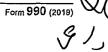


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	•								11	912
	e	ეტტ	Return of O	rganization Exem	nt Fr	om Inc	ome '	Īaγ	QMBNo	or1545=0847
	Form (Rev Janua	7 7U		or 4947(a)(1) of the Internal Rev						110
		of the Treasury	Do not enter so	ocial security numbers on this fo	orm as It	may be ma	de public.	101		to Public
	Internal Rev	enue Service		rs.gov/Form990 for Instructions		latest Infor	mation.	191		ection
			ar year, or tax year beginning		nding	T		D Employ	yer Identification	
r	_	ss change		ersett Country C		Inc.				on number
į	=	change	Number and street (or P.O box	If mail is not delivered to street addre		Room/sulte	CION		23141 one number	
İ	=:		018 Championsh	ip Trail	1		1	(775)	787-180	00
Ī	Hnal re	turn/terminated		country, and ZIP or foreign postal code	 -			<u></u>		
	Amen		eno, NV 89523				1	G Gross r	ecelpts \$3,3	16,124.
Ĺ	Applica			officer Marty Rasmuss		.1<	/		um for subordinates?	==
-				ip Trail Reno, N					nates included?	<u> </u>
<u>!</u>		mpt status:	501(c)(3) X 501(c)(settgolfandcou		(1)-or <u> </u>	527	_		a list (see insiruci on number 🕨	ions)
<u>-</u>			X Corporation Trust	Association Other ▶	L Year	of formation.			State of legal do	nicile NV
		Summary			Î .					
¬ ¯			the organization's mission or		1					
/	2	To prov	<u>ide exceptiona</u>	l Golf & Country	Club	exper	ience	for	member	<u>s.</u>
Activities & Conservation		<u> </u>			1					
	5 2 5 2		► [_] If the organization disc ig members of the governing i	onlinued its operations or disposed			;	els.		274
Ć	3 4			e governing body (Part VININA 16)	1 202	1		4		<u>274</u> 274
و و	3 6		individuals employed in calen	,				. 5		106
¥.	В .		volunteers (estimate if neces					. 6		30
٥	· •		business revenue from Part V					7a		2,145.
_	i d	Vet unrelated bu	usiness taxable income from F	orm 990-T, Ilne 39.	ار <i>کر</i> ایمن	ننزمنا	<u> </u>	7b		<u>8,171.</u>
	1			SHU) //		r Year	-	Curren	
ď			d grants (Part VIII, line 1h)				<u>414,4</u> 660,0			0,464.
Revenue	9 F	-	ı revenue (Part VIII, line 2g) . ne (Part VIII, column (A), line:	3. 4. and 7d)	}	<u> </u>		51.		3,079. 3,069.
Rev	11 0		Part VIII, column (A), lines 5, 6	· · · · · · /	<u>.</u> .		73,7			5,048.
				equal Part VIII, column (A), line 12)		3,1	149,1			2,660.
	13 G	Frants and simila	ar amounts paid (Part IX, colu	mn (A), lines 1-3)	[
	1	•	or for members (Part IX, colun		· · · }					
S	1			its (Part IX, column (A), lines 5-10)	۱۰۰۰ إ	1,6	93,39	96.	1,732	2,207.
Expenses	L		iralsing fees (Part IX, column expenses (Part IX, column (E	• • •	+	100 TO TO THE TO	A. 10 . 12.	88.53 pm	TWO THE STATE	ATRICIA (ET
쭚		_	• • • •	-11d, 11f-24e)			64,24			,397.
_	1			art IX, column (A), line 25)	``` <u>`</u>		57,63		3,302	
			enses. Subtract line 18 from		[08,47			,944.
G of					E	Beginning of	Current \	rear	End of Y	ear
t Assets or nd Balances	20 To	olal assets (Part	·		· ·		84,39		4,480	
Net A		•	art X, line 26)		·		<u>50,03</u>		1,098	
_		Signature E		om line 20		3,3	34,36	11.	3,382	,400.
				eturn, Including accompanying schedu	ites and sl	latements, and	to the best	of my know	wledge and beli	ef, it Is
			\sim	officer) is based on all information of				1		
	•	11/1/11/11	in Kasmus	se				7/9/	2020	
Si	-	Signature of offi	4 .)				Date '	, , ,		
He	re 🕨	Marty F		esident						_
_	1.1		proparer's name	Preparer's signature		Date		haak	If PTIN	
Pa			p p					heck elf-employe	" 1	
	eparer e Only	Firm's name	>				Firm's El		<u> </u>	
US	Comy	Firm's address	>				Phone no			
							1			
May	he IRS d	liscuss this retu	rn with the preparer shown at	ove? (see instructions)					Yes	No

