CHANGE OF ACCOUNTING PERIOD

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.

Open to Public Inspection Information about Form 990 and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

A F	or the	2016 calendar year, or tax year beginning NOV 1, 2016 and ending	MAR 31, 2017	
B c	heck if	C Name of organization	D Employer identifi	cation number
_	Addres	ROCKFORD COUNTRY CLUB		
	Name change	Doing business as	36-1	695272
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/si	ute E Telephone numbe	r
	Final return/	2500 OXFORD STREET	815	968-9881
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	1,064,803.
	Amend	ed ROCKFORD, IL 61103	H(a) Is this a group re	eturn
	Application	F Name and address of principal officer DRIAN UASON	for subordinates	yes X No
	pendin	SAME AS C ABOVE	H(b) Are all subordinates i	ncluded? Yes No
ιτ	ax-exe	mpt status 501(c)(3) _ X 501(c) (7) ◀ (Insert no.) 4947(a)(1) or	527 If "No," attach a	list (see instructions)
J V	<u>Vebsit</u>	e: ▶ WWW.ROCKFORDCC.COM	H(c) Group exemption	n number
			ear of formation: 1899	A State of legal domicile: IL
Pa	ırt I	Summary		
a)	1	Briefly describe the organization's mission or most significant activities SEE\ SCHE	DULE O	
Activities & Governance	1			
rna	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of m	nore than 25% of its net as	ssets
ove	3	Number of voting members of the governing body (Part VI, line 1a)	3	13
Ġ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
S	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	153
Ϋ́	6	Total number of volunteers (estimate if necessary)	6	40
ĊĖ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	43,834.
⋖	b	Net unrelated business taxable income from Form 990-T, line 347	7b	-312.
		IV. a VILLY Land	Prior Year	Current Year
ø)	8	Contributions and grants (Part VIII, line 1h)	0.	0.
Revenue		Program service revenue (Part VIII, line 2g)	1,935,088.	637,611.
eve	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	11,277.	2,000.
Œ	,	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	833,794.	231,153.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,780,159.	870,764.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	ì	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
Ś	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,531,715.	485,766.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
Бе.		Total fundraising expenses (Part IX, column (D), line 25)		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,482,853.	496,219.
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	3,014,568.	981,985.
	19	Revenue less expenses. Subtract line 18 from line 12	-234,409.	-111,221.
Ses			Beginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)	4,017,970.	4,106,991.
vet Assets or und Balances	21	Total liabilities (Part X, line 26)	1,994,746.	2,194,988.
캺	22	Net assets or fund balances Subtract line 21 from line 20	2,023,224.	1,912,003.
	irt II	Signature Block		
Und	er pena	ities of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of m	y knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge.	
		Ja: Ja	2-6-18	
Sig	n i	Signature of office	Date	
Her		BRIAN JASON, GENERAL MANAGER		
		Type or print name and title		
		Print/Type preparer's name ROBERT ORR Preparer's signature Compared to the signature of	Date Check	PTIN
Paid	I	ROBERT ORR / WWW Om	02/01/18 self-employ	red P00011066
Prep	arer	Firm's name CLIFTONLARSONALLEN LLP	Firm's EIN	41-0746749
Use	Only	Firm's address 1639 NORTH ALPINE ROAD		
		ROCKFORD, IL 61107	Phone no. 8 1	5-229-1900
May	the IF	RS discuss this return with the preparer shown above? (see instructions)		X Yes No
	01 11-1			Form 990 (2016)

Form 990 (2016) ROCKFORD COUNTRY CLUB
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_1_		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,]	}
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	Ĺ	_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	i	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?			<u> </u>
	If "Yes," complete Schedule D, Part IV	9		Х
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable	1		1
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	ļ .		
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		_X_
С	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	11c		<u> X</u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	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	405		w.
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X X
	Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	144		
	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		X
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	1.0		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>x</u>
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	į	_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17_		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		_X_
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		<u>X</u>
		Form	990 (2016)

