efile GRAPHIC print Submission Date - 2024-01-30 DLN: 93493030018624 OMB No. 1545-0047 **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 ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Inspection Treasury **∮**er√fee the 2022 calendar year, or tax year beginning 01-01-2022 , and ending 12-31-2022 D Employer identification number **B** Check if applicable: Name of organization
THE MEADOWS COUNTRY CLUB INC O Address change 65-0065871 O Name change Doing business as ☐ Initial return Number and street (or P.O. box if mail is not delivered to street address) 3101 LONGMEADOW O Final return/terminated ∆mended return Application (941) 400-1217 Gending City or town, state or province, country, and ZIP or foreign postal code SARASOTA, FL 34235 **G** Gross receipts \$ 8,611,611 Name and address of principal officer: **H(a)** Is this a group return for WILLIAM SNOW ☐Yes ✓ No subordinates? 3101 LONGMEADOW Are all subordinates SARASOTA, FL ☐ Yes ☐No included? Tax-exempt status: 501(c)(3) **✓** 501(c) (7) **◄** (insert no.) 4947(a)(1) or If "No," attach a list. See instructions. **H(c)** Group exemption number ▶ Website: ▶ WWW.MEADOWSCC.ORG L Year of formation: 1988 M State of legal domicile: FL **K** Form of organization: lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other lacktriangleSummary 1 Briefly describe the organization's mission or most significant activities: TO BIND ITS MEMBERS TOGETHER FOR A COMMON OBJECTIVE THROUGH RECREATION, SPORTS, AND SOCIAL ACTIVITIES Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net asset Number of voting members of the governing body (Part VI, line 1a) . . . 3 12 12 4 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) . 6 20 Total unrelated business revenue from Part VIII, column (C), line 12 7a 2,456,642 Net unrelated business taxable income from Form 990-T. Part I. line 11 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 5,730,451 Program service revenue (Part VIII, line 2g) . 6.253.706 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 33 29 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,025,472 1,623,340 6.755.956 7.877.075 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 0 0 Benefits paid to or for members (Part IX, column (A), line 4) . 14 4,170,612 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 3,631,668 **16a** Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) **b**0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,961,454 3,319,281 6,593,122 7,489,893 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 387,182 Revenue less expenses. Subtract line 18 from line 12 . 162.834 Assets or d Balances Beginning of Current Year **End of Year** 1,770,596 2,505,609 20 Total assets (Part X. line 16) . 21 Total liabilities (Part X, line 26) . 2,343,268 2,777,942 Net assets or fund balances. Subtract line 21 from line 20 -572.672 -272,333 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2024-01-30 signature of officer Sign Here COHN TREASURER Print/Type preparer's name Preparer's signature Check 🔲 if P00189856 Paid self-employed ▶ PHILLIPS FELDMAN GROUP Firm's name Firm's EIN > 59-2840381 Preparer Firm's address > 801 LAUREL OAK DRIVE SUITE 303 Use Only Phone no. (239) 566-1600 NAPLES, FL 341082764 🗸 Yes 🗌 No May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2022) Cat. No. 11282Y

Form	n 990 (2022)					Page 2
Pa	rt III Stateme	ent of Program Service Ac	complishments			
	Check if S	chedule O contains a response or	note to any line in this Part III .			
1	Briefly describe th	ne organization's mission:	-			
PLEA	SURE AND RELAXA	TION OF THE MEMBERS FROM GO	DLFING, TENNIS, FITNESS, AND SOCI	AL ACTIVITIES.		
2	Did the organizati	ion undertake any significant pro	gram services during the year which	were not listed on		
	the prior Form 99	0 or 990-EZ?			🗌 Yes 🗸	No
	If "Yes," describe					
3	Did the organizati					
	services?	☐ Yes	✓ No			
	If "Yes," describe	these changes on Schedule O.				
4			nplishments for each of its three larg			
	Section 501(c)(3) and revenue, if ar	nts and allocations to others, the t	otal expenses			
	and revende, if an	ily, for each program service repe	nted.			
4a	(Code:) (Expenses \$	including grants of \$) (Revenue \$)	
	A PRIVATE COUNTRY	CLUB PROVIDING SOCIAL, DINING, GO	LF, TENNIS, SWIMMING, EXERCIZE, AND R	ECREATION FACILITIES TO ITS MEMBERS.		
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)	
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)	
4d	Oth an area area	emiles (Describe in Cabadal & C.)				
4 u	Other program se (Expenses \$	ervices (Describe in Schedule O.) including	grants of \$) (Revenue \$)	
4e		service expenses	g. s v. w	, , , , , , , , , , , , , , , , , , , ,	,	

