990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2018

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

<u>A</u>	For the	2018 calend	lar year, or tax year begin	ining		, 2018, and er	nding		, 20		
В	Check if	applicable	C Name of organization Gree	en Valley Rec	reation, Inc			┒▫	Employer identification no.		
	Address	change	Doing business as					٦.	23-7185629		
	Name ch	ange	Number and street (or PO. bo	ox if mail is not delivered to	o street address)		Room/suite		Telephone number		
	Initial reti	•	PO Box 586					1	(520) 625-3440		
\Box		rn/terminated	City or town, state or province	country and ZIP or forei	nn nneigl code		G Gross receipts				
\boxtimes	Amended		Green Valley,	•	gir postar code						
L.		1		***************************************	A				\$ 10,777,077		
ш	Applicati	on pending	F Name and address of princips		Crothers		H(a) is this a group				
			Same as C abov		<u> </u>		H(b) Are all subor	dinates	included? Yes No		
!		npt status	501(c)(3) X 501(c) (4) (insert no)	4947(a)(1) or	527	If "No," a	ittach a l	list. (see instructions)		
1	Website		v.qvrec.org				H(c) Group exci	nption n	umber 🕨		
				sociation 🔲 Other 🕨		L Year of formation: 1	972 M State	of legal	domicile AZ		
14.5	art I	Summar	· · · · · · · · · · · · · · · · · · ·								
	1	Briefly descri	ibe the organization's miss	ion or most significa	nt activities: To]	promote the c	common good	and	general		
ģ		welfare	of its members th	rough the op	eration and ma	intenance of	recreation	al a	and social		
Governance		faciliti	es and the sponso	orship of cul	tural, educati	onal and civ	ic activiti	es c	of the senior		
Ĕ			y of Green Valley			- N					
o Ve	2		ox 🕨 🗌 if the organization	<u> </u>	perations or disposed of	of more than 25% of	fits net assets.				
Ö	3		oting members of the gove				1	3	12		
Activities &	4		ndependent voting member		DATE:	100 m		4	12		
ij	5		r of individuals employed in		- · · · · · · · · · · · · · · · · · · ·	985. 386		5			
Ž	6		r of volunteers (estimate if			30 M		6	150		
Ą	7a		ed business revenue from	**	100 PER 100 PE	*X6984686***			100		
	4				*** ANT ******			7a	0		
	- 0	ivet unrelate	d business taxable income	110m Form 990-1, 1	ne 38			7b	0		
Revenue						Ļ.	Prior Year		Current Year		
	8		s and grants (Part VIII, line	3000			9,959	<u>, 808</u>	3,092,361		
	9	Program ser	vice revenue (Part VIII, line	∋2g) · · · • · ·			747	,359	7,579,113		
Š	10		ncome (Part VIII, column (WARRANA.	220		643	,898	57,687		
æ	11	Other revenu	ue (Part VIII, column (A), li	nes 5, 6d, 8c, 9c, 10	c, and 11e) · · · ·		36	,533	47,916		
	12	Total revenue	e - add lines 8 through 11 (must equal Part VII	l, column (A), line 12)		11,387	,598	10,777,077		
	13	Grants and s	similar amounts paid (Part	IX, colum n (A), lines	: 1-3)				0		
	14	Benefits paid		0							
۰,	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 4 , 481 , 186 4 , 6							4,601,268		
Expenses	16a	Professional	fundraising fees (Part IX,	column (A), line 11e)				0		
ē	b		sing expenses (Part IX, co	5 "Walker		43,470					
X	17		ses (Part IX, column (A), li			45,410	4,825	040	5,680,646		
	18	-	ses. Add lines 13-17 (must	*******	•		9,306				
	19		s expenses. Subtract line			}		•	<u> </u>		
- 50		110101100100	о сирепосо. Одопаерине	ig nomine tz ·		- _	2,081				
ts o	20	Total accute	(Part X, line 16)			 	Beginning of Current		End of Year		
SS	20 24		**************************************		• • • • • • • • • • •		31,798				
Net Assets	21		es (Part X, line 26)			· · · · · · ·	4,969				
			r fund balances. Subtract	line 21 from line 20			26,828	<u>,329</u>	27,323,492		
$\overline{}$	rt II		re Block								
Irue	ier penait : correct.	ids of perjury, I dec and complete. Dec	clare that I have examined this retu claration of preparer (other than of	irn, including accompanyi ficer) is based on all infori	ng schedules and statements mation of which preparer has	and to the best of my kn any knowledge	owledge and belief, it i	\$			
		I. ***		·····	· ,						
e:-			LES SIECK								
Sig		Signatur	re of officer					Date			
He	re	CHAR	LES SIECK, PRESI	DENT							
		Type or	print name and title								
		Print/Type pre	parer's name	Preparer's signature	Λ -	Date	Check	ıı P	TIN		
Pai	id	Scott F	R Meyer CPA	PLAM	Lucpa	08-01-2019	self-employi	adi	P01200065		
Pre	pare			. Meyer, CPA	P.C.		Firm's EIN				
	e Onl			st Fort Lowel			Phone no.				
					- LOS BUG DOS			20 <u>-</u> 0	01-2724		
Mari	the ID	C dinavon this	return with the presence of	AZ 85719			1 5.	2U-8	81-3734		