Form 990 (2016) ROCKFORD COUNTRY CLUB
Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	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 19 If "Yes," complete Schedule I, Parts I and II	21		X
22	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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	1		
	Schedule K. If "No", go to line 25a	24a		X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	1 1		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
þ	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	1 1		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			3.7
07	complete Schedule L, Part II	26		<u>X</u>
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	07		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		
20	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	ļ	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	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	ļ	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		-	
	Schedule N, Part II	32		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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			v
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37		<u>X</u>
38	Note. All Form 990 filers are required to complete Schedule O	38	v	
	14010.7 July Olim Odd mora die regunied to complete deriedate o		990 /	2016)

	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	35		103	140
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			ĺ
C	Did the organization comply with backup withholding rules for reportable payments to vendors and r		ble gaming		i	ĺ
_	(gambling) winnings to prize winners?	•		1c		ł
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			<u></u> _		
	filed for the calendar year ending with or within the year covered by this return	2a	153			İ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	Х	ĺ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	•	1	3a	Х	1
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other		ity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accoui	nt)?	4a		Х
b	If "Yes," enter the name of the foreign country		,			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accoun	ts (FBAR)			ļ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	action?		5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he orga	anization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions o	r gıfts			
	were not tax deductible?			_6b_		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	rovided to the payor?	_7a_		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		ļ- -
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uıred			
	to file Form 8282?	()	ľ	7c		-
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		et?	<u>7e</u>		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			_7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file F			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz			<u>7</u> h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	a by the	9			
_	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.			88		
9	Did the sponsoring organization make any taxable distributions under section 4966?			9a	į	
a b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9a 9b		
10	Section 501(c)(7) organizations. Enter		ĺ	-90		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	100,000.			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	186,457.			
11	Section 501(c)(12) organizations. Enter	100				
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	>	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O		l		1	
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				
С	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	le O		14b		
				Form	990	(2016)

ROCKFORD COUNTRY CLUB 36-1695272 Form 990 (2016) 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. $\overline{\mathbf{x}}$ Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 13 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 13 1h Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 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 X 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a 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 the year by the following: Х The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X 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? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Х 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 14 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? The organization's CEO, Executive Director, or top management official X 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b

ec	ction C. Disclosure
17	List the states with which a copy of this Form 990 is required to be filed NONE
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available
	for public inspection. Indicate how you made these available Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial
	statements available to the public during the tax year
20	State the name, address, and telephone number of the person who possesses the organization's books and records:
	WENDY NEWMAN - 815-968-9881
	2500 OXFORD STREET, ROCKFORD, IL 61103

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

• 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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other				
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) LOGAN, LORAYNE PRESIDENT	0.70	x		х				0.	0.	0.
(2) KOHLBACHER, KENT	0.70									
EXECUTIVE VICE PRESIDENT		Х		X		L.		0.	0.	0.
(3) SNOREK, DARRELL	0.70									
VICE PRESIDENT		X	_	Х		_	<u> </u>	0.	0.	0.
(4) CWYNAR, THOMAS	0.70									_
TREASURER		X		X	<u> </u>	<u> </u>	ļ .	0.	0.	<u> </u>
(5) DIBENEDETTO, JEFFREY	0.70									•
SECRETARY	0.70	X		Х	_	<u> </u>		0.	0.	0.
(6) SCHAER, DENNIS	0.70	v								0
IMMEDIATE PAST PRESIDENT	0.70	X	-	-		-		0.	0.	0.
(7) GRACEFFA, FRANK	0.70	X						0.	0.	0.
DIRECTOR	0.70					┢╌			- 0.	
(8) HATCH, MARK DIRECTOR	0.70	X				ļ	ļ	0.	0.	0.
(9) KILEY, DANA	0.70						<u> </u>			
DIRECTOR		X					ļ	0.	0.	0.
(10) LAFEVER, BILL	0.70									
DIRECTOR		X						0.	0.	0.
(11) SCANDROLI, JOSEPH	0.70									
DIRECTOR		X					<u> </u>	0.	0.	0.
(12) TELLING, LAURA	0.70		ļ	ļ	Į					
DIRECTOR		X	ļ	<u> </u>		ļ	ļ.,	0.	0.	0.
(13) THOMPSON, CHUCK	0.70	ļ			ļ				_	_
DIRECTOR	10 00	X	ļ	<u> </u>		-		0.	0.	0.
(14) JASON, BRIAN	40.00	-						0.5 400		16 101
GENERAL MANAGER	40.00	+-	-	X	\vdash	+-	-	97,422.	0.	16,131.
(15) NEWMAN, WENDY	40.00	1		v		1		E0 700	0.	33 010
CONTROLLER		+-	-	X	-	\vdash		50,790.	<u> </u>	33,012.
		1								
		\dagger	† _	†	<u> </u>	 	1			
		1								
					•	_				F 000 (004.0)