20



	n 990 (2019) Somersett Country Club, Inc.	27-3423141 Page
Pa	Statement of Program Service Accomplishments	
	Check If Schedule O contains a response or note to any line in this Part III	····
1		
	To provide exceptional Golf & Country Club experience	ce to our members,
	their families & guests in an environment that encountries that encountries that encountries that encountries their families are guests in an environment that encountries their families are guests in an environment that encountries their families are guests in an environment that encountries the same are guests in an environment that encountries the same are guests in an environment that encountries the same are guests in an environment that encountries the same are guests in an environment that encountries the same are guests in an environment that encountries the same are guests in an environment that encountries the same are guests in an environment that encountries the same are guests in an environment that encountries the same are guests in an environment that encountries the same are guests in an environment that encountries the same are guests in an environment that encountries the same are guests in an environment that encountries the same are guests in a guest that encountries the same are guest that encountries the same are guest to be a guest that encountries the same are guest to be a guest that encountries the same are guest to be a	urages formation
	of enduring friendships by offering services, facil:	ities and quality.
2	Did the organization undertake any significant program services during the year which were not listed on the	
4	prior Form 990 or 990-EZ?	□ v 151 n-
	If "Yes," describe these new services on Schedule O	· · · · · · · · · Yes 🗓 No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?, p. sg.c	Yes 🔀 No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services,	as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and alloc	•
	the total expenses, and revenue, if any, for each program service reported.	
	(Code) (Expenses \$1,479,711. Including grants of \$) (Revenue)	869,282.)
<u>.</u>	Golf Course Operations & Maintenance	
_		
_		
-		
_		
~		
_		
-		
_		
(h //	(Code) \ (Cyanges 0 076 200 Including searle (0	000 170
•	(Code:) (Expenses \$ 976,208. including grants of \$) (Revenue Food & Beverage Operations	\$980,179.)
<u></u>	rood a beverage operacions	
_		
_		
_		
_		
_		
_		*
; (C	Code: (Expenses \$ 865,659. including grants of \$) (Revenue s	1,455,663.)
Μe	emberships and Admin	
_		
_		
	ner program services (Describe on Schedule O.)	
	penses \$ including grants of \$) (Revenue \$)
Tola	al program service expenses	3,321,578.



Form 990 (2019) Somersett Country Club, Inc. 27-3423141 Page 3 Checklist of Required Schedules Yes Νo is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 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 98-197 If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes." complete Schedule D. Part I. X A 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. Х 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X 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 Х Did the organization, directly or through a related organization, hold assets in donor-restricted endowments х 10 11 If the organization's answer to any of the following questions is 'Yes," then complete Schedule D, Parts VI, Did the organization report an amount for land, buildings, and equipment in Part X, line 107 if "Yes," complete Schedule D, Part VI х 11a Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more X 11b c Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more X d Dld the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets х 11d Х 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Part X. X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII. X 12a 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 X 12b 13 Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E . . 13 X X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundralsing, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other X 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) Х Did the organization report more than \$15,000 total of fundralsing event gross income and contributions on 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 20a Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

domestic government on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II

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Form 990 (2019)

22 23 24 a b	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	. [-	22	Yes
23 24 a	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	. [22	_
24 a	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	. [22	
24 a	organization's current and former officers, directors, trustees, key employees, and highest compensated			L
b		- 1		
b	employees? If "Yes," complete Schedule J	}		
b		· <u>L</u>	23	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	- 1		- 1
	\$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	\dashv
¢		-	24b	
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	-		- 1
	to defease any lax-exempt bonds?		24c	
d or -	,	· -	24d	
25 a		1.		- 1
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	·	25a	
D.	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	1,	25b	
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	` '	.001	十
,,,	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	-	- (
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	. 2	6	:
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or	` -	_	- -
	founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity		1	-
	(including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	. 2	7	_
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	357	海际	ונ בו
	Part IV Instructions, for applicable filing thresholds, conditions, and exceptions):	7.5		
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?			Ϊ,
	If "Yes," complete Schedule L, Part IV	_ 28	Ва	
	A family member of any Individual described in line 28a? If "Yes," complete Schedule L, Part IV	28	3b	_ 2
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?	1	1	-
	lf "Yes," complete Schedule L, Part IV	28	ic	_ 2
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Ч.	×
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			1
	conservation contributions? If "Yes," complete Schedule M	30		<u> </u>
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	↓—	X
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N,	1	1	١.,
	Part II	32	+	X
	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		ł	١,,
	Vas the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33	+-	X
	or IV, and Part V, line 1	34		x
	old the organization have a controlled entity within the meaning of section 512(b)(13)?	35	_	X
	"Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	-00	`	+
	ontrolled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	351	,	
	ection 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		1	+-
	elated organization? If "Yes,", complete Schedule R, Part V, line 2	36	1	1
D	ld the organization conduct more than 5% of its activities through an entity that is not a related organization		t	\top
a	nd that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			1
P	art VI	37	İ	x
D	id the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		Γ	
	37 Note: All Form 990 filers are required to complete Schedule O.	38	х	<u> </u>
art.	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			\Box
	1 1	3 00000	Yes	No
	nter the number reported in Box 3 of Form 1096. Enter -D- if not applicable	1		対が
	nter the number of Forms W-2G included in line 1a Enter -0- If not applicable			