	n 990 (2018) Green Valley Recreation, Inc nt III Statement of Program Service Accomplishments	23-7185629	Page 2
្រេង			
1	Check if Schedule O contains a response or note to any line in this Part III		• • • • • •
•	To promote the common good and general welfare of its members through the ope	4. 7	
	maintenance of recreational and social facilities and the sponsorship of cult		
	educational and civic activities of the senior community of Green Valley, AZ		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	···· Yes 🔀	No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	· · · · 🗌 Yes 🕱	No
4	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured		
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth the total expenses, and revenue, if any, for each program service reported.	ers,	
	the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 8,118,400 including grants of \$) (Revenue	\$ 7,579,1	13)
	Provided recreational, cultural, educational and social opportunities to enhance		
	and lives for the 13,585 member households of Green Valley, AZ	***************************************	

4b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)

			**
			MILLION
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)

			MIN
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
<u>4e</u>	Total program service expenses ▶ 8,118,400		

	990 (2018) Green Valley Recreation, Inc 23	-7185 (529	P	age 3
1 41	The office of required or reduced				Γ
1	le the organization described is specified FO1/a)/2) or 4047/a)/1) (other than a private foundation)? If "Yea"			Yes	No
ı	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		١,		Ų,
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		1		X
2			2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to				١,,
	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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,				
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part II		7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"				
	complete Schedule D, Part III		8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a				
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or				
	debt negotiation services? If "Yes," complete Schedule D, Part IV		9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			1	<u> </u>
	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,		(8500-87)	249000	AGR:
•••	VII, VIII, IX, or X as applicable.		2000		\$ 135° v.
а			AEA4526/A	PET 0000548136	The second
a	complete Schedule D, Part VI		11a	_v	
L .			iid	X	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more		441.	١,,	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		11b	X	
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more		1		١.,
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		11c	ļ	X
d					l
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		11d		X
0	b.		11e		X
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	ļ	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 + + + + +	. <i>.</i>	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		13		Χ
14a	Did the organization maintain an office employees, or agents outside of the United States?		14a		X
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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or				T
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			1	
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	. , - ,		\vdash	12
• •	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		17		X
18	Did the granization report more than \$15,000 total of fundraising event gross income and contributions on			 	1

-	m 990 (2018) Green Valley Recreation, Inc 23-7185 art IV Checklist of Required Schedules (continued)	629	F	age 4
			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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
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		Χ
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
¢	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		
ď	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	25a		Х
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	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes." complete Schedule L. Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L.	The state of	\$48.5g	80.3
	Part IV 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		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		<u> </u>
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			<u> </u>
	or IV, and Part V, line 1	34		Х
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		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		·	11
	19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	
Par	V Statements Regarding Other IRS Filings and Tax Compliance	,	7.1	<u> </u>
	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	2502000		75
b	Enter the number of Form W 2G included in line to Finter O Knowledge	1000000		S.
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
	reportable gaming (gambling) winnings to prize winners?	10	V 47(1)	3.47
		, ,,		

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 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 2a 150 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? b 2b Χ Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b 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)? 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). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b C If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 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? Ь If "Yes," did the organization include with every solicitation an express statement that such contributions or 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 b 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 С required to file Form 8282? đ Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? e 7e f Did the organization, during the year, pay premiums, directly or indirectly on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? g 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? а 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? b 9b 10 Section 501(c)(7) organizations. Enter: а Initiation fees and capital contributions included on Part VIII, line 12 þ Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter а Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources b against amounts due or received from them: 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. 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. 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 c Did the organization receive any payments for indoor tanning services during the tax year? 14a 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O b 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 If "Yes," see instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O.

Form 990 (2018) Green Valley Recreation, Inc Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 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. Enter the number of voting members included in line 1a, above, who are independent 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 Χ 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 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? ñ Did the organization have members or stockholders? 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? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Nα Did the organization have local chapters, branches, or affiliates? Χ If "Yes," did the organization have written policies and procedures governing the activities of such chapters. affiliales, 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? 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 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 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 15a 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 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Arizona 17 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website ☐ 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.