	t VII Section A. Officers, Directors, Trus (A) Name and title		(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Wey employee Highest compensated Employee Former			than s boti r/trus	one h an tee)	ompensated Employe (D) Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estimated amount of other compensation from the organization and related organization		of tion e on ed	
d Total (add lines	inuation sheets to Part V 1b and 1c) Individuals (including but i		nose	liste	ed al	bove	e) wh	> >	148,212. 0. 148,212. eceived more than \$100		0.		9,14	0.
3 Did the organization 1a? If "Yes," 4 For any individuation and related orga 5 Did any person literated to the office of the of	tion list any former officer complete Schedule J for all listed on line 1a, is the sinizations greater than \$15 isted on line 1a receive or organization? If "Yes," conent Contractors	such individual um of reportab 50,000? If "Yes, accrue compei nplete Schedul	le co " <i>coi</i> nsati <u>le J f</u>	ompe mple on f or su	ensa ete S rom uch	ation Sche any pers	n and edule unr	d oth e <i>J f</i> relat	ner compensation from for such individual ed organization or indiv	the organization	pens	3 4 5		No X X X
•	Report compensation for (A) Name and business	the calendar y	ear e		ng v					year		(C ompen)	
	independent contractors npensation from the organ		not lii	mite	d to		se li	stec	l above) who received r	nore than		Form §	190 (2	

43,834

068

440.

2,862.

713910

Total revenue See instructions

e Total. Add lines 11a-11d

d All other revenue

440.

862

764.

Form 990 (2016) ROCKFORD COUNTRY CLUB
Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must comp			omplete column (A).	
	Check if Schedule O contains a respons		this Part IX	(C)	(D)
	ot include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	1			
	individuals See Part IV, lines 15 and 16	—			
4	Benefits paid to or for members	_			
5	Compensation of current officers, directors,	100 500			
_	trustees, and key employees	109,502.			·
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
-7	persons described in section 4958(c)(3)(B)	285,677.			
7	Other salaries and wages Pension plan accruals and contributions (include	203,011.			
8	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	46,550.			
10	Payroll taxes	44,037.			
11	Fees for services (non-employees)	11,0370			
''а	Management				
b	Legal				
	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	41,925.	··· -		
12	Advertising and promotion				
13	Office expenses .	12,660.			
14	Information technology	753.			
15	Royalties	70 007			
16	Occupancy	79,887.			
17	Travel	3,645.			
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials Conferences, conventions, and meetings	2,512.			· · · · · ·
19 20	Interest	23,662.			
21	Payments to affiliates	25,002.			
22	Depreciation, depletion, and amortization	193,932.	•		
23	Insurance	39,091.			
24	Other expenses, Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	SUPPLIES	42,573.			
b	EQUIPMENT RENTAL & MAIN	27,307.			<u> </u>
С	HOLIDAY EXPENSES	4,250.	·-		
d		4,107.			· · · · · · · · · · · · · · · · · · ·
е	All other expenses	19,915.			
25	Total functional expenses Add lines 1 through 24e	981,985.			
26	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)		-		