R	Statements Regarding Other IRS Filings and Tax Compliance (continued)	_ <u>_</u> _		- <u></u>	
	Estado analas de malas a manda de Estado A Tarrendad de Carrendad de C		िस्ट	Yes	No No
2		٠.			125
	Statements, filed for the calendar year ending with or within the year covered by this return		<u>6</u>		25.00
				X	127c ±
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			35.	25.
3				X	<u> </u>
1	b If "Yes," has It filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b	X	<u> </u>
4 :	, , , , , , , , , , , , , , , , , , , ,		1		1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		1	ĺ	1
	account)?		4a		X
ŀ			20%		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			100	4
Б а			5а		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction?		5b		X
C	ff "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			1	
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a	}	Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or				
	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).		44	100	, r
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			3 3	33
	and services provided to the payor?	!	7a	7.	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	!	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	required to file Form 8282?	[7c	- 1	
d	If "Yes," Indicate the number of Forms 8282 filed during the year	a		6 (37) {	1764
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		70	2715	7 . 254.1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	- F	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		—
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		—
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		3344	(A) (4)	2- 5
•	sponsoring organization have excess business holdings at any time during the year?	- 1	8	LoTarin , A	و مخری پتم
9	Sponsoring organizations maintaining donor advised funds.	· · ·		*X 7	(F. 25
а	Did the sponsoring organization make any taxable distributions under section 4966?	1	9a	1 1/2 To 1	البادية
ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	`` ` -	9b		—
0	Section 501(c)(7) organizations. Enter:		35.5	5 KH 22	1200
a	Initiation fees and capital contributions included on Part VIII, line 12		130		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	}	文制:		
1	Section 501(c)(12) organizations. Enter:	 [₹			33
	Gross Income from members or shareholders	1	總民		
a	Gross Income from other sources (Do not net amounts due or pald to other sources	— }	4 5		
b		1 2			
٠.	against amounts due or received from them.)				7.31
	, , , , , , , , , , , , , , , , , , , ,	_	12a ○}\\ \\$	F1 30 32	<u> </u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	\$	學情		
	Section 501(c)(29) qualified nonprofit health insurance issuers.	3	न्तिक न्द	- 1 4	-3
	Is the organization licensed to issue qualified health plans in more than one state?	· [-]	3a	120 620	17.49
	Note: See the Instructions for additional information the organization must report on Schedule O.	7	訓令	f(z)	誤
	Enter the amount of reserves the organization is required to maintain by the states in which	1			剧
	the organization is licensed to issue qualified health plans	— 豫		氯氮	3
	Enler the amount of reserves on hand	— ₹ *.	47 76	國民	11
	Did the organization receive any payments for indoor tanning services during the tax year?		4a	- - 2	<u>c</u>
	f "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	· [1	4b	\dashv	—
	s the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration			1	
	or excess parachule payment(s) during the year?	. 1		F 250 150	7. 7
	f "Yes," see Instructions and file Form 4720, Schedule N.	1	:\$E \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$ \\ \frac{1}{2} \rightarrow \\ \fracolon \\ \frac{1}{2} \rightarrow \\ \frac{1} \rightarrow \\ \fraco	44
1:	s the organization an educational institution subject to the section 4968 excise tax on net investment income?	. 11	6	- 1	

16

If "Yes," complete Form 4720, Schedule O.

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15

Form 990 (2019) Somersett Country Club, Inc.		3423:	141	Page
Ranky Governance, Management, and Disclosure For each "Yes" response to lines 2 through				
response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedu				
Check If Schedule O contains a response or note to any line in this Part VI	· · · · · · · · · · · · · · · · · · ·		<u> </u>	. X
Section A. Governing Body and Management				
			Yes	No
1 a Enter the number of voling members of the governing body at the end of the tax year	1a 2'	74 建	1.5	1
If there are material differences in voting rights among members of the governing body, or		3	13	
If the governing body delegated broad authority to an executive committee or similar	•		$X^{\mathcal{S}}$	
committee, explain on Schedule O.			10	1
b Enter the number of voting members included on line 1a, above, who are independent	1b 27	4		14. V
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		188	0.45	1
any other officer, director, trustee, or key employee?		. 2		x
3 Did the organization delegate control over management duties customarily performed by or under the direct				
supervision of officers, directors, trustees, or key employees to a management company or other person?		. З		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was	filed?	. 4		Х
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		. 5		x
6 Did the organization have members or stockholders?.			х	
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?		7a	x	
b Are any governance decisions of the organization reserved to (or subject to approval by) members,		,"		
stockholders, or persons other than the governing body?		7b	x	
Did the organization contemporaneously document the meetings held or written actions undertaken during		10.34	74350	- J.
the year by the following:			5.34	
a The governing body?			X	7, 3,
b Each committee with authority to act on behalf of the governing body?			$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$	—
9 Is there any officer, director, trustee, or key employee listed in Pert VII, Section A, who cannot be reached at		d8	^	
the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		1.1		37
ection B. Policies (This Section B requests information about policies not required by the Internal Revenue		9		x
affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before fill be Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give bid the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?. Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision at The organization's CEO, Executive Director, or top management official. Dither officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	rise to conflicts?	12a 12b 12c 13 14 15a 15b	X X X	X
participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	<u>,</u>	16b		
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 (1024 or 1024-A, if applicable), 990, and 990-T ((Section 501(c)(3)s o	nly)		
available for public inspection indicate how you made these available. Check all that apply.				
Own websile Another's website Upon request Other (explain on Schedule O)				
Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of inte	erest policy, and			
financial statements available to the public during the tax year.	· •·			
State the name, address, and telephone number of the person who possesses the organization's books and reco	ords > (775) 7	87-1	800	

