i>                                       | . #\$   | 4                                   |                               |
| 終틠   | e    | dovernment grants (contributions).   |                      | *  | · · · · · ·                                   | * ***                               |                               |
| CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS |      | All other contributions, gifts, grants, and similar amounts not included above 1 f | 68,975.              | ';   | * *   |                                     | * * * *                       |
| 통회   | _    | Noncash contributions included in lines 1a-1f \$_                                  |                      | ļ  | -   |                                     | * * * ;                       |
|  | h    | Total. Add lines 1a-1f   | Business Code        | 166,471.                                       |   |                                     |                               |
| PROGRAM SERVICE REVENUE                                | 2 a  | MEMBERGUED DUEC AND ACCES  | 900099               | 639,476.                                       | 639,476.                                      |                                     |                               |
| 필  | b    | MEMBERSHIP DUES AND ASSES  | 900099               | 033,470.                                       | 639,476.                                      |                                     |                               |
| 핑  | c    |  |                      |  |   |                                     |                               |
| €  | d    |  |                      |  | ·   |                                     |                               |
| S  | е    |  |                      |  |   |                                     |                               |
| 쭗  | f    | All other program service revenue  | _                    |  |   |                                     |                               |
| 쭕  | g    | Total. Add lines 2a-2f   | <b>•</b>             | 639,476.                                       | . * } *                                       | *,                                  | ***                           |
|  | 3    | Investment income (including dividends, other similar amounts)                     | interest and         | 0.027  |   | 0.007                               | -                             |
|  | 4    | Income from investment of tax-exempt b   | ond proceeds         | 9,837.   | -   | 9,837.                              |                               |
|  | 5    | Royalties  | ona proceeds : ►     |  |   |                                     |                               |
|  | •    | (i) Real   | (ii) Personal        | 8 , x 9  | . *   | * ,                                 | , ,                           |
|  | 6 a  | Gross rents  |                      | 1  |   |                                     | ,                             |
|  | b    | Less rental expenses   |                      |  | , ,   |                                     | *                             |
|  |      | Rental income or (loss)  |                      | · · /  | 2 3   |                                     | *                             |
|  | d    | Net rental income or (loss)  | <b>-</b>             |  |   |                                     |                               |
|  | 7 a  | Gross amount from sales of (i) Securities  | (ii) Other           |  |   | , v                                 |                               |
|  |      | assets other than inventory  |                      |  | *   |                                     | *                             |
|  | b    | Less cost or other basis and sales expenses  |                      | * < * .  | * *   | ١ پ                                 |                               |
|  | С    | Gain or (loss)   |                      | 1  |   |                                     |                               |
|  | d    | Net gain or (loss)   | ▶                    |  |   |                                     |                               |
| 144  | 8 a  | Gross income from fundraising events   |                      | "  | *   | è                                   | *                             |
| OTHER REVENUE  |      | (not including \$  |                      | , , ,  |   | # · · ·                             |                               |
| Ē  |      | of contributions reported on line 1c)  |                      |  |   |                                     |                               |
| E  | _    | •  | 3                    | <b>1</b> * * * * * * * * * * * * * * * * * * * | *   |                                     | , *                           |
| ē  | 0    | Less direct expenses  Net income or (loss) from fundraising ex                     | ol                   |  | *   |                                     |                               |
|  |      |  | Circo -              | *  | 1 1 1 1 1                                     | 2                                   | w / · 3 ·                     |
|  | 9 a  | Gross income from gaming activities See Part IV, line 19                           | a                    |  |   | *                                   | × / ·                         |
|  |      |  | ь                    | 1 * * *  | *       | 3 3 4 1                             |                               |
|  | c    | Net income or (loss) from gaming activity  | ies •                |  |   |                                     |                               |
|  | 10 a | Gross sales of inventory, less returns and allowances                              |                      | Z  |   | 8.                                  |                               |
|  |      |  | a                    | 1** ** **                                      | 3 %   | * * *                               | *                             |
|  |      | Less cost of goods sold  | D                    | 1  |   |                                     | <u> </u>                      |
|  |      | Net income or (loss) from sales of inver   | Business Code        | <del> </del>                                   | *   | *                                   | *                             |
|  | 11 a |  | 900099               | 20,025   |   | l                                   | <u>~</u>                      |
|  | t.   |  | <u> </u>             | 8,877  |   | -                                   |                               |
|  | c    |  |                      |  | 1 0,0,7.                                      | _                                   |                               |
|  | c    | All other revenue  |                      |  |   | <u> </u>                            |                               |
|  |      | Total. Add lines 11a-11d   | -                    | 28,902   |   | *                                   | *                             |
|  | 12   | Total revenue. See instructions  | •                    | 844,686  | . 668,378.                                    | 9,837.                              | 0.                            |