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) Beginning of year End of year Cash - non-interest-bearing 75,682. 1 24,854. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 676,050. 4 872,550. Accounts receivable, net 4 5 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 instr) Complete Part II of Sch L Notes and loans receivable, net 133,747. 205,581. 8 Inventories for sale or use 8 Prepaid expenses and deferred charges 69,051. 110,899. 9 10a Land, buildings, and equipment cost or other 15,309,026. basis. Complete Part VI of Schedule D 10a 3,063,440. 12,415,919. 2,893,107. b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 4,017,970 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 <u>4,106,991.</u> 17 Accounts payable and accrued expenses 263,312. 265,511. 17 18 Grants payable 18 338,847. 914,512. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 1,392,587. 1,014,965. Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 1,994,746. 2,194,988. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 2,023,224. Unrestricted net assets 1,912,003. 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 2,023,224. 1,912,003. 33 Total net assets or fund balances 4,017,970. 4,106,991. Total liabilities and net assets/fund balances

orm	990 (2016) ROCKFORD COUNTRY CLUB	36-	1695272	Pag	ge 12
	rt 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	870	7 , 7	64.
2	Total expenses (must equal Part IX, column (A), line 25)	2	981	, 9	85.
3	Revenue less expenses Subtract line 2 from line 1	3	-111	L, 2	21.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,023	$3,\overline{2}$	24.
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	1,912	2,0	03.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				oxdot
				Yes	No
1	Accounting method used to prepare the Form 990. L. Cash X Accrual L. Other				İ
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both				l
	Separate basis Consolidated basis Both consolidated and separate basis				l
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis	,		
	consolidated basis, or both		j		
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt	,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit		
	Act and OMB Circular A-133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	iired au	1 1		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE D

Department of the Treasury

(Form 990)

Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 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 www.irs.gov/form990.

Name of the organization

Employer identification number

ROCKFORD COUNTRY CLUB 36-1695272 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last 2 day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