State the name, address, and telephone number of the person who possesses the organization's books and records:

CHERYL MOOSE (520) 625-3440, PO BOX 586, Green Valley, AZ 85622

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Form 990 (201	8) Grei	en Vallev	Recreation	. Inc			23-71		Page 7
Part VII	Compensation	of Officers	, Directors,	Trustees,	Key Employees	, Highest C	ompensated	Employee	s, and
	Independent Co	ontractors							

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.
- 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.

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

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

At Check this box it heither the organization for any retar	1						&			
				(0		*		ł.		
(A)	(B)	(do n	of cha	Posi ick mo	tion are than	n one	2000	(D)	(E)	(F)
Name and Title	Average	box,	unles	s pers	on is b	ooth an		Reportable	Reportable	Estimated amount of
	hours per week (list any	offic	er and	i a dire	octor/tn	rustoe)		compensation from	compensation from related	other
	hours for	ļ	г	ALTE		1	\dashv	the	organizations	compensation
	related	or di	insti	Officer	<u>ૄ</u>	en H	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations below dotted	Individual trustee or director	5	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Key employee	3 8	ğ	(44-2) (055-101130)		and related
	line)	, a	Pa		oye	" §	.			organizations
		8	Institutional trustee	ľ	m	ens:				
			e l	soupă		Highest compensated employee				
		1			1					
		1	<u>&</u>		-		-		1	
(1) Donna Coon		1 . 2	Ž					_		_
Vice President		X	Ĭ	X					0	0
(2) Denise Nichols	2.00_							_		
Secretary		X		Х					0_	0
(3) Tom Sadowski	50_0							_		
Asst Treasurer		X	-	X			4		0	0
(4) Roger Myers	3.00_				Ì	[-		_	
Treasurer		X	-	X					0_	0
(5) Nina_Campfield	2 _00_							_		
Director	<u> </u>	X	<u> </u>					(0	0
(6) Tim Stewart	2 .00					İ	ł		_	
Director		X	-	-					0	<u> </u>
(7) Carol Crothers	20.00_									
President		X	-	X			_	(00	0
(8) Lynne Chalmers	2.00_									
Director		X						(0	0
(9) Charles Sieck	5 .00_	.				İ				
Director		X	ļ	ļ				• • • • • • • • • • • • • • • • • • • •	0	0
(10)Sandra Thornton	4.00								_	
Director		X		ļ					0	0
(11)Gail_Vanderhoof	20.00								_	
Director		X	<u> </u>						00	0
(12)Cheryl Moose	40.00								1 .	
CFO				_	X			90,01	3 0	11,794
(13)Kent Blumenthal	50.00	-								
CEO		ļ		ļ		Х		160,17	7 0	22,231
(14)		-		ļ						
				<u> </u>						1
										Form 990 /2018

	(A) Name and title		(C) Position (do not check more than one box. unless person is both an officer and a director/trustoe)						(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
		hours for related organizations below dotted 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
(15)											
(16)											
(17)											
<u>(18)</u>											
(19)							4				
(20)											
(21)							Second de	è			
(22)								þ			
(23)											
(24)											
(25)				25 St.							
1b	Sub-total										
c d	Total (add lines 1b and 1c)							-	250,19	o	0 34,025
2	Total number of individuals (including but not limite reportable compensation from the organization	d to those list	ed abo	ove)	who	гес	eived n	nore	than \$100,000 of		1
3	Did the organization list any former officer, director		ev em	niov	ee (r hic	nhest c	ome	pensated		Yes No
J	employee on line 1a? If "Yes." complete Schedule										. 3 X
4	For any individual listed on line 1a, is the sum of re	portable com	ipensa	tion	and	othe	er com	pen	sation from the		
	organization and related organizations greater than individual	1 \$150,000? <i>ا</i>	f "Yes,	" coi	mple	te S	chedul	e J	for such		. 4 X
5	Did any person listed on line 1a receive or accrue										
•	for services rendered to the organization? If "Yes,"										. 5 X
Secti	on B. Independent Contractors										
1	Complete this table for your five highest compensation from the organization. Report comp										
	year.	***************************************									
	(A) Name and business addres	s							Description	3) of services	(C) Compensation
2	Total number of independent contractors (includin received more than \$100,000 of compensation from			hose	e list	ed a	bove)	who			