### 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) Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (D) Do not include amounts reported on lines Fundráising Program service Management and 6b, 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 \$. Grants and other assistance to individuals in × 20 the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 à `\*\* Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 0 48,362 48,362 0. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) O 0 0 0. Other salaries and wages 274,056 274,056 Pension plan accruals and contributions (include section 401(k) and 403(b) employer Other employee benefits 1,926 1,926 Payroll taxes 10 38,887 38,887 Fees for services (non-employees) a Management **b** Legal c Accounting 4,063 3,563 500 **d** Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other (If line 11g amt exceeds 10% of line 25, column 1,961 1,961 (A) amount, list line 11g expenses on Schedule O) 1,073. Advertising and promotion 1,073. Office expenses 2,952. 2,952. Information technology 14 Royalties 15 54,065 Occupancy 54,065 16 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 20 Interest 17,809 17,809. Payments to affiliates Depreciation, depletion, and amortization 62,700 62,700 36,741 23 36,741 Other expenses Itemize expenses not 24 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) 129.941 129,941 PURCHASES 33,011 b REPAIRS AND MAINTENANCE 33,011 9,006 c CREDIT CARD COMMISSION 9,006 d LAUNDRY 7,715 7,715 e All other expenses 18.894 15,697 3.197 743,162 739,465 3,697 Total functional expenses. Add lines 1 through 24e 0 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► if following SOP 98-2 (ASC 958-720)

Organizations that follow SFAS 117 (ASC 958), check here

Paid-in or capital surplus, or land, building, or equipment fund

Organizations that do not follow SFAS 117 (ASC 958), check here

Retained earnings, endowment, accumulated income, or other funds

lines 27 through 29, and lines 33 and 34.

Temporarily restricted net assets

Permanently restricted net assets

and complete lines 30 through 34.

Total net assets or fund balances

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Unrestricted net assets

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year Cash - non-interest-bearing 139,331 1 111,414. Savings and temporary cash investments 2 161,609 64,508. Pledges and grants receivable, net 3 4 Accounts receivable, net 22.094 8.559 Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Loans and other 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) Complete Part II of Schedule L 6 7 Notes and loans receivable, net 286 13,422. 9. 8 Inventories for sale or use 50,257 8 56,425 9 Prepaid expenses and deferred charges 10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 2,318,207 10b 10 c b Less accumulated depreciation 451,414 1,888,243 1,866,793. Investments - publicly traded securities 11 11 437,965 633,339 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 2,708,785 2,754,460 16 17 Accounts payable and accrued expenses -395 17 7,338 Grants payable 18 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 ABILIT LES Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 535,276 23 398,249. 24 Unsecured notes and loans payable to unrelated third parties 24 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 678,465 751,910. 26 26 Total liabilities. Add lines 17 through 25 213,346 157,497

BAA

28

33

34

R

2,754,460. Form **990** (2013)

1,596,963.

240,600.

87,739.

268,624.