632051 08-29-16

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

Schedule D (Form 990) 2016

	chedule D (Form 990) 2016 ROCKFORD COUNTRY CLUB 36-1695272										
Par	t III Org	anizations Maintaining C	Collections of A	rt, His	torical Tr	easures,	or Other	Simil	ar Asse	ts (continu	ied)
3	Using the or	rganization's acquisition, accessi	on, and other record	ds, chec	k any of the	following tha	at are a sig	nıfıcant	use of its	collection	ıtems
	(check all th	* * * * * * * * * * * * * * * * * * * *									
а	Public	exhibition	c		Loan or excl						
b	Schol	arly research	e	• 🗀	Other						
С		rvation for future generations									
4		escription of the organization's c							ose in Pari	XIII.	
5		ear, did the organization solicit c					er sımılar a	assets		7	
	to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No										
Par		row and Custodial Arran		ete if the	e organizatio	n answered	"Yes" on F	form 990	D, Part IV,	line 9, or	
		rted an amount on Form 990, Pa									
1a		ization an agent, trustee, custod	ian or other intermed	diary for	contribution	s or other as	ssets not ir	ncluded		7	
	on Form 990								L	Yes	L No
b	it "Yes," exp	plain the arrangement in Part XIII	and complete the fo	ollowing	table						
								\- <u>-</u>		Amount	
	Beginning b							_1c			
		uring the year						1d			
_		s during the year						1e			
f O-	Ending bala		orm 000 Port V line	21 for		otodial acad	arine landida	1f		Tv	
	_	anization include an amount on F plain the arrangement in Part XIII						y	L	Yes	No No
		lowment Funds. Complete									<u> </u>
		The state of the s	(a) Current year		Prior year	(c) Two yea			ears back	(e) Four y	eare hank
12	Reginning o	f year balance	(a) Current year	10/1	noi yeai	(C) Two year	13 Dack 10	1) 111100	Cars back	(e) i our y	cais back
b	Contribution	- -									
c		ent earnings, gains, and losses									
q	Grants or so										
e		nditures for facilities									
•	and program			}							
f		ive expenses									
g	End of year	· ·									
2	-	estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	i)) held as					
а		nated or quasi-endowment	•	%		••					
b	Permanent e	endowment >	%								
c	Temporarily	restricted endowment	%								
	The percent	tages on lines 2a, 2b, and 2c sho	ould equal 100%								
За	Are there er	ndowment funds not in the posse	ession of the organiz	ation tha	at are held a	nd administe	ered for the	organiz	zation		_
	by									Υ	es No
	(i) unrelate	ed organizations								3a(i)	
	(ii) related	organizations								3a(ii)	
b	If "Yes" on I	ine 3a(ıı), are the related organiza	ations listed as requi	red on S	Schedule R?					3b	
4		Part XIII the intended uses of the		owment	funds.	,					
Pai		d, Buildings, and Equipn									
	Com	plete if the organization answere	ed "Yes" on Form 99	0, Part I	V, line 11a S	See Form 990	D, Part X, li	ne 10_			
	De	escription of property	(a) Cost or o		1	or other		cumulate		(d) Book	value
			basis (investi	ment)	 	(other)	depr	eciation			
1a	Land					$\frac{1,118.}{1}$	4				<u>,118.</u>
b	Buildings		<u> </u>		12,35	6,891.	10,3	5 <u>5,2</u>	88.	2,001	<u>,603.</u>
С		mprovements				4 04 5					
d	Equipment				2,40	1,017.	2,0	60,6	31.	340	<u>,386.</u>
	Other				L		L				
Total	I. Add lines 1	a through 1e (Column (d) must e	equal Form 990, Parl	t X, colui	mn (B), line 1	(OC)				2.893	,107.

Schedule D (Form 990) 2016

(3)
(4)
(5)
(6)
(7)
(8)
(9)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2016