Form 990 (2019) Somersett Country	Club,_	Inc.		27	-3423141 Page 7
Paravil Compensation of Officers, Di	rectors, T	rustees, Key Employe	ees, Highest	Compensate	d Employees, and
Independent Contractors					
Check if Schedule O contains a res	ponse or n	ote to any line In this Par	t VII	<u> </u>	<u> </u>
Section A. Officers, Directors, Trustees	s, Key Em	ployees, and Highest	Compensa	led Employee	S
1a Complete this table for all persons required organization's tax year.	to be lister	d. Report compensation f	or the calenda	r year ending wl	th or within the
 List all of the organization's current offic 	ers, directo	rs, trustees (whether indi	viduals or orga	anizations), rega	rdless of amount of
compensation. Enter -0- in columns (D), (E), a				,. •	
 List all of the organization's current key 			or definition of	"key employee."	n
 List the organization's five current higher 					
who received reportable compensation (Box 5					
organization and any related organizations.			•	•	,
• List all of the organization's former office	rs, key em	ployees, and highest com	pensated emp	olovees who rece	eived more than
\$100,000 of reportable compensation from the				,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
 List all of the organization's former direc 				a former director	or trustee of the
organization, more than \$10,000 of reportable of					
See instructions for the order In which to list the	-	-	and any rotate	a organizacióno	
sea fristructions for the order in which to hat the	persons a	bove.			
Check this box if neither the organization r	or any rela	ted organization compen	sated any curr	ent officer, direc	tor, or trustee.
		(C)		i	
(A)	(B)	Position	(D)	(E)	(F)
Name and Illie	Average	(do not check more than one	Reportable	Reportable	Esilmaled
	hours per	box, unless person is both an	compensation	compensation from	amount of
	week (list any	officer and a director/trustee)	from	related	olher

		1		((C)			ļ	1	
(A)	(B)	ł		Ро	sition	1		(D)	(E)	(F)
Name and Illie	Average	(do i	not cl	heck	c mor	e than e	enc	Reportable	Reportable	Estimated
	hours per	box,	unle	ss p	ersor	ı is boli	n an	compensation	compensation from	amount of
	week (list an	OUIC				lor/trus		from the	related organizations	olher compensation
	related	or director	3.	Officer	<u>§</u>	em H _i g	Former	organization	(W-2/1099-MISC)	from the
	organization	티콜롤	Institutional trustee	8	Key employee	를 를	Ħ	(W-2/1099-MISC)	1 '	organization
	below dotted	비학류	ם	1	B	8 8	ľ			and related
	l ille)	uste	Ĕ	ł	9	튫	1			organizatons
		1 6	řee			Highest compensated employee				
		İ				l ä	ll		1	ı
	 		\sqcup		Щ		\square			
(1) Marty Rassmussen	ļ								1	
President	-	_	\sqcup	X	Ш		\dashv			
(2) Brett Charbonneau									[
Vice President	-	\square	1	X	\sqcup]	_			
(3) Joe Strout									}	
Treasurer				Х	\sqcup		4			
(4) Brandon Games		ĺ	- }	. 1	1	- 1	- 1		1	
Secretary	<u> </u>		_{	X		-	4			
(5) Larry Gilliland	ļi			I					l	
Director		X	_	_			4			<u>.</u>
(6) John Sande IV						- 1				
Director		X	_		_		_			
(7) Patty Engelen		[1	-		ĺ	
Director		x	4	\dashv	_		4			
(8) Robert DiPietro	40.00	ł		J						
Director of Maintenace			-	-	X		_[1	.06,357.		
(9) Stuart Smith	40.00	ĺ		- [
Director of Golf	<u> </u>	-	+	-4	x		- -	92,552.		
(10)		- 1		-		ŀ	-	ŀ		
			+	+	+		4-			
(11)		- 1		- [- 1		ľ		
		-		+	+		4.			
(12)		ł		- [i i		
(40)			+	+-	+	-	+-			
(13)				1	Ì			1	1	
744)		\dashv	+	+	-	-+	+-			
(14)		- 1								

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (conlinued)

27-3423141 Page 8

Form 990 (2019) Somersett Country Club, Inc.