Form 990 (2018) Green Valley Recreation, Inc
Part VIII Statement of Revenue

	tesi laaresti	Check if Schedule O contains a response	e or no	te to any line in thi	s Part VIII		<i></i>	<u> []</u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revonue excluded from tax under sections 512-514
रें रे	1a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
o e	c	Fundraising events	1c		1			
記言	d	Related organizations	1d				5 0 6 6 6 6	
si ji	e	Government grants (contributions)	1e				5886666	46 G T T T T T T T T T T T T T T T T T T
er S	f	All other contributions, gifts, grants,						Sugaranta
je S		and similar amounts not included above	1f	3,092,361				
급	g	Noncash contributions included in lines 1a-	1f: S					
	h				3,092,361	0.5 4.5 9.4 5		
				Business Code	-, -, -, -, -, -, -, -, -, -, -, -, -, -			Marin 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -
Program Service Revenue	2a	Recreational programs		713990	736,508	736,508	VACABLE (1995) - NIII (1995) - HILL (1995) -	- Participate Prodesion as Alica La Royal Caraba - 11
ě	Ь			713990	152,220			
32	c			713990	6,690,385			
Şer	d		***********					
Ë	0							
ğ	f	All other program service revenue			*	k.		
<u></u>		Total. Add lines 2a-2f			7,579,113	1.00		
	3	Investment income (including dividends, inte and other similar amounts)	rest,		57,687		and the second s	57,687
	4	Income from investment of tax-exempt bond			4.	4894		
	5	Royalties · · · · · · · · · · · · · · · · · · ·		<u> ▶</u>				
	1	(i) Real		(ii) Personal				
	6a	Gross rents						
	b	Less: rental expenses · · · ·						
	C	Rental income or (loss)	Á			0.02.000		
	d	Net rental income or (loss)		· · · · · · · · · · · •				
	7a	Gross amount from sales of (i) Securities	25	(ii) Other				
		assets other than inventory		Charman and the				
	b	Less: cost or other basis			40000000	0.000 0.000		
		and sales expenses · · · ·	,		3 6 9			
	I	Gain or (loss)	Allen.					55.00
d)		Net gain or (loss) · · · · · · · · · · · · · · · · · ·		·// · · · · · >				
Revenue	8a	Gross income from fundraising) }	wist."		2 1 1 1 1 1 1 1 1		
eve		events (not including \$						
1		of contributions reported on line 1c).						
Othe		See Part IV, line 18		4				
0		Less: direct expenses						
		Net income or (loss) from fundraising events						
	9a	Gross income from gaming activities.						
		See Part IV, line 19 · · · · · · · · · · · · · · · · · ·						
		Less: direct expenses						
	С	Net income or (loss) from gaming activities	٠.,	>				
		Gross sales of inventory, less returns and allowances						rentes es
		Less: cost of goods sold						100 00 00 00 00 00 00 00 00 00 00 00 00
	C	Net income or (loss) from sales of inventory						
	44	Miscellaneous Revenue		Business Code				
		Miscellaneous		713990	47,916	47,916		
	b							
	C C	All All			****			
		All other revenue	٠٠ [
		Total roughus See instructions		• • • • • • •	47,916		and the second second	1.650.65.760
	12	Total revenue, See instructions		· · · · · · · •	10,777,077	7,627,029	o	57 687

Form 990 (2018) Green Valley Recreation, Inc Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response or note to	any line in this Part IX			
Do r	ot include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	Pb, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	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				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	' '			
	trustees, and key employees	160,177		144,159	16,018
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	3,420,960	2,757,475	663,485	
8	Pension plan accruals and contributions (include			000/100	
	section 401(k) and 403(b) employer contributions)	114,988	88,541	25,987	460
9	Other employee benefits	622,233	478,612	140,055	3,566
10	Payroll taxes	282,910 "	217,841	63,938	1,131
11	Fees for services (non-employees):	202,010	227,002	33,333	1,101
а	Management				
b	Legal	183,208	64,398	116,292	2,518
C	Accounting	42,011	16,533	24,969	509
d	Lobbying · · · · · · · · · · · · · · · · · · ·	AZ, OII	10,555	24,909	309
e	Professional fundraising services. See Part IV, line 17		<u> </u>		
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
3	(A) amount, list line 11g expenses on Schedule O.)	6 22 ,587	622,587		
12	Advertising and promotion	3,754	1,310	2,395	49
13	Office expenses	3,734	1,510	2,333	47
14	Information technology	360,325	170 276	184,190	3 750
15	Royalties	300,323	172,376	104,190	3,759
16	Occupancy	1,694,833	1,583,245	100 256	2,232
17	Travel	5,220		109,356	
18	Payments of travel or entertainment expenses	5,220	4,545	661	14
. •	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	58,099	49,274	8,649	176
20	Interest · · · · · · · · · · · · · · · · · · ·	36,099	49,2/4	0,649	1/6
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,474,941	1 252 700	016 016	4 405
23	Insurance	196,848	1,253,700 24,120	216,816 169,263	4,425
24	Other expenses, Itemize expenses not covered	190,848	24,120	109,203	3,465
	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.)			6.66.63.63.63.63.6	
а		060 074	047 000		
b	Operating supplies	260,274	247,830	12,195	249
	Event supplies	44,016	27,370	16,294	352
ų C	Communications	93,552	85,124	8,259	169
d	Bank/CC fees All other expenses	70,569	38,794	31,125	650
e 25		570,409	384,725	181,956	3,728
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	10,281,914	8,118,400	2,120,044	43,470
~~	organization reported in column (B) joint costs				
	from a combined educational campaign and			1	
	fundraising solicitation. Check here		1		
	following SOP 98-2 (ASC 958-720)	I.	I		