ı	-orm	990 (2	2022)									
	Par	t IV	Che	cklis	st o	of F	Req	uir	ed :	Sch	edı	ıle
	1		e organi dule A									

Par	t 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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		No
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		No
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? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	-		No
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	5		No
	Schedule D, Part I			INO
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
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		No
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
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		No
	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		No
	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	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	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	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
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		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	17		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
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 1? If "Yes," complete Schedule I, Parts I and II	21		No
	·			20 (2022)

Par	Checklist of Required Schedules (Continued)	1				
22	Did the constant is a second as a AF 000 of seconds as allowed in the constant is in the day of the constant in		Yes	No		
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		No		
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		No		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b				
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?					
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 transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I					
b	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I					
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current 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					
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 (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L,Part III					
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):					
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV					
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV					
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No		
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes			
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		No		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No		
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		No		
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		No		
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		No		
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?					
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	•					
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI					
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O					
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part V					
1 >	1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 14					
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable					
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming					
-	(gambling) winnings to prize winners?	1c	Yes	l		

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes			
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No		
D	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No		
c	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 the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes			
7	Organizations that may receive deductible contributions under section 170(c).					
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a				
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c				
	If "Yes," indicate the number of Forms 8282 filed during the year					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f				
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?					
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 sponsoring organization have excess business holdings at any time during the year?					
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter:					
	Initiation fees and capital contributions included on Part VIII, line 12					
b 11	Section 501(c)(12) organizations. Enter:					
	Gross income from members or shareholders					
	Gross income from other sources. (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.					
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				
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					
	Enter the amount of reserves on hand					
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17				

Page **6**

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year 12 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 1b 12 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . 2 No Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Yes of officers, directors or trustees, or key employees to a management company or other person? 4 Yes Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . Nο Did the organization have members or stockholders? . 6 Yes . 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 Yes **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or 7b Yes Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a Yes Each committee with authority to act on behalf of the governing body? . 8b Yes 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 Nο Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a No 10a Did the organization have local chapters, branches, or affiliates? . If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the 11a Nο **b** Describe on 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. 12a Nο Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on 12c Did the organization have a written whistleblower policy? . . . 13 13 No 14 Did the organization have a written document retention and destruction policy? 14 Yes Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official . . . 15a Yes 15b Yes Other officers or key employees of the organization . If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a No 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 16h Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed 18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, 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. Another's website 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. State the name, address, and telephone number of the person who possesses the organization's books and records: ▶TOM MURPHY CONTROLLER C/O ICON MANAGEMENT 5540 STATE ROAD BRADENTON, FL 34208 (941) 371-6000

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 the instructions for definition of "key employee."

Part VII

- 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.										
Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	Position than on is b	tion (do not check more none box, unless person both an officer and a director/trustee) Highest compensated Former Institutional Trustee					Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) PHILLIP BOYLE	10.00	stee	Trustee		Ф	pensated				
PRESIDENT		Х		Х				0	0	0
(2) WILLIAM SNOW VICE PRESIDENT	1.00	х		Х				0	0	0
(3) SOL COHN TREASURER	1.00	Х		х				0	0	0
(4) CLAIRE COYLE SECRETARY	1.00	Х		х				0	0	0
(5) DUNCAN COOPER DIRECTOR	1.00	Х						0	0	0
(6) MARTYN CORDEN DIRECTOR	1.00	Х						0	0	0
(7) MALCOLM HAY DIRECTOR	1.00	Х						0	0	0
(8) CHRISTINE KRATZER DIRECTOR	1.00	Х						0	0	0
(9) LARRY MARZIALE DIRECTOR	1.00	Х						0	0	0
(10) JEFFRY OLESEN DIRECTOR	1.00	Х						0	0	0
(11) HARLEAN SATIN DIRECTOR	1.00	Х						0	0	0
(12) LAURIE TEACHOUT DIRECTOR	1.00	Х						0	0	0
						<u> </u>				Form 990 (2022)