Į.	art	VIII Statement of Revenue					-
		Check if Schedule O contains a response or n	ole to any line in t	his Part VIII .			. , ,
	が変え			(A) Total revenue	(B) Related or exemp function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under secilons 512-514
<u> </u>	र्छ	1a Federated campaigns 1a	a	工業等工業を	建 电影響		建設的
īg	5	b Membership dues	1,450,464		3 200		
ທ່	Ę	c Fundralsing events 1c					
3:1:	Ē	d Related organizations 1c	1				
5,	Ē	e Government grants (contributions) 1e					1776
Ęį	2	f All other contributions, gifts, grants,			到等等逐渐发		
ď	흵	and similar amounts not included above . 1f				12.2	
Contributions, Giffs, Grants	and Other Similar Amounts	g Noncash contributions included in lines 1a-1f 1g			经 经交流系统		
<u> </u>	<u>8</u>	h Total. Add lines 1a-1f	<u>, , ▶</u>	1,450,464		SHELL	
9	:		Business Code		The second second second	THE REAL PROPERTY.	第二种 列巴黎
9		2a Golf Operations	713910	651,054	. 401,473		
Ď.		b Food & Beverage	713910	962,025	834,522	127,503.	<u> </u>
Ę.		C					
Š		d		 			ļ
Program Service Revenue	,	0	<u> </u>	 	 	 	
ě		f All other program service revenue		7 610 070	THE STATE OF THE S	A CONTROL OF THE PARTY OF THE PARTY.	おみのでもはまれて、143と47年で刊
	+	g Total. Add lines 2a-2f		1,613,079	A Same Same Same	登場には必要はま	ALCOHOLD TO THE PARTY OF
	- -	3 Investment income (including dividends, interest,	h.	2,069		2 060	•
	1.	and other similar amounts)		2,009	4	2,069.	
	- 1				+		
	- ['	5 Royaltles	(II) Personal	SEA 100 COM	A LANGE CHE SAN	34. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18	不到李老子就是是不知识。
	۱,	Sa Gross rents 6a	(1)/1 61801741				
	1	b Less, rental expenses 6b			从名字是		
		c Rental income or (loss) 6c					在李泽东
	ı	d Net rental income or (loss)		12	11-14-2-1-1-1	ASTRO SIPES STREET	ABSOLUTION STATE OF THE STATE O
	7	a Gross amount from sales of (i) Securities	(II) Other		學是的學學學	SEE VEE S	建筑建筑建筑
	1	assets other than inventory 7a	11,000.				
	1	b Less, cost or other basis					
	1	and sales expenses . 7b					
	1	c Gain or (loss) 7c	11,000.	主的中央数		国际工程	The second second
		d Net gain or (loss)	<u></u>	11,000.	<u> </u>	11,000.	
d)		11	j	经验证证			
กนล	8	a Gross income from fundralsing					
e Ke		events (not including \$			32.4		
er F	1	of contributions reported on line 1c).					
Other Revenue	1	See Part IV, Ilne 18					
•		Less: direct expenses	—	12 13 W W. W. 21	100 V 100 V	35 To S. W. S. C. S.	
	,	Net income or (loss) from fundralsing events		e element	The state of the s	in Significant State of the	देखी क्रम्स पर्वत्रभूति हुन क्रांक्स
	9a	Gross Income from gaming activities					
	١.	See Part IV, line 19 9a					
		Less' direct expenses 9b		\$1.075348-4.04894945894	是1945年 金 州中国	grander of the party of the par	新文化的第一次的
		Net Income or (loss) from gaming activities Gross sales of Inventory, less	· · · · · · ·	3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	\$357.55.05 ×	AND SECTION OF THE	1855 F. C. C. C. C. C. C. C. C. C. C. C. C. C.
	IUa		232,377.		第二条道案		
.	h		163,464.			经设置	
Ì		Net Income or (loss) from sales inventory		68,913.	102,756.	1,992.	handed a new things
			Business Code	2040-45-55		455 and 15 (5)	NET THE PARTY OF T
sp al	11a						
ě ž	b						
Miscellaneous Revenue	С						
<u> </u>	d	All other revenue	L3910	7,135.	7,135.		
	0	Total. Add lines 11a-11d		7,135.	SHOW SHOW I		
	2	Total revenue. See Instructions	▶ 3	,152,660. 1	1,345,886.	392,145.	
1 IVA							Earth 990 (2010)

Section 501(c)(3) and 501(c)(4) organizations must complete	all columns All other org	anizations must compl ,	ete column (A).	
Check if Schedule O contains a response or not	e to any line in this Part I)	(B)	(c)	
Do not include amounts reported on lines 6b, 7b, 8b, 9b,	(A) Total expenses	Program service	Management and	(D) Fundralsing
and 10b of Part VIII.		expenses	general expenses	expenses
1 Grants and other assistance to domestic organizations	j			
and domestic governments. See Part IV, line 21	• •		CALL AND SOLD STREET	60 T2260 2 6 12 12 12 12 12 12 12 12 12 12 12 12 12
2 Grants and other assistance to domestic	1		200	
Individuals See Part IV, line 22	·			
3 Grants and other assistance to foreign organizations,				
foreign governments, and foreign individuals. See Part I	v.			
lines 15 and 16		- 	20 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	The second second second
4 Benefits paid to or for members	• •		· · · · · · · · · · · · · · · · · · ·	第一部 等的企業的
6 Compensation of current officers, directors, trustees,				
	215,112	2.		
6 Compensation not included above to disqualified persons	3			1
(as defined under section 4958(f)(1)) and persons		1	1	[
described in section 4958(c)(3)(B)				
7 Other salaries and wages		<u>'.</u>		
8 Pension plan accruals and contributions (include section		}	}	1
401(k) and 403(b) employer contributions)				<u> </u>
9 Other employee benefits				
10 Payroll faxes	186,263			
11 Fees for services (nonemployees):				
a Management				<u> </u>
b Legal	6,586	•		
c Accounting				
d Lobbying				
e Professional fundralsing services. See Part IV, line 17		建筑过程	135000000000000000000000000000000000000	
f Investment management fees				Ţ
g Other. (If line 11g amount exceeds 10% of line 25, column				
(A) amount, list line 11g expenses on Schedule O.)				ļ
2 Advertising and promotion				
3 Office expenses	. 127,615.			
4 Information technology			<u> </u>	
6 Royaltles		†	<u> </u>	
6 Occupancy		<u> </u>		
7 Travel		 -		
Payments of travel or entertainment expenses for any		 	 	
federal, state, or local public officials	1			
Conferences, conventions, and meetings		 	 	
Interest				
Payments to affiliates				
Depreciation, depletion, and amortization	194.890.		ļ	
Insurance	70,215.	 -	<u> </u>	
Other expenses, Itemize expenses not covered above	THE REPORT OF THE REAL	E THE STEET SHIPE THE	120-07 3,17-44-3-38-35	factories at the
(List miscellaneous expenses on line 24e If fine 24e amour		是經過經濟學		
•			· · · · · · · · · · · · · · · · · · ·	
exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	No. of the second	元 法一种的	表示表现的	
·	375,172.	14-2-50, 47, 19,603, 1 47, 40,27, 17,	2724 8 4 4 7 2 1 - 2 6 2 4 4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	magazine with the warner
Food & Beverage COS				
Golf Course Maintenance	183,267. 81,883.			
Credit Card & Bank Fees		 -		
Equipment Lease	60,789.			·
All other expenses	210,901.	-		
Total functional expenses, Add lines 1 through 24e	3,302,604.			
Joint costs. Complete this line only if the organization	}		1	
reported in column (B) joint costs from a combined	1			
educational campaign and fundralsing solicitation. Check	Į [1	
here ▶ If following SOP 98-2 (ASC 958-720)				Form 990 (201