	dule D (Form 990) 2016 ROCKFORD COUNTRY CLUB		36-1695272 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statem	nents With Revenue per	Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	ła	
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		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	_2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
С	Add lines 4a and 4b		4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5
Pa	t XII Reconciliation of Expenses per Audited Financial State	ments With Expenses p	er Return.
<u> </u>	Complete if the organization answered "Yes" on Form 990, Part IV, line 12		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	-
d	Other (Describe in Part XIII)	2d	┤ !
e	Add lines 2a through 2d		
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
•		1 4-1	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	\dashv
b	Other (Describe in Part XIII)	4b	⊣
c	Add lines 4a and 4b		4c
5 Do	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5
		at IV lease the and Ob. Dart V. lea	and Doubly has O Doubly
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa		ne 4, Part X, line 2, Part XI,
iines	2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any ac	aditional information	
PAI	RT X, LINE 2:		
	RT X, LINE 2:	INTERNATION FO	01/G)/7) OF MYD
		UNDER SECTION 50	01(C)(7) OF THE
THI	RT X, LINE 2: E CLUB IS EXEMPT FROM FEDERAL INCOME TAX		
THI	RT X, LINE 2:		
THI	RT X, LINE 2: E CLUB IS EXEMPT FROM FEDERAL INCOME TAX FERNAL REVENUE CODE. THE TAX REFORM ACT O	F 1969 IMPOSED A	A CORPORATE
THI	RT X, LINE 2: E CLUB IS EXEMPT FROM FEDERAL INCOME TAX	F 1969 IMPOSED A	A CORPORATE
THI IN'	RT X, LINE 2: CLUB IS EXEMPT FROM FEDERAL INCOME TAX FERNAL REVENUE CODE. THE TAX REFORM ACT O COME TAX ON THE "UNRELATED BUSINESS TAXAB	F 1969 IMPOSED A	A CORPORATE
THI IN'	RT X, LINE 2: E CLUB IS EXEMPT FROM FEDERAL INCOME TAX FERNAL REVENUE CODE. THE TAX REFORM ACT O	F 1969 IMPOSED A	A CORPORATE
THI IN' IN'	RT X, LINE 2: E CLUB IS EXEMPT FROM FEDERAL INCOME TAX FERNAL REVENUE CODE. THE TAX REFORM ACT O COME TAX ON THE "UNRELATED BUSINESS TAXAB K-EXEMPT CLUB. PROVISION FOR APPLICABLE S	F 1969 IMPOSED ALLE INCOME OF ALLE TATE AND FEDERAL	A CORPORATE N OTHERWISE L INCOME TAXES
THI IN' IN'	RT X, LINE 2: CLUB IS EXEMPT FROM FEDERAL INCOME TAX FERNAL REVENUE CODE. THE TAX REFORM ACT O COME TAX ON THE "UNRELATED BUSINESS TAXAB	F 1969 IMPOSED ALLE INCOME OF ALLE TATE AND FEDERAL	A CORPORATE N OTHERWISE L INCOME TAXES
THI IN' IN' TAL	RT X, LINE 2: E CLUB IS EXEMPT FROM FEDERAL INCOME TAX TERNAL REVENUE CODE. THE TAX REFORM ACT O COME TAX ON THE "UNRELATED BUSINESS TAXAB K-EXEMPT CLUB. PROVISION FOR APPLICABLE S MADE IN ACCORDANCE WITH THESE STATUTES A	F 1969 IMPOSED A LE INCOME" OF AN TATE AND FEDERAL ND IS INCLUDED	A CORPORATE N OTHERWISE L INCOME TAXES
THI IN' IN' TAL	RT X, LINE 2: E CLUB IS EXEMPT FROM FEDERAL INCOME TAX FERNAL REVENUE CODE. THE TAX REFORM ACT O COME TAX ON THE "UNRELATED BUSINESS TAXAB K-EXEMPT CLUB. PROVISION FOR APPLICABLE S	F 1969 IMPOSED A LE INCOME" OF AN TATE AND FEDERAL ND IS INCLUDED	A CORPORATE N OTHERWISE L INCOME TAXES
THI IN' IN' TAL	RT X, LINE 2: E CLUB IS EXEMPT FROM FEDERAL INCOME TAX TERNAL REVENUE CODE. THE TAX REFORM ACT O COME TAX ON THE "UNRELATED BUSINESS TAXAB K-EXEMPT CLUB. PROVISION FOR APPLICABLE S MADE IN ACCORDANCE WITH THESE STATUTES A	F 1969 IMPOSED A LE INCOME" OF AN TATE AND FEDERAL ND IS INCLUDED	A CORPORATE N OTHERWISE L INCOME TAXES
THI IN' IN' TAL	RT X, LINE 2: E CLUB IS EXEMPT FROM FEDERAL INCOME TAX TERNAL REVENUE CODE. THE TAX REFORM ACT O COME TAX ON THE "UNRELATED BUSINESS TAXAB K-EXEMPT CLUB. PROVISION FOR APPLICABLE S MADE IN ACCORDANCE WITH THESE STATUTES A	F 1969 IMPOSED A LE INCOME" OF AN TATE AND FEDERAL ND IS INCLUDED	A CORPORATE N OTHERWISE L INCOME TAXES
THI IN' IN' TAL	RT X, LINE 2: E CLUB IS EXEMPT FROM FEDERAL INCOME TAX TERNAL REVENUE CODE. THE TAX REFORM ACT O COME TAX ON THE "UNRELATED BUSINESS TAXAB K-EXEMPT CLUB. PROVISION FOR APPLICABLE S MADE IN ACCORDANCE WITH THESE STATUTES A	F 1969 IMPOSED A LE INCOME" OF AN TATE AND FEDERAL ND IS INCLUDED	A CORPORATE N OTHERWISE L INCOME TAXES
THI IN' IN' TAL	RT X, LINE 2: E CLUB IS EXEMPT FROM FEDERAL INCOME TAX TERNAL REVENUE CODE. THE TAX REFORM ACT O COME TAX ON THE "UNRELATED BUSINESS TAXAB K-EXEMPT CLUB. PROVISION FOR APPLICABLE S MADE IN ACCORDANCE WITH THESE STATUTES A	F 1969 IMPOSED A LE INCOME" OF AN TATE AND FEDERAL ND IS INCLUDED	A CORPORATE N OTHERWISE L INCOME TAXES
THI IN' IN' TAL	RT X, LINE 2: E CLUB IS EXEMPT FROM FEDERAL INCOME TAX TERNAL REVENUE CODE. THE TAX REFORM ACT O COME TAX ON THE "UNRELATED BUSINESS TAXAB K-EXEMPT CLUB. PROVISION FOR APPLICABLE S MADE IN ACCORDANCE WITH THESE STATUTES A	F 1969 IMPOSED A LE INCOME" OF AN TATE AND FEDERAL ND IS INCLUDED	A CORPORATE N OTHERWISE L INCOME TAXES
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