27

28

29

30

31

32

33

240,600

167,100

1,495,439

2,708,785

87,739

and complete

|     |   | 3-0135990   |      | Pa                                      | ge <b>12</b> |
|-----|---|-------------|------|---|--------------|
| Par | t XI Reconciliation of Net Assets   |             |      |   |              |
|     | Check if Schedule O contains a response or note to any line in this Part XI   |             |      | _                                       |              |
| 1   | Total revenue (must equal Part VIII, column (A), line 12)   | 1           | 8    | 44,6                                    | 586.         |
| 2   | Total expenses (must equal Part IX, column (A), line 25)  | 2           | 7    | 43,1                                    | 62.          |
| 3   | Revenue less expenses Subtract line 2 from line 1   | 3           | 1    | 01,5                                    | 524.         |
| 4   | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))   | 4           | 1,4  | 95,4                                    | 139.         |
| 5   | Net unrealized gains (losses) on investments  | 5           |      |   |              |
| 6   | Donated services and use of facilities  | 6           |      |   |              |
| 7   | Investment expenses   | 7           |      |   |              |
| 8   | Prior period adjustments  | 8           |      |   |              |
| 9   | Other changes in net assets or fund balances (explain in Schedule O)  | 9           |      |   | 0.           |
| 10  | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))   | 10          | 1,5  | 96,9                                    | 963.         |
| Par | t XII   Financial Statements and Reporting  |             |      |   |              |
|     | Check if Schedule O contains a response or note to any line in this Part XII  |             |      |   |              |
|     |   |             |      | Yes                                     | No           |
| 1   | Accounting method used to prepare the Form 990 Cash X Accrual Other   |             |      | · (*)                                   |              |
|     | If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O  |             | 7.   | ` ',                                    |              |
| 2 8 | Were the organization's financial statements compiled or reviewed by an independent accountant?   |             | 2 a  | *************************************** | X            |
|     | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both   | ed on a     |      |   | , 3 i        |
|     | Separate basis Consolidated basis Both consolidated and separate basis  |             |      | dera                                    |              |
| ŧ   | were the organization's financial statements audited by an independent accountant?  |             | 2 b  |   | Х            |
|     | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ   | ate         |      |   | 5            |
|     | basis, consolidated basis, or both  |             |      | <b>ش</b>                                | ,            |
|     | Separate basis Consolidated basis Both consolidated and separate basis  |             |      | - 4                                     | لتا          |
| (   | c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of review, or compilation of its financial statements and selection of an independent accountant? | the audit,  | 2 c  |   |              |
|     | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O  |             |      | ,                                       |              |
| 3 : | a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the<br>Audit Act and OMB Circular A-133?  | Single      | 3 a  |   | Х            |
| 1   | b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the req  | uired audit |      |   |              |
|     | or audits, explain why in Schedule O and describe any steps taken to undergo such audits  |             | 3 b  |   | <u> </u>     |
| BAA |   |             | Form | 990                                     | (2013)       |

### **SCHEDULE D** (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Department of the Treasury Internal Revenue Service Name of the organization