		Check If Schedule O contains a response or note to any line in this Part X	· · · · · · · · · · · · · · · · · · ·		<u>. ,</u>
	T		(A) Beginning of year		(B) End of year
	+-	Cash — non-interest-bearing	31,866	. 1	+
	- 1			_	
	2				-
	3			3	0.00 4.05
	1 4		231,803	4	269,465
	5	• • • • • • • • • • • • • • • • • • • •		1.6	"学"。然后
		trustee, key employee, creator or founder, substantial contributor, or 35%	与一种工作的现在 。	3,74	E TOTAL STATES SELECTION
	}	controlled entity or family member of any of these persons	n = 5 = 5 = 5 = 1 = 1 = 5 = 5	5	\$ 460.54 167 405 Mill to 200
					10000000000000000000000000000000000000
				20	
Ø	6	• • • • • • • • • • • • • • • • • • • •	SECTION OF THE SECTION	2573	TELESTES E
Assets	1	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	<u> </u>	6	
ÿ	7		<u></u>	7	<u> </u>
`	8	inventories for sale or use	77,359.	8	71,685.
	9	Prepald expenses and deferred charges	9,675.	9	20,051.
	10	a Land, buildings, and equipment, cost or	第一条	33	
	}	other basis. Complete Part VI of Schedule D 10a 6 , 135 , 524 .	PASSES AND THE	25.	"这样就是的解决"
		b Less: accumulated depreciation	<u>4,133,205.</u>	10c	4,031,916.
	11	investments — publicly traded securities		11	
	12	Investments — other securities. See Part IV, line 11]	12	
	13	Investments — program-related See Part IV, line 11		13	<u> </u>
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	4,584,393.	16	4,480,671.
T	17	Accounts payable and accrued expenses	198,018.	17	204,511.
	18	Grants payable		18	
- [19	Deferred revenue	170,915.	19	218,238.
١	20	Tax-exempt bond liabilities		20	
- Incoming	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or	公司是国家国家	28	亚洲东西
3		founder, substantial contributor, or 35% controlled entity or family member of any of these persons	S 2 2015121 1224	22	Tar 10 1 tables 11 - 41 13
j	23	Secured mortgages and notes payable to unrelated third parties	681,099.	23	675,522.
	24	Unsecured notes and loans payable to unrelated third parties		24	<u> </u>
- 1			建建筑和大学		A CHARLES TO THE STATE OF THE S
Ι.		not included on lines 17-24). Complete Part X of Schedule D	والمنظمة المنافية المنافعات	25	81.2017.000.000.000.000.000.000.000.000.000.
١,		Total liabilities. Add lines 17 through 25	050 032	26	1,098,271.
_		Organizations that follow FASB ASC 968, check here	1 38 W 2 4 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	-7i-	12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2 2		and complete lines 27, 28, 32, and 33.	7 高温学习	100	
1,			3,534,361.	27	3,382,400.
1			3,334,361.		3,302,200.
1	8	Net assets with donor restrictions	ſ	28	
		Organizations that do not follow FASB ASC 958, check here	SECTED TO SECURITION OF THE	3A73	
1		and complete lines 29 through 33.	经营业的		
1		Capital stock or trust principal, or current funds			(2年1) (45年) 48年27年41
2		· · · · · · · · · · · · · · · · · · ·		29	
3		Pald-in or capital surplus, or land, building, or equipment fund		30	2 200 400
3				31	3,382,400.
3:				32	3,382,400.
3:	3 7	Fotal liabilities and net assets/fund balances	,584,393.	33	4,480,671.

orm 9	Domerbeed Country Crab, Inc.	27-34	772T#T	
	Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI		. <u></u> .	
1	Total revenue (must equal Part VIII, column (A), line 12)		3,152	
2	Total expenses (must equal Part IX, column (A), line 25)		3,302	, 60
3	Revenue less expenses. Subtract line 2 from line 1		-149	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		3,534	,36
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain on Schedule O)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))		3,384	41
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		Ye	s I
2 a	Accounting method used to prepare the Form 990:			S CONTRACTOR OF THE SECOND
2 a	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?			B (
2 a	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a se			B 3
2a	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	をなって まっていたが
2a b	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?	eparale	2a	はないできます。
2 a b	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a sebasis, consolidated basis, or both: Separate basis	eparale	2a	はないできます。
2 a b	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?	eparale	2a	はないできます。
2a b	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a sebasis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?	eparale	2a	Secretary Secretary
2a b	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a set basis, consolidated basis, or both: Separate basis	eparale	2a 2b	はないできます。
2a b c c 1 3	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?	eparale	2a 2b	B 3
2a b c c 1 3	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?	eparale	2a 2b	はないできます。
2a b c l 3	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?	eparale	2a 2b	HOST CONTROL WOODS AND THE PROPERTY OF THE PRO
2a b c	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant?	eparale	2a 2b 2c 2c	Secretary Secretary