DIRECTORS.

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.

2016
Open to Public

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

Inspection

ROCKFORD COUNTRY CLUB

Employer identification number 36-1695272

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

A COUNTRY CLUB PROVIDING RECREATIONAL ACTIVITIES AND ENTERTAINMENT FOR MEMBERS INCLUDING DINING, GOLFING, SKEET, POOL AND TENNIS FACILITIES.

FORM 990, PART VI, SECTION A, LINE 1:

THE EXECUTIVE COMMITTEE CONSISTS OF THE OFFICERS OF THE CLUB AND THEY

CONDUCT THE BUSINESS OF THE BOARD OF DIRECTORS BETWEEN THE MEETINGS EXCEPT

FOR ANY MATTERS RESERVED TO THE BOARD OR MEMBERSHIP. THE ADVISORY COMMITTEE

CONSISTS OF THE SIX LIVING IMMEDIATE PAST PRESIDENTS OF THE CLUB. THEY ARE

CONCERNED WITH THE LONG-RANGE PLANNING OF FUTURE DEVELOPMENTS OF THE CLUB

AND ACT AS A SOURCE OF ADVICE, COUNSEL, AND INFORMATION FOR THE BOARD OF

FORM 990, PART VI, SECTION A, LINE 6:

MEMBERS OF THE CLUB BECOME MEMBERS OF THE ORGANIZATION UPON ACCEPTANCE TO THE CLUB.

FORM 990, PART VI, SECTION A, LINE 7A:

ONLY SUBSCRIBING MEMBERS ARE ENTITLED TO VOTE AT ANY CLUB MEMBERSHIP

MEETING. ALSO, IF THE CLUB IS DISSOLVED OR DISBANDED, THE PROPERTY AND

ASSETS WILL BE DISTRIBUTED AMONG THE THEN SUBSCRIBING MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7B:

THE BYLAWS OF THE CLUB MAY BE AMENDED ONLY UPON AFFIRMATIVE VOTE OF 2/3 OF THE SUBSCRIBING MEMBERS PRESENT AT ANY ANNUAL OR SPECIAL MEETING.

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

Schedule O (Form 990 or 990-EZ) (2016)

ROCKFORD COUNTRY CLUB ROCKFORD COUNTRY CLUB FORM 990, PART VI, SECTION B, LINE 11B: MEMBERS OF GOVERNING BODY ARE GIVEN A COPY OF FORM 990 TO REVIEW BEFORE FILING. FORM 990, PART VI, SECTION B, LINE 15A: COMPENSATION IS DETERMINED BY THE BOARD OF GOVERNORS. FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON	Schedule O (Form 990 or 990 EZ) (2016)	Page 2
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	FORM 990, PART VI, SECTION C, LINE 19:	
	GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS A WRITTEN REQUEST	RE AVAILABLE UPON