	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	than c	one booth a direct	ox, u n of tor/t	t che inles ficer rust	eck moss persa s and a ee) Highest compensated	on	Repo compo fror organiz 2/1	(D) ortable ensation m the ration (W099099-NEC)	Reportable compensation from related organizations 2/1099-MISC/1099-NE	n d (W-	(F Estim amount of compen from organizat relat organiz	ated of other usation the tion and
	Sub-Total				٠		*				•]		
	Total from continuation sheets to Pa Total (add lines 1b and 1c) . . .	ert VII, Section		٠.	٠.	•	*			0		0		0
2	Total number of individuals (including reportable compensation from the org		to those	liste	d ab	ove)) who r	ecei	ved more	e than \$10	0,000 of			
													Yes	No
3	Did the organization list any former of line 1a? If "Yes," complete Schedule 1				•			_	nest com	pensated e	employee on			Ne
4	For any individual listed on line 1a, is								compens	ation from	the	3		No
	organization and related organizations individual											4		No
5	Did any person listed on line 1a receive services rendered to the organization?									ion or indiv	idual for			
-54	ection B. Independent Contract	•	ic Juie	aule j	, 101	Juci	ii perso	JII •				5		No
1	Complete this table for your five higher	st compensated										npens	ation fror	n
	the organization. Report compensation	(A)		enain	g Wi	cn O	ı witni	ıı the	e organiz		(B)			C)
_	Name a	nd business addre	:55							Desc	ription of services		Compe	risation

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

the organization. Report compensation for the calendar year ending with or within the organization's tax year.							
(A) Name and business address	(B) Description of services	(C) Compensation					

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

Pā	rt IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must co	mplete all columns.	All other organizatio	ns must complete colu	ımn (A).
	Check if Schedule O contains a response or note to an	-		<u> </u>	
	not 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
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		expenses	general expenses	expenses
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 individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members	1			
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	3,404,005			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	766,607			
11	Fees for services (non-employees):				
a	Management				
	Legal				
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17			_	
	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings				
20	Interest	27,855			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	445,782			
23	Insurance	251,973			
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 O.)				
	a ADMINISTRATIVE	1,413,622			
	b GOLF COURSE MAINTENANCE	652,784			
	c FOOD & BEVERAGE OTHER	218,647			
	d PROPERTY TAXES	110,513			
	e All other expenses	198,105			
25	Total functional expenses. Add lines 1 through 24e	7,489,893			
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).				
		l.		<u> </u>	Form 990 (2022)

418,084

270,373

81.219

625,765

593.441

2,505,609

1.086.583

1.051.805

Form	990	(20
D	- V	

Balance Sheet Check if Schedule O contains a response or note to any line in this Part IX . (A) (B) Beginning of year End of year 282,749 1 516.727 Cash-non-interest-bearing

1
2

3

13

14

15

16

17

18

19

20

21

24

25

26

27

Balances

Fund

5 29

Assets 30

Net 33

31

32

jabilities

Savings and temporary cash investments Pledges and grants receivable, net .

Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%

Accounts receivable, net . . . 5 controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

Notes and loans receivable, net .

Inventories for sale or use . .

Prepaid expenses and deferred charges

basis. Complete Part VI of Schedule D

Less: accumulated depreciation

10a 10b

10a Land, buildings, and equipment: cost or other 11 Investments—publicly traded securities .

12 Investments—other securities. See Part IV, line 11 .

Investments—program-related. See Part IV, line 11

Intangible assets .

Grants payable . . .

Deferred revenue . .

Other assets. See Part IV, line 11 .

Tax-exempt bond liabilities . . .

or family member of any of these persons

Complete Part X of Schedule D

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances . .

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions

complete lines 29 through 33.

Total net assets or fund balances

Accounts payable and accrued expenses .

Total assets. Add lines 1 through 15 (must equal line 33) . .