Öpen to Public Inspection

| LA  | KE MANSFIELD TROUT CLUB   |  | 03-0135990  |
|-----|---|--|---|
| Par | t I Organizations Maintaining Done  | or Advised Funds or Other Similar F  | unds or Accounts.   |
|     | Complete if the organization ans  | wered 'Yes' to Form 990, Part IV, line   | e 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 are the organization's property, subject to the organization   | or advisors in writing that the assets held in dono<br>organization's exclusive legal control?       | or advised funds Yes No   |
| 6   | Did the organization inform all grantees, donors for charitable purposes and not for the benefit of impermissible private benefit?                          | s, and donor advisors in writing that grant funds of the donor or donor advisor, or for any other pr | can be used only<br>urpose conferring Yes No  |
| Pai |   | swered 'Yes' to Form 990, Part IV, line  | e 7.  |
| 1   | Purpose(s) of conservation easements held by  |  |   |
|     | Preservation of land for public use (e g , re   | creation 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 last day of the tax year   | n held a qualified conservation contribution in th   |   |
|     |   |  | Held at the End of the Tax Year   |
|     | a Total number of conservation easements  |  | 2 a   |
|     | Total acreage restricted by conservation easen  |  | 2 b   |
|     | c Number of conservation easements on a certifi   | ` ,  | 2 c   |
| 1   | Number of conservation easements included in<br>structure listed in the National Register   |  | 2 d   |
| 3   | Number of conservation easements modified, t tax year ►   | ransferred, released, extinguished, or terminate •   | d by the organization during the  |
| 4   | Number of states where property subject to con  | nservation easement is located -   |   |
| 5   |   | arding the periodic monitoring, inspection, hand   | lling of violations,  Yes No  |
| c   | and enforcement of the conservation easement  | is it holds?<br>g, inspecting, and enforcing conservation easem                                      |   |
| 6   | Start and volunteer flours devoted to monitoring  | y, inspecting, and emorcing conservation easen   | ilents during the year  |
| 7   | Amount of expenses incurred in monitoring, in:  \$\Bigs\$   | specting, and enforcing conservation easements   | s during the year   |
| 8   | Does each conservation easement reported on and section 170(h)(4)(B)(ii)?   | line 2(d) above satisfy the requirements of sect   | tion 170(h)(4)(B)(i) Yes No   |
| 9   | In Part XIII, describe how the organization reprinclude, if applicable, the text of the footnote to conservation easements                                  | orts conservation easements in its revenue and othe organization's financial statements that des     | expense statement, and balance sheet, and scribes the organization's accounting for |
| Pa  | rt III Organizations Maintaining Collec   | tions of Art, Historical Treasures, or Ot<br>swered 'Yes' to Form 990, Part IV, lin                  | ther Similar Assets.<br>ne 8.   |
| 1   | a If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its finance. | s held for public exhibition, education, or researc  |   |
|     | b If the organization elected, as permitted under<br>historical treasures, or other similar assets hel<br>following amounts relating to these items         | SFAS 116 (ASC 958), to report in its revenue s d for public exhibition, education, or research in    |   |
|     | (i) Revenues included in Form 990, Part VIII,   | line 1   | <b>►</b> \$   |
|     | (ii) Assets included in Form 990, Part X  |  | <b>►</b> \$   |
| 2   | If the organization received or held works of ar amounts required to be reported under SFAS   |  |   |
|     | a Revenues included in Form 990, Part VIII, line  | 1  | <b>▶</b> \$   |
|     | <b>b</b> Assets included in Form 990, Part X  |  | ▶\$   |