Part X

Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year Cash - non-interest-bearing 1 2 2 4,539,157 1,099,888 3 Pledges and grants receivable, net 3 Accounts receivable, net 123,604 4 97,020 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L Notes and loans receivable, net 7 Assets 8 Prepaid expenses and deferred charges 173,447 207,872 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 36,948,052 Less: accumulated depreciation 10b 16,686,927 10c 16,632,511 11 Investments - publicly traded securities 11 781,936 721,576 12 Investments - other securities. See Part IV, line 11 12 9,492,985 10,274,139 13 Investments - program-related. See Part IV, line 11 13 Intangible assets 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 31,798,056 16 29,033,006 17 17 409,922 342,959 18 18 19 Deferred revenue 19 4,559,805 1,366,555 20 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, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 4,969,727 26 1,709,514 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 26,828,329 27,323,492 28 29 Organizations that do not follow SFAS 117 (ASC 958), check here 📗 📗 and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 26,828,329 33 27,323,492 34 Total liabilities and net assets/fund balances 31,798,056 34 29,033,006

Form	OOA	(2018)	

Green	Vallev	Recreation.	Inc

2	3-7	10	56	20

Page 12

Pa	rt XI Reconciliation of Net Assets		ige iz
L	Check if Schedule O contains a response or note to any line in this Part XI		. П
1	Total revenue (must equal Part VIII, column (A), line 12)	10,777,0	
2	Total expenses (must equal Part IX, column (A), line 25)	10,281,9	
3	Revenue less expenses. Subtract line 2 from line 1	495,1	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	26,828,3	
5	Net unrealized gains (losses) on investments		
6	Donated services and use of facilities	***************************************	****
7	Investment expenses		
8	Prior period adjustments		***************************************
9	Other changes in net assets or fund balances (explain in Schedule O)	***************************************	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line		
	33, column (B))	27,323,4	192
Pa	rt XII Financial Statements and Reporting	***************************************	
	Check if Schedule O contains a response or note to any line in this Part XII		. 🗌
		Yes	No
1	Accounting method used to prepare the Form 990: Cash Cash Cher	Paragas years	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		
	Schedule O.	84 6 US 744	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Χ
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		
	reviewed on a separate basis, consolidated basis, or both:		
	Separate basis Consolidated basis Both consolidated and separate basis		950
į;	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	6 6 5 E	N. V
	separate basis, consolidated basis, or both:	A) (8) (2, 3, 4)	
	X Separate basis		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c X	
	If the organization changed either its oversight process or selection process during the tax year, explain in	(3.18) P. (2.1)	
	Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		
	the Single Audit 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		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	
FFA		Earm 999 /	20401

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2018

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below.

if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

•	Section 501(c)(4), (5), or (6) organizations	: Complete Part III.					
Nam	e of organization			8	mployer i	dentification number	_
_G1	meen Valley Recreation, Inc				23-718	5629	
Pa	rt I-A Complete if the organ	ization is exempt under secti	on 501(c) or i	s a section 5	27 orga	nization.	_
1	Provide a description of the organization's	s direct and indirect political campaign as	tivities in Part IV. (see instructions f	or or		
	definition of "political campaign activities";						
2	Political campaign activity expenditures (s	see instructions)			▶ \$		
3	Volunteer hours for political campaign act	ivities (see instructions)					
Pa	rt I-B Complete if the organ	ization is exempt under secti	on 501(c)(3).				_
1	Enter the amount of any excise tax incurre	ed by the organization under section 495	5	į	▶ \$		_
2	Enter the amount of any excise tax incurre	ed by organization managers under sect	on 4955 · · ·	.	▶ s		
3	If the organization incurred a section 4955						No
4a	Was a correction made?			<i>¶.</i>		· 🗍 Yes 🦷	No
d	If "Yes," describe in Part IV.						
Pa	rt I-C Complete if the organ	ization is exempt under secti	on 501 (c), exc	ept section	501(c)(3).	_
1	Enter the amount directly expended by the						
	activities · · · · · · · · · · · · · · · · · · ·				▶ \$		
2	Enter the amount of the filing organization	i's funds contributed to other organizatio	s for section				
	527 exempt function activities · · · · ·				► s		
3	Total exempt function expenditures. Add li						_
	line 17b				▶ \$		
4	Did the filing organization file Form 1120-l	POL for this year?					No
5	Enter the names, addresses and employe	er identification number (EIN) of all section	n 527 political orga	anizations to whic	h the filing		
	organization made payments. For each or	ganization listed, enter the amount paid	from the filing orga	nization's funds.	Also enter		
	the amount of political contributions receive	ed that were promptly and directly deliv	ered to a separate	political organizat	ion, such		
	as a separate segregated fund or a politic					<u>′</u> .	
	(a) Name	(b) Address	(c) EIN	(d) Amount pa			_
	(4)	(b) Address	(0) [114	filing organiza		(e) Amount of political contributions received a	nd
				funds. If none, o	nler -0-	promptly and directly	
						delivered to a separate political organization.	
						If none, enter -0	
(1)		~					_
(1)							
(2)							
(2)							
/21							_
(3)							
/4\	The spread of the second of th						_
(4)							
/P)							
(5)							
(6)							