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties . . .

Organizations that follow FASB ASC 958, check here

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

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

Organizations that do not follow FASB ASC 958, check here 🕨 📙 and

3.068.350

2.442.585

709.369

2 3

4

5

6 7

8

9

10c

11

12

13 14

15

16

17

18

19

453,915

184,929

139.634

1,770,596

1.140.937

359,343

2,343,268

-572.672

-572.672

1.770.596

27

28

29

30

31

32

33

842.988

25

639,554 26

2,777,942 -272.333

-272.333

2,505,609 Form 990 (2022)

3b

efile GRAPHIC print

Submission Date - 2024-01-30

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

DLN: 93493030018624

OMB No. 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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. ► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information. Open to Public Inspection

nai The	MEADOWS COUNTRY CLUB INC				Employer Ide	entincation i	number
					65-0065871		
Pa	rt I Organizations Maintaining Donor Advi				or Accounts		
	Complete if the organization answered "Ye						
		(a) Doi	nor advi	sed funds	(b) Fun	ds and other	accounts
L	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
ı	Aggregate value at end of year						
5	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex					_	Yes 🗆 No
5	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?	or donor advisor	, or for a	any other purpose o			Yes 🗆 No
Pa	rt II Conservation Easements. Complete if the organization answered "Ye.	s" on Form 990	, Part I	V, line 7.			
L	Purpose(s) of conservation easements held by the organ						
	Preservation of land for public use (e.g., recreation			Preservation of an	historically imr	ortant land	area
	Protection of natural habitat	or cadeacion,		Preservation of a			area
				Preservation of a C	certified filstoric	Structure	
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	qualified conserv	ation co	ntribution in the for		ation at the End	of the Year
а	Total number of conservation easements				2a	at the zha	or the rear
b	Total acreage restricted by conservation easements				2b		
С	Number of conservation easements on a certified histori	c structure includ	led in (a)	2c		
d	Number of conservation easements included in (c) acqui	red after July 25,	2006, a	nd not on a	2d		
3	historic structure listed in the National Register Number of conservation easements modified, transferre	d, released, extir	nguished	I, or terminated by	the organization	n during the	
	tax year •						
ı	Number of states where property subject to conservation	n easement is loo	cated 🕨				
5	Does the organization have a written policy regarding the enforcement of the conservation easements it holds? .	ne periodic monito	oring, ir	spection, handling	of violations, an		
						U Yes	U No
5	Staff and volunteer hours devoted to monitoring, inspec	ting, nandling of	violatio	is, and enforcing co	onservation eas	ements durir	ig the year
7	Amount of expenses incurred in monitoring, inspecting,	handling of violat	tions, ar	nd enforcing conser	vation easemen	ts during the	e year
	> \$						
3	Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(ii)?				70(h)(4)(B)(i)		
						Yes	□ No
•	In Part XIII, describe how the organization reports conse balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemer	footnote to the o					
Pai	t III Organizations Maintaining Collections	of Art, Histo			her Similar <i>F</i>	ssets.	
	Complete if the organization answered "Ye. If the organization elected, as permitted under FASB ASG				t and halance ch	and works a	fort
La	historical treasures, or other similar assets held for publ Part XIII, the text of the footnote to its financial stateme	ic exhibition, edu	cation,	or research in furthe			
b	If the organization elected, as permitted under FASB ASI historical treasures, or other similar assets held for publ following amounts relating to these items:						
(i) Revenue included on Form 990, Part VIII, line 1				▶\$		
	i) Assets included in Form 990, Part X						
2	If the organization received or held works of art, historic	al treasures, or o	ther sin	nilar assets for finan		de the	
а	following amounts required to be reported under FASB A Revenue included on Form 990, Part VIII, line 1	_			▶\$		
	Assets included in Form 990. Part X				<u></u>		