| Schedule D (Form 990) 2013 LAKE    Part       Organizations Maintain                   | MANSFIELD TRO            | OUT CLUB                        | al Treasures or Oth             | 03-013                       |                |          | Page 2 |
|--|--------------------------|---------------------------------|---------------------------------|------------------------------|----------------|----------|--------|
| +  |                          |                                 |                                 |                              |                |          |        |
| 3 Using the organization's acquisition items (check all that apply)                    | n, accession, and oth    | ner records, check              | any of the following tha        | t are a significant use      | of its colle   | ction    |        |
| a Public exhibition  |                          | <b>d</b> Loan o                 | r exchange programs             |                              |                |          |        |
| <b>b</b> Scholarly research  |                          | e Other                         |                                 |                              |                |          |        |
| c Preservation for future genera   |                          |                                 |                                 |                              |                |          |        |
| 4 Provide a description of the organ<br>Part XIII                                      | ization's collections a  | nd explain how th               | ney further the organizati      | on's exempt purpose ir       | ו              |          |        |
| 5 During the year, did the organizat to be sold to raise funds rather the              | ion solicit or receive d | lonations of art, h             | istorical treasures, or other   | ner sımılar assets           | Yes            | Г        | No     |
| Part IV Escrow and Custodia  |                          |                                 |                                 | swered 'Yes' to Fo           |                | Par      |        |
| line 9, or reported an   | amount on Form           | 990, Part X,                    | line 21.                        | 5,70,70 <b>u</b> 100 to 10   | 31111 330      | ,        | ,      |
| 1 a Is the organization an agent, trust  | ee, custodian, or othe   | er intermediary fo              | r contributions or other a      | ssets not included           |                |          |        |
| on Form 990, Part X? <b>b</b> If 'Yes,' explain the arrangement                        | in Part XIII and comp    | lete the following              | table                           |                              | Yes            | L        | No     |
| bit res, explain the arrangement   | in i an Am and comp      | iete trie following             | table                           |                              | Amount         | -        |        |
| c Beginning balance  |                          |                                 |                                 | 1 c                          | 7 imount       |          |        |
| <b>d</b> Additions during the year   |                          |                                 |                                 | 1 d                          |                |          |        |
| e Distributions during the year  |                          |                                 |                                 | 1 e                          |                |          |        |
| f Ending balance   |                          |                                 |                                 | 1 f                          |                |          |        |
| 2a Did the organization include an ar  | mount on Form 990, F     | Part X, line 21?                |                                 |                              | Yes            |          | No     |
| <b>b</b> If 'Yes,' explain the arrangement   | ın Part XIII Check he    | re if the explantion            | on has been provided in l       | Part XIII                    |                |          | 1      |
|  |                          |                                 |                                 |                              |                |          |        |
| Part V Endowment Funds. Co   | mplete if the orga       | <u>anızatıon ansv</u>           |                                 | 990, Part IV, line           |                |          |        |
|  | (a) Current year         | (b) Prior year                  | (c) Two years back              | (d) Three years back         | <b>(e)</b> For | ır years | back   |
| 1 a Beginning of year balance  |                          |                                 |                                 |                              |                |          |        |
| <b>b</b> Contributions   | · -                      |                                 |                                 | <del> </del>                 |                |          |        |
| c Net investment earnings, gains,<br>and losses  |                          | İ                               |                                 |                              |                |          |        |
| <b>d</b> Grants or scholarships  |                          |                                 |                                 |                              | <del> </del>   |          |        |
| e Other expenditures for facilities  |                          |                                 |                                 |                              |                |          |        |
| and programs   |                          |                                 |                                 |                              |                |          |        |
| f Administrative expenses  |                          |                                 |                                 |                              | <u> </u>       |          |        |
| g End of year balance  |                          |                                 |                                 |                              | _              |          | _      |
| 2 Provide the estimated percentage   | -                        | nd balance (line                | lg, column (a)) held as         |                              |                |          |        |
| <ul> <li>a Board designated or quasi-endow</li> <li>b Permanent endowment ►</li> </ul> | ment •                   | <del></del> °                   |                                 |                              |                |          |        |
| c Temporarily restricted endowmen  | <del>1</del> ▶           | ٥                               |                                 |                              |                |          |        |
| The percentages in lines 2a, 2b,   |                          |                                 |                                 |                              |                |          |        |
|  | •                        |                                 |                                 |                              |                |          |        |
| 3 a Are there endowment funds not in<br>organization by                                | the possession of th     | e organization the              | at are held and administe       | ered for the                 | Γ,             | Yes      | No     |
| (i) unrelated organizations  |                          |                                 |                                 |                              | 3a(i)          |          |        |
| (ii) related organizations   |                          |                                 |                                 |                              | 3a(ii)         |          |        |
| <b>b</b> If 'Yes' to 3a(II), are the related o   | rganizations listed as   | required on Sche                | edule R?                        |                              | 3b             |          |        |
| 4 Describe in Part XIII the intended   | uses of the organiza     | tion's endowment                | funds                           |                              |                |          |        |
| Part VI Land, Buildings, and   |                          |                                 |                                 | <del>-</del>                 |                |          |        |
| Complete if the organ  | ızatıon answered         | 'Yes' to Form                   | 990, Part IV, line 1            | 1a. See Form 990             | , Part X       | , line   | : 10.  |
| Description of property  |                          | st or other basis<br>nvestment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | <b>(d)</b> Bo  | ook va   | lue    |
| 1 a Land   |                          |                                 | 393,171.                        | ·                            |                | 393,     | ,171.  |
| <b>b</b> Buildings   |                          |                                 | 1,595,346.                      | 344,764.                     | 1,             |          | ,582.  |
| c Leasehold improvements   |                          |                                 | 191,119.                        | 17,262.                      |                |          | ,857.  |
| <b>d</b> Equipment   |                          |                                 | 119,999.                        | 79,396.                      |                |          | ,603.  |
| e Other  |                          |                                 | 18,572.                         | 9,992.                       |                |          | ,580.  |
| Total. Add lines 1a through 1e (Colum  | n (d) must equal Fori    | m 990, Part X, co               | olumn (B), line 10(c) )         | <u>_</u>                     | 1,             |          | ,793.  |