	art II-A Complete if the organization	Recreation,	Inc		23-7185	629 Page 2
[1 8 6]	art II-A Complete if the organization section 501(h)).	on is exempt u	ınder section 5	01(c)(3) and file	d Form 5768 (ele	ction under
A	Check ► ☐ if the filing organization belongs to	an affiliated group	(and list in Part IV a			
	address, EIN, expenses, and sha	re of excess Johnvir	o (and list in Fait IV 6	acn annated group m	ember's name,	
В	Check ▶ ☐ if the filing organization checked b	ox A and "limited o	ng expenditules).	ml		
	Limits on Lob	bying Expenditure	onitor provisions ap	ріу.		
	(The term "expenditures" r	neans amounts n	aid or incurred \		(a) Filing organization's totals	(b) Affiliated
1a	Total lobbying expenditures to influence public or	pinion (grass roots)	Inhiving)		organizations totals	group totals
ŧ	Total lobbying expenditures to influence a legisla	tive body (direct lob	hvina)			
c)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
c	Other exempt purpose expenditures	, 				
e		and 1d)				
f	Lobbying nontaxable amount. Enter the amount t	from the following to	able in both			
	columns.	· · · · · · · · · · · · · · · · · · ·				
	If the amount on line 1e, column (a) or (b) is:	The lobbying	g nontaxable amou	nt is:		Gentle State Company of the
	Not over \$500,000		mount on line 1e.			
	Over \$500,000 but not over \$1,000,000		s 15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000		s 10% of the excess			
	Over \$1,500,000 but not over \$17,000,000		s 5% of the excess o			
	Over \$17,000,000	\$1,000,000.		940, 93,000,000.		
g	Grassroots nontaxable amount (enter 25% of line					See 1897 Carlotte St.
h	Subtract line 1g from line 1a. If zero or less, enter	r-0-				
ì	Subtract line 1f from line 1c. If zero or less, enter	-0-				
j	If there is an amount other than zero on either line	e 1h or line 1i, did t	he organization file F	orm 4720		
	reporting section 4911 tax for this year?			<u> </u>		Yes No
		4-Year Averagi	ing Period Under	r section 501(h)		
	(Some organizations that made a se	ection 501(h) el	ection do not ha	ve to complete all	of the five column	s below.
	See	the separate in	nstructions for li	nes 2a through 2f	.)	
			No. all	_		
	Lobby	ing Expenditures	During 4-Year Aver	raging Period		
	Calendar year (or fiscal year	(a) 2015	(b) 2016	(*) 2047	4.0.0046	
	beginning in)	(-/	(b) 2010	(c) 2017	(d) 2018	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount	propietico (g. 660 cm)		1 2 5 6 6 5 6 6		
****	(150% of line 2a, column (e))					
C	Total lobbying expenditures					
d	Grassroots nontaxable amount	.				
	0			en la contraction de la contraction de la contraction de la contraction de la contraction de la contraction de		
e	Grassroots ceiling amount (150% of line 2d, column (e))		0.0000000			
f	Grassroots lobbying expenditures					
EEA			<u> </u>		<u> </u>	

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 Green Valley Recreation, Inc Page 3 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (a) (b) For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. Yes No Amount During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? f Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 Х Did the organization make only in-house lobbying expenditures of \$2,000 or less? Х Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Х Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of 2 political expenses for which the section 527(f) tax was paid). 2b C 2c 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part I-B, line Also, complete this part for any additional information.