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements > Complete If the organization answered "Yes" to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

OMB No. 1545-0047

	nal Revenue Service	▶ Go to www.irs.gov/For	m990 for Instructions and the I		
Name	e of the organization			Empi	oyer identification number
Son	mersett Co	untry Club, Inc.		27	-3423141 '
Pa		ations Maintaining Donor Adv			or Accounts.
	Complet	e if the organization answered "	Yes" on Form 990, Part IV	', line 6.	
			(a) Donor advised fund	s	(b) Funds and other accounts
1	Total number at e	end of year			
2	Aggregate value of	of contributions to (during year)			
3	Aggregale value o	of grants from (during year)			
4	Aggregate value a	at end of year			
5		on inform all donors and donor advisors in	writing that the assets held in don	or advised funds	are the organization's
	property, subject t	io the organization's exclusive legal contro	<i>?</i>		🔲 Yes 🔲 No
6	Did the organization	on inform all granlees, donors, and donor	advisors in writing that grant funds	can be used on	y for charilable
	purposes and not	for the benefit of the donor or donor advis	or, or for any other purpose confer	ring impermissib	le
		<u> </u>		<u> </u>	Yes No
Par		ation Easements.			
	Complete	e if the organization answered "\	<u>′es" on Form 990, Part IV,</u>	line 7.	
1	Purpose(s) of con-	servation easements held by the organizat	ion (check all that apply)		
	Preservation o	f land for public use (for example, recreat	on or education) 🔲 Preservi	ation of historical	ly Important land area
	Protection of n	atural habitat	Preserva	ation of a certifie	d historic structure
	Preservation o	- •			
2	Complete lines 2a	through 2d if the organization held a quali	led conservation contribution in the	e form of a cons	
	of the tax year.				Held at the End of the Tax Year
а			• • • • • • • • • • • • • • • • • • • •		
b	_	Icled by conservation easements			2b
C		ration easements on a certified historic str	, ,		2c
d	Number of conserv	ation easements included in (c) acquired	after 7/25/08, and not on a historic	structure	i i
		al Register			2d
3		allon easements modified, transferred, rel	eased, extinguished, or terminated	l by the	
		the tax year ▶			
4		here property subject to conservation eas			
5		on have a written policy regarding the perl			
		the conservation easements it holds?			
6		hours devoted to monitoring, inspecting, h	andling of violations, and enforcing	g conservation ea	sements during the year
_	<u> </u>		Lander de la companya de la companya de la companya de la companya de la companya de la companya de la companya		
		incurred in monitoring, inspecting, handi	ing of violations, and enforcing con	nservation easem	ents during the year
	<u></u> \$			4	
		ilion easement reported on line 2(d) above			
		(B)(II)?			
		how the organization reports conservation		•	
	inciude, il applicable, conservalion easeme	, the text of the footnote to the organization	is illiancial statements that descri	ibes the organiza	lion's accounting for
ārt I		ons Maintaining Collections	of Art Historical Treasure	os or Other	Similar Assets
<u> altell</u>		f the organization answered "Ye			Silliai Assets.
					abast wasta
		ected, as permitted under FASB ASC 958	•		
	•	ures, or other similar assets held for publicate to its financial			or public
	• •	art XIII the text of the footnole to its financi scled, as permitted under FASB ASC 958			ant works of
	•	icled, as permitted under PASB ASC 930 es, or other similar assets held for public 6	· ·		
	•		minimum, education, or research if	i iditile di le	Judnic sei vica,
	-	emounts relating to these items;			•
		d on Form 990, Part VIII, line 1			
		n Form 990, Part X			
	•			anciai gain, provi	ие ин топомиу антоилтs
		d under FASB ASC 958 relating to these Form 990, Part VIII, line 1			e
					\$
Paper	work Reduction Act N	rm 990, Part X		<u>></u>	Schedule D (Form 990) 2019
. проп		• • • • • • • • • • • • • • • • • • • •			