Page 3

| Part VII Investments — Other Securities.  |                                       | N/A                                    |                      |
|---|---------------------------------------|--|----------------------|
| Complete if the organization answered   |                                       | Part IV, line 11b. See Form 990        | 0, 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 | f-year market value  |
| (1) Financial derivatives   |                                       |  |                      |
| (2) Closely-held equity interests   |                                       |  |                      |
| (3) Other   |                                       |  |                      |
| (A)   |                                       |  |                      |
| (B)   |                                       |  |                      |
| (C)   |                                       |  |                      |
| (D)   |                                       |  |                      |
| (E)   | _                                     |  |                      |
| <u>(F)</u>  | <u>-</u> .                            |  |                      |
| (G)   |                                       |  |                      |
| (H)   |                                       |  |                      |
| (I)   |                                       |  |                      |
| Total (Column (b) must equal Form 990, Part X, column (B) line 12)                |                                       | <u> </u>                               |                      |
| Part VIII Investments — Program Related. Complete if the organization answered    | 'Yes' to Form 990                     | N/A Part IV line 11c See Form 99       | Dart Y line 13       |
| (a) Description of investment type  | (b) Book value                        | (c) Method of valuation Cost or end-   |                      |
| <del></del>   | (b) Book Value                        | (c) Welling of Valuation Cost of Cha   | or year market value |
| <u>(1)</u><br>(2)   |                                       |  | <del></del>          |
| (3)   |                                       |  | <del></del>          |
| (4)   |                                       |  | <del></del>          |
| (5)   |                                       |  | <del>.</del>         |
| (6)   |                                       |  |                      |
| (7)   |                                       |  | <del></del>          |
| (8)   |                                       |  |                      |
| (9)   |                                       |  |                      |
| (10)  | -                                     | -                                      |                      |
| Total. (Column (b) must equal Form 990, Part X, column (B) line 13)               |                                       | * ^ .                                  |                      |
| Part IX Other Assets.   | N/A                                   | <u> </u>                               |                      |
| Complete if the organization answered 'Y  |                                       | art IV, line 11d. See Form 990, Pa     |                      |
| (1)   | scription                             |  | (b) Book value       |
| (1)   |                                       | <del> </del>                           |                      |
| (3)   | ····                                  |  |                      |
| (4)   |                                       |  |                      |
| (5)   |                                       |  |                      |
| (6)   |                                       |  |                      |
|   | <del></del>                           |  |                      |
| (8)   | · · · · · · · · · · · · · · · · · · · |  |                      |
| (9)   |                                       |  |                      |
| (10)  |                                       |  |                      |
| Total. (Column (b) must equal Form 990, Part X, column (B                         | ), line 15 )                          |  |                      |
| Part X Other Liabilities.   | 000 Port IV June 11e er               | 11f Con Form 000 Bort V June 25        |                      |
| Complete if the organization answered 'Yes' to Form  (a) Description of liability | (b) Book value                        |  |                      |
| (1) Federal income taxes  | (b) Book Value                        | *. */ * * *                            | *                    |
| (2) DEF. FUNDS-DEBT REDUCTION /CAPITA   | L 751,90                              | 09.                                    |                      |
| (3) ROUNDING  |                                       | 1.                                     | * * 1                |
| (4)   |                                       | <b>4</b> 1 4 4 2 4                     | *                    |
| (5)   |                                       | ) y                                    |                      |
|   |                                       | Ī                                      |                      |
| (6)   |                                       |  | 1                    |
| (7)   |                                       | ş.                                     |                      |
| (7)<br>(8)  |                                       | y ,                                    | * * *                |
| (7)<br>(8)<br>(9)   |                                       | *                                      | * *                  |
| (7)<br>(8)<br>(9)<br>(10)   |                                       |  | * * *                |
| (7)<br>(8)<br>(9)   | ► 751,9°                              | 10                                     | * * *                |