SCHEDULE D (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.

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

2018

Open to Public Inspection

Name	of the organization			Employer identification number
Gr	en Valley Recreation, Inc			23-7185629
Pa	rt I Organizations Maintaining Donor Advis	ed Funds or Other Simil	ar Funds or Accou	ints.
	Complete if the organization answered "Y			
		(a) Donor advised for	ınds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisor	s in writing that the assets hel	d in donor advised	
	funds are the organization's property, subject to the organization			· · · · · · · · · · · · · · · · · · ·
6	Did the organization inform all grantees, donors, and do			
	only for charitable purposes and not for the benefit of the			
D-	conferring impermissible private benefit?			Yes No
ra	till Conservation Easements.		An.	
	Complete if the organization answered "		line 7.	
1	Purpose(s) of conservation easements held by the orga		Alba.	
	Preservation of land for public use (e.g., recreation	· ·	ervation of a historical	
	Protection of natural habitat	☐ Pres	servation of a certified I	historic structure
_	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a	jualified conservation contribu	tion in the form of a co	200 C 200 C
_	easement on the last day of the tax year.			Held at the End of the Tax Year
a b			**S878:-	
c	Total acreage restricted by conservation easements			
d	Number of conservation easements on a certified histor		• • • • • • • • • • • • • • • • • • • •	· 2c
u	Number of conservation easements included in (c) acquired historic structure listed in the National Register	2007		
3	-			· [2d]
·	Number of conservation easements modified, transferre tax year	o, released, extinguished, or to	erminated by the organ	uzation during the
4	Number of states where property subject to conservatio	a accoment is located		
5	Does the organization have a written policy regarding th		n handling of	
_	violations, and enforcement of the conservation easeme	nts it bolds?		Yes
6	Staff and volunteer hours devoted to monitoring, inspect			
	>	g or troiled or troiled	omoromy conscivatio	are described adding the year
7	Amount of expenses incurred in monitoring, inspecting,	andling of violations, and enfo	orcing conservation ea	sements during the year
	▶ \$, , , ,		come toring the year
8	Does each conservation easement reported on line 2(d)	above satisfy the requirement	s of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?			· · · · · · · · · · · · · · · · · · ·
9	In Part XIII, describe how the organization reports conse	rvation easements in its rever	ue and expense state	ment, and
	balance sheet, and include, if applicable, the text of the	ootnote to the organization's fi	nancial statements tha	at describes the
	organization's accounting for conservation easements.			
Pa	t III Organizations Maintaining Collect			ther Similar Assets.
	Complete if the organization answered "			
1a	If the organization elected, as permitted under SFAS 116	(ASC 958), not to report in its	revenue statement ar	nd balance sheet
	works of art, historical treasures, or other similar assets			
	public service, provide, in Part XIII, the text of the footno			
b	If the organization elected, as permitted under SFAS 116			
	works of art, historical treasures, or other similar assets		ation, or research in fu	rtherance of
	public service, provide the following amounts relating to			
	(i) Revenue included on Form 990, Part VIII, line 1			
2	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historica			provide the
_	following amounts required to be reported under SFAS 1			
a	Revenue included on Form 990, Part VIII, line 1			****
b	Assets included in Form 990, Part X			> \$