Sch	nedule D (Form 990) 2019 Somersett artill Organizations Maintainin	Country	Club,	Inc.	LTroppe	1705 Or 1		-3423141	Page
3									
	a Public exhibition				n or exchar				
	b Scholarly research			e L Oth	er				
	c Preservation for future generations								
4	Provide a description of the organization's	collections and exp	olain how th	ey further th	e organizal	ion's exem	pt purpose in Part	XIII	
5	During the year, did the organization solici rather than to be maintained as part of the								□No
Pa	art IV Escrow and Custodial Ari	angements.							
	Complete if the organization 990, Part X, line 21.	n answered "Ye	es" on Fo	orm 990,	Part IV, I	ine 9, or	reported an a	mount on Fo	ım
1		dlan or other Intern	nedlary for o	ontributions	or other as	sets not in	cluded		
	on Form 990, Part X?							Tyes	Пνο
ŀ	b If "Yes," explain the arrangement in Part XIII and complete the following table:								
							An	nount	
c	Beginning balance					1	С		
d							d		
е	Distributions during the year					1	e		
f	Ending balance					11	f		
2a	Did the organization include an amount on i	Form 990, Part X, II	ne 21, for e	scrow or cu	stodial acce	ount llability	/7	Yes	No
b	If "Yes," explain the arrangement in Part XII	I. Check here if the	explanation	n has been p	orovided on	Part XIII		[5
Par	t V Endowment Funds.								
	Complete if the organization	answered "Ye	s" on Fo	rm 990, F	art IV, Iii	ne 10.			
		(a) Current year		Prior year		years back	(d) Three years ba	ck (e) Four yea	rs back
1a	Beginning of year balance				 		···		
b	Contributions							- 	
C	Net Investment earnings, gains, and		_		<u> </u>		<u> </u>	 	
٠	losses		1		İ				
d	Grants or scholarships		1						
	Other expenditures for facilities and		+		 			 	
е	•		1			ĺ			
	programs								
f	Administrative expenses							 	
g					L			<u> </u>	
2	Provide the estimated percentage of the curr			column (a))	neid as				
а	Board designated or quasi-endowment	-							
b	Permanent endowment >% Term endowment >%								
С									
_	The percentages on lines 2a, 2b, and 2c sho	•	-0 15-1 -						
За	Are there endowment funds not in the posses	ision of the organiz	alion that a	re held and a	administere	d for the		<u> </u>	· · ·
	organization by:							Yes	No
	17					• • • • •		. 3a(i)	
	(II) Related organizations							. 3a(II)	
	If "Yes" on line 3a(il), are the related organization							. 3b	
4 Zafri	Describe in Part XIII the Intended uses of the VI: Land, Buildings, and Equip	ment.						·	
	Complete if the organization a			<u>1 990, Pa</u>	<u>rt IV, line</u>	e 11a. Se	e Form 990, i	Part X, line 1	0.
	Description of property	(a) Cost or oth (Investm		(b) Costoro (oth		, , ,	cumulated reclation	(d) Book value	
 1а	Land	333	3,229.			HANGE A		333,2	29.
	Buildings		806.				63,733.	3,253,0	
	Leasehold improvements		.,720.				17,323.	184,3	
	Equipment	7 500					74,501.	257,60	
	Other		,600.				48,051.	3,54	
	dd lines 1a through 1e. (Column (d) must equ						-0,001,		
	dd lines 1a through 1e. <i>(Column (a) musi eau</i>	ai Pomii 990. Pan 7	K, ÇOIUMN II	3), line 10c l)		▶ [4,031,93	16

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Schedule D (Form 990) 2019

Sched	ule D (Form 990) 2019 Somersett Country Club, Inc.		27-3423141 Page 4
	Reconciliation of Revenue per Audited Financial Statem	ents With Revenue per	
Page 22-02	Complete if the organization answered "Yes" on Form 990, F		
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		The state of the s
a	Net unrealized gains (losses) on investments	2a	[Det 5]
b	Donaled services and use of facilities	2b	1222
c	Recoveries of prior year grants		
ď	Other (Describe In Part XIII.)		
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		9
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	11	I Signatura
a	Investment expenses not included on Form 990, Part VIII, line 7b.	48	
b	Other (Describe in Part XIII.)	4b	
C	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12).		5
Part			
A BOLL	Complete if the organization answered "Yes" on Form 990, P.		i Netuin.
	Total expenses and losses per audited financial statements		
1	Amounts Included on line 1 but not on Form 990, Part IX, line 25.		1 4-75
2	Donated services and use of facilities	أاما	10 - 70 - 10 - 10 - 10 - 10 - 10 - 10 -
a			
b	Prior year adjustments	2b	
C	Other losses		
	Other (Describe in Part XIII.)		36
	Add lines 2a through 2d	F	<u> 2e</u>
	Subtract line 2e from line 1	· · i · · · · · · · · · · · · · · · · ·	3
	Amounts Included on Form 990, Part IX, Ilne 25, but not on line 1.		
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
	Other (Describe in Part XIII.).....................		
	Add lines 4a and 4b	h	4c
	Total expenses. Add lines 3 and 4c.(This must equal Form 990, Part I, line 18.)	<u></u>	5
	Supplemental Information.		
	he descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line		X, line 2;
Part XI, II	nes 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	itional information.	
			
			· · · · · · · · · · · · · · · · · · ·
			
			<u>. </u>
			

Schedule D (Form 990) 2019

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Schedule D (Form 990) 2019 Somersett Country Supplemental Information (continued)	Club,	Inc.	27-3423141 Page 5
PantxIII	Supplemental Information (continued)			
				
				
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Schedule D (Form 990) 2019

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No. 1545-0047 **2019**

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

Name of the organization	Employer identification number
Somersett Country Club, Inc.	27-3423141
•	
	_
•	

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization	Employer Identification number
Somersett Country Club, Inc.	27-3423141
Part VI Line 1a	
None	
Part VI Line 6	
Equity Members	
Part VI Line 7a	
Equity Members	
Part VI Line 7b	
Equity Members	
Part VI Line 11b	
Review of Form 990 by Tim Smith, GM & CFO on 5/28/20	า
Part VI Line 11b	
Review by Joe Strout, June 2020 & Marty Rassmussen,	June 2020 hefore file
Part VI Line 19	, dune 2020, Deloie lile
No documents available to the public.	
NO COCUMENCS AVAILABLE to the public.	
	
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