Cat. No. 52283D

Schedule D (Form 990) 2022

Par		Organizations M	laintaining Colle	ctions	of Art, H	listor	ıcaı	ıreas	ures, or Oth	er Similar	Assets	(continued)
3		the organization's acq (check all that apply):	uisition, accession, a	nd other	records, cl	heck a	any of	the fo	llowing that are	a significant (use of its	collection
а		Public exhibition				d		Loan	or exchange pro	grams		
b		Scholarly research				e		Othe	r			
c		Preservation for future	generations									
4	Provid Part X	de a description of the (organization's collect	ions and	l explain ho	w the	y furth	ner the	e organization's	exempt purpo	ose in	
5		g the year, did the orga s to be sold to raise fur									□ Ye	es 🗌 No
Par	t IV	Escrow and Cust Complete if the org line 21.			' on Form	990,	Part I	V, lin	e 9, or reporte	d an amour	nt on Fo	orm 990, Part X,
1a		organization an agent, led on Form 990, Part X									☐ Y €	es 🗆 No
b	If "Yes	s," explain the arrange	ment in Part XIII and	complete	e the follow	ving ta	ble:			-	mount	
c	Begin	ning balance							1c			
d	Additi	ions during the year .							. 1d			
e	Distril	butions during the year							1e			
f	Endin	g balance							1f			
2a	Did th	ne organization include	an amount on Form	990, Par	t X, line 21,	, for es	scrow	or cus	todial account li	ability?	□ Ye	es 🗆 No
b	If "Yes	s," explain the arranger	ment in Part XIII. Che	ck here i	f the expla	nation	has b	een p	rovided in Part X	an (
	rt V	Endowment Fund			· ·			•				
		Complete if the org										
1.	Pogina	ing of year balance .		(a) Currer	nt year	(b) Pr	rior yea	r	(c) Two years back	(d) Three ye	ars back	(e) Four years back
	-	outions	· · · ⊢									
		restment earnings, gair	as and losses									
			· ·									
		or scholarships										
	and pro	expenditures for facilities										
		strative expenses .										
g		year balance	<u> </u>									
2		de the estimated perce	-	year end	balance (li	ine 1g	, colur	mn (a)) held as:			
а	Board	I designated or quasi-e	ndowment 🕨		••••							
b		anent endowment 🕨										
c		endowment 🕨										
_		ercentages on lines 2a	•	•								
3a		nere endowment funds lization by:	not in the possession	n of the d	organizatior	n that	are ne	eld and	d administered f	or the		Yes No
	•	related organizations									3	a(i)
	(ii) Re	elated organizations .									3	a(ii)
b	If "Yes	s" on 3a(ii), are the rela	ted organizations lis	ted as re	quired on S	Sched	ule R?					3b
4	Descr	ribe in Part XIII the inter			's endowm	ent fu	nds.					
Par	t VI	Land, Buildings, Complete if the org			' on Form	990,	Part I	V, lin	e 11a. See For	m 990, Part	X, line	10.
	Descri	ption of property	(a) Cost or other b (investment)	oasis	(b) Cost or	other	basis (d	other)	(c) Accumulated	depreciation		(d) Book value
1a	Land											
b	Buildin	gs										
		old improvements										
		nent					3,06	58,350		2,442,585		625,765

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

625,765

(2) Closely-	Complete if the organization answered "Yes" on Form 990, (a) Description of security or category (including name of security) Il derivatives	(b) Boo	k	(c) Metho	od of valuation: f-year market value
(2) Closely-	ll derivatives	Value		it of Cila of	year market value
	held equity interests				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 12.)	•			
Part VIII	Investments - Program Related. Complete if the organization answered 'Yes' on Form 990, (a) Description of investment	Part IV, lir	ne 11c. See Forr (b) Book value	(6	rt X, line 13. C) Method of valuation: or end-of-year market value
(1)				2331	
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colum	nn (b) must equal Form 990, Part X, col.(B) line 13.)	•			
Part IX	Other Assets. Complete if the organization answered 'Yes' on Form 990, F	Part IV, lin	e 11d. See Forn	n 990, Pai	t X, line 15.
(1) DICUT O	(a) Description				(b) Book value
(1) (1)	F USE ASSETS, NET				593,441
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
				. •	593,441
Part X	Other Liabilities. Complete if the organization answered 'Yes' on Form 990, F	Part IV, lin	e 11e or 11f.Se	e Form 99	00, Part X, line 25.
1.	(a) Description of liability income taxes				(b) Book value
DEFERRED	EVENT REVENUE				3,603
GIFT CERTIF					22,138 12,162
	ASE LIABILITIES - CURRENT ASE LIABILITIES - NONCURRENT				344,547 257,104
I IIVAINCE LE	ASE EINDIETTES - MONCONNENT				257,104
Total. (Colum	nn (b) must equal Form 990, Part X, col.(B) line 25.)			•	639,554
-	for uncertain tax positions. In Part XIII, provide the text of the footnot n's liability for uncertain tax positions under FIN 48 (ASC 740). Check	-			· · · · · · · · · · · · · · · · · · ·