| Schedule D (Form 990) 2013 LAKE MANSFIELD TROUT CLUB   |  | 03-0135990                                 | Page 4      |
|--|--|--|-------------|
| Part XI Reconciliation of Revenue per Audited Financial Statem   | -  | Return. N/A                                |             |
| Complete if the organization answered 'Yes' to Form  | 990, Part IV, line 12a.                                    |  |             |
| 1 Total revenue, gains, and other support per audited financial statements   |  | 1  |             |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12   |  |  |             |
| a Net unrealized gains on investments  | 2 a  |  |             |
| <b>b</b> Donated services and use of facilities  | 2 b  |  |             |
| c Recoveries of prior year grants  | 2 c  |  |             |
| d Other (Describe in Part XIII)  | 2 d  |  |             |
| e Add lines 2a through 2d  |  | 2 e  |             |
| 3 Subtract line 2e from line 1   |  | 3  |             |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1  |  | , y  |             |
| a Investment expenses not included on Form 990, Part VIII, line 7b   | 4 a  |  |             |
| <b>b</b> Other (Describe in Part XIII )  | 4 b  |  |             |
| c Add lines 4a and 4b  | ,  | 4 c  |             |
| 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line  | 12)  | 5  |             |
| Part XII Reconciliation of Expenses per Audited Financial Stater   | ments With Expenses p                                      | er Return. N/A                             |             |
| Complete if the organization answered 'Yes' to Form  | 990, Part IV, line 12a.                                    |  |             |
| Total expenses and losses per audited financial statements   | -  | 1 1  |             |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25   |  | -  |             |
| a Donated services and use of facilities   | 2a   |  |             |
| <b>b</b> Prior year adjustments  | 2 b  |  |             |
| c Other losses   | 2 c  |  |             |
| d Other (Describe in Part XIII )   | 2 d  |  |             |
| e Add lines 2a through 2d  |  | 2 e  |             |
| 3 Subtract line 2e from line 1   |  | 3  |             |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1  | 1 1  |  |             |
| a Investment expenses not included on Form 990, Part VIII, line 7b   | 4 a  | , ,  |             |
| <b>b</b> Other (Describe in Part XIII )  | 4 b  | ,  |             |
| c Add lines 4a and 4b  |  | 4 c  |             |
| 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, lin  | e 18)  | 5  |             |
| Part XIII Supplemental Information.  |  |  |             |
| Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a ai line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Alsi | nd 4, Part IV, lines 1b and 2 ocomplete this part to provi | b, Part V,<br>de any additional informatio | n           |
|  |  |  |             |
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|  |  |  |             |
|  |  |  |             |
| BAA  |  | Schedule <b>D</b> (Forn                    | 1 990) 2013 |

## 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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public

Employer identification number LAKE MANSFIELD TROUT CLUB 03-0135990 FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS DIRECTORS REVIEW FORM 990 AND COMPARE TO IN-HOUSE FINANCIALS TO INSURE RETURN AMOUNTS TIE TO RECONCILED ACCOUNTING REPORTS, AND THAT ALL OTHER INFORMATION IS COMPLETE AND ACCURATE. DIRECTOR PROVIDES COPY TO OFFICERS PRIOR TO SUBMISSION. FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO, TOP MANAGEMENT EXECUTIVE DIRECTOR SALARY IS ANNUALLY REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS. FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE TAX RETURNS, GOVERNING DOCUMENTS, ETC. ARE MADE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST RECEIVED BY THE BOARD OF DIRECTORS