1

2

3

5

1

2

3

4

5

Part XIII

PART X, LINE 2:

ADJUSTMENTS:

ADJUSTMENTS:

PART XI, LINE 2D - OTHER

PART XII. LINE 2D - OTHER

Part XII

b

891.460

7.877.075

7.877.075

8.381.353

891.460 7,489,893

7.489.893

Page 4

Schedule D (Form 990) 2022

Reconciliation of Revenue per Audited Financial Statements With Revenue per

Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue, gains, and other support per audited financial statements . . . Amounts included on line 1 but not on Form 990. Part VIII. line 12:

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Amounts included on Form 990. Part IX. line 25. but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Donated services and use of facilities

Prior year adjustments

Other (Describe in Part XIII.)

Other (Describe in Part XIII.) Add lines **4a** and **4b**

Supplemental Information

Add lines 2a through 2d

Subtract line 2e from line 1 .

Return Reference

Other losses . .

Net unrealized gains (losses) on investments

Other (Describe in Part XIII.)

Add lines 2a through 2d

Subtract line 2e from line 1 . Amounts included on Form 990, Part VIII, line 12, but not on line 1:

Investment expenses not included on Form 990. Part VIII. line 7b.

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

COST OF GOODS SOLD 734,536.

COST OF GOODS SOLD 734,536.

2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

CODIFICATION (ASC).

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines

Total expenses and losses per audited financial statements

2a

2b

2с

2d

4b

Explanation

THE CLUB HAS EVALUATED ITS TAX POSITION AND CONCLUDED THAT THE CLUB HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE INCOME TAX TOPIC OF THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS

2a

2b

2с 2d

4b

4c

156.924

734.536

2e

4c

156.924

734.536

2e

3

Schedule D (Form 990) 2022

DLN: 93493030018624 efile GRAPHIC print **Submission Date - 2024-01-30** SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for the latest information. **Open to Public** Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** THE MEADOWS COUNTRY CLUB INC 65-0065871 Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g Art—Works of art . Art—Historical treasures Art—Fractional interests Books and publications Clothing and household aoods Cars and other vehicles Boats and planes . . 8 Intellectual property . . Securities—Publicly traded . Securities—Closely held stock . 10 Securities—Partnership, LLC, or trust interests . . . 12 Securities—Miscellaneous . Qualified conservation contribution—Historic structures Qualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial . 16 17 Real estate—Other . Collectibles . . 18 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . Archeological artifacts . 156,924 FAIR VALUE **ADVERTISING** Х SUPPORT -TRADE TIME 25 Other ▶ (ROUNDS) Other ▶ (___ 27 Other ▶ (_ 28 Other ▶ (_ Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? . . . 30a No **b** If "Yes," describe the arrangement in Part II. 31 No Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . 32a No **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J Schedule M (Form 990) (2022)

Schedule M (Forr	m 990) (2022)		Page 2		
is	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.				
Retur	rn Reference	Explanation			
		Schedule M (Form 990)	(2022)		

efile GRAPHIC print Submission Date - 2024-01-30 DLN: 93493030018624 OMB No. 1545-0047 SCHEDULE O Supplemental Information to Form 990 or 990-EZ (Form 990) Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Department of the ► Attach to Form 990 or 990-EZ. Open to Public Treasury ► Go to www.irs.gov/Form990 for the latest information. Inspection Internal Revenue Name of the organization **Employer identification number** 65-0065871 Return Explanation Reference THE ORGANIZATION DELEGATES CONTROL OVER MANAGEMENT DUTIES CUSTOMARILY PERFORMED BY OR FORM 990. PART VI. UNDER THE DIRECT SUPERVISION OF OFFICERS, DIRECTORS, TRUSTEES, OR KEY EMPLOYEES TO ICON SECTION A. MANAGEMENT. AN INDEPENDENT CORPORATION. LINE 3 FORM 990. THE CLUB APPROVED THE ELIMINATION OF MEMBER EQUITY DURING 2022 IN THEIR BYLAWS AND THUS, PART VI. THERE IS NO LONGER A DISTINCTION BETWEEN EQUITY AND NON-EQUITY MEMBERS. SECTION A. LINE 4 FORM 990. THE ORGANIZATION IS A PRIVATE COUNTRY CLUB WITH MEMBERS THAT CAN VOTE ON VARIOUS MATTERS PART VI. INCLUDING ELECTING THE BOARD OF DIRECTORS, CHANGES IN ORGANIZATIONAL DOCUMENTS, AND SECTION A. SPECIAL ASSESSMENTS. LINE 6 FORM 990. THE ORGANIZATION IS A PRIVATE COUNTRY CLUB WITH MEMBERS THAT VOTE ON VARIOUS MATTERS PART VI, INCLUDING ELECTING THE BOARD OF DIRECTORS, CHANGES IN ORGANIZATIONAL DOCUMENTS, APPROVAL SECTION A, OF SPECIAL ASSESSMENTS, AND SIGNIFICANT CHANGES IN ACTIVITIES AND OPERATIONS. ELECTION OF LINE 7A OFFICERS AND DIRECTORS IS MADE BY THE FOLLOWING MEMBERSHIP CATEGORIES: FULL PLATINUM, FULL GOLD, SOCIAL, SPORTS, AND TENNIS. FORM 990. THE ORGANIZATION IS A PRIVATE COUNTRY CLUB WITH MEMBERS THAT VOTE ON VARIOUS MATTERS INCLUDING ELECTING THE BOARD OF DIRECTORS, CHANGES IN ORGANIZATIONAL DOCUMNETS, APPROVAL PART VI. OF SPECIAL ASSESSMENTS. AND SIGNFICANT CHANGES IN ACTIVITIES AND OPERATIONS. SECTION A. LINE 7B FORM 990. THE FORM 990 IS REVIEWED AND APPROVED BY THE TREASURER AS WELL AS THE CONTROLLER PRIOR TO PART VI. FILING AND IS AVAILABLE FOR INSPECTION BY THE MEMBERSHIP AND PUBLIC. ANY MATTERS OF SECTION B. SIGNIFICANCE RELATING TO FORM 990 WOULD BE DISCUSSED AT THAT TIME WITH THE BOARD OF LINE 11B DIRECTORS PRIOR TO FILING. FORM 990. THE ORGANIZATION HAS A WRITTEN CONFLICT OF INTEREST POLICY AND KEY EMPLOYEES ARE REQUIRED PART VI. TO ACKNOWLEDGE COMPLIANCE WITH SUCH POLICY ANNUALLY. SECTION B. LINE 12 FORM 990. EVERY YEAR THE GENERAL MANAGER RECEIVES A REVIEW FROM THE MANAGEMENT COMPANY'S REGIONAL PART VI. MANAGER WHO CONSULTS AND COLLABORATES WITH THE CLUB'S BOARD PRESIDENT. COMPENSATION OF SECTION B. KEY EMPLOYEES AND UPPER MANAGEMENT IS EVALUATED AND REVIEWED ANNUALLY BY THE MANAGEMENT LINE 15 COMPANY AND INCLUDES COMPARISONS WITH COMPENSATION LEVELS WITH SIMILAR LOCAL PRIVATE CLUBS. WHICH IS REVIEWED WITH THE BOARD PRESIDENT. FORM 990, UPON REQUEST, GOVERNING DOCUMNETS, FINANCIAL STATEMENTS, AND TAX RETURNS ARE AVAILABLE FOR PART VI, PUBLIC INSPECTION. SECTION C, LINE 19 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or Cat. No. 51056K Schedule O (Form 990) 2022 990-EZ.