	ule D (Form 990) 2018 Green Valley Re	creation, In	C				23-718			age 2
Pa	rt III Organizations Maintaining Co							ets (co	ntinuec	1)
3	Using the organization's acquisition, accession, a	ind other records, c	heck any of	the followi	ng that are a	significa	nt use of its			
	collection items (check all that apply):									
а	Public exhibition		in or exchar	nge progra	ms					
b	Scholarly research	e 📙 Oth	ner							
C	Preservation for future generations									
4	Provide a description of the organization's collect	ions and explain ho	w they furth	er the orga	ınization's ex	cempt pur	pose in Part			
	XIII.									
5	During the year, did the organization solicit or rec							,		,
	assets to be sold to raise funds rather than to be		of the organ	nization's c	ollection?			· · L	Yes	No
Pal	rt IV Escrow and Custodial Arrang			00 0-4	0.7 Cm = 0					
	Complete if the organization an 990, Part X, line 21.	swered "Yes" o	n Form 9	90, Part	IV, line 9,	, or rep	orted an amo	unt on H	·orm	
1a	Is the organization an agent, trustee, custodian o	r other intermedian	for contribu	itions or ot	her assets n	ot				
	included on Form 990, Part X?								Yes [No
b	If "Yes," explain the arrangement in Part XIII and	complete the follow	ing table:							
							A	mount		
C	Beginning balance					1c				
d	Additions during the year	<i></i>		<i>.</i> .		1d				
е	Distributions during the year	. 			🔥	1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Form	990, Part X, line 21	, for escrow	or custodi	al account lia	ability?		🗌	Yes	No
b	If "Yes," explain the arrangement in Part XIII. Che	ck here if the expla	nation has l	oeen provid	ded on Part	XIII -	. <i></i>		[
Pai	rt V Endowment Funds.				N. Y).			•	
	Complete if the organization an	swered "Yes" o	n Form 9	90, Part	IV, line 1	Ö.				
		(a) Current year	(b) Pro	or year	(c) Two year	s back	(d) Three years back	k (e) F	our years b	ack
1a	Beginning of year balance		100	70	la.					
b	Contributions								•	
¢	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships	<u> </u>								
9	Other expenditures for facilities and									
	programs		, ir hall							
f	Administrative expenses									
g	End of year balance	>.///ii								
2	Provide the estimated percentage of the current	year end balance (l	ne 1g, colur	nn (a)) hel	d as:					
а	Board designated or quasi-endowment	%								
b	Permanent endowment									
C	Temporarily restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c should	equal 100%.								
3a	Are there endowment funds not in the possession	n of the organizatio	n that are he	eld and adr	ministered fo	r the				
	organization by:							,	Yes	No
	(i) unrelated organizations						• • • • • • • •	· · 3a	i)	
	(ii) related organizations	. <i>.</i>					• • • • • • • •	· · 3a(ii)	
þ	If "Yes" on line 3a(ii), are the related organization			eR?··			• • • • • • • •	· · 31)	
4	Describe in Part XIII the intended uses of the org		ent funds.							
Pai	t VI Land, Buildings, and Equipm					_				
	Complete if the organization an	swered "Yes" o	n Form 9	90, Part	IV, line 1	1a. See	Form 990, F	Part X, li	ne 10.	
	Description of properly	(a) Cost or of	ner basis	(b) Cost or	r other basis	(c)	Accumulated	(d) B	ock value	
		(investri	nent)	(0	other)	d	epreciation			
1a	Land	· · ·		4,4	190,223	50 105 105 105 105 105 105 105 105 105 1		4	,490,2	223
b	Buildings	• • •		23,3	304,281	1	4,355,820	8	,948,4	161
С	Leasehold improvements	• • •]					Ï			
d	Equipment	!		0 1	120 521	1	5 050 721	^	170	200

1,014,027

1,014,027

Part VII Investments - Other Securities.	ecreation, inc	23-/183	5629 Page :
Complete if the organization answere	d "Yes" on Form 990. Pa	ert IV line 11h See Form 990	Part X line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market va	
(1) Financial derivatives		Cost of End-of-year market va	nue
(2) Closely-held equity interests			
(3) Other			
(A) Certificates of Deposit	2 964 209	775.57	
(B) Municipal bonds	2,864,208 1,207,258		, , , , , , , , , , , , , , , , , , , ,
(C) Corporate bonds	1,773,874	FMV FMV	
(D) Government and agency securities	1,233,816		
(E) Money market funds	2,235,627	FMV	
(F) Mutual funds	959,356		
(G)	303,330		
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	10,274,139		Medicinal revision of the state of the
Part VIII Investments - Program Related.	1 10,2,14,139		and the second section of the second section of the second section of the second second second second second se
Complete if the organization answere	ed "Yes" on Form 990. Pa	art IV. line 11c. See Form 990.	Part X. line 13.
· makeman and management of the control of the cont			
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market va	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)		ia.	
(8)			
(9)			
Total, (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	*		
Complete if the organization answere	d "Yes" on Form 990, Pa	art IV, line 11d. See Form 990,	Part X, line 15.
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X Other Liabilities.			
Complete if the organization answere line 25.	ed "Yes" on Form 990, Pa	art IV, line 11e or 11f. See Form	n 990, Part X,
1. (a) Description of liability	#1 D		
(1) Federal income taxes	(b) Book value		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)		\dashv	
(8)			
	L		(S. 1981) (S. 1981) (S. 1881) (S. 1881)

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.

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

Pa	rtXI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
а	Net unrealized gains (losses) on investments	
b	Donated services and use of facilities]
С	Recoveries of prior year grants	
d	Other (Describe in Part XIII.)	1
e	Add lines 2a through 2d	
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
_	Other (Describe in Part XIII.)	1
b	Add lines 4a and 4b	4c
C	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
5 Da	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	_
T Q	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	or retain.
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:	
a	Donated services and use of facilities	4
b	Prior year adjustments	4
С	Other losses	_
d	Other (Describe in Part XIII.)	
G	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b	
b	Other (Describe in Part XIII.)	1 1
c	Add lines 4a and 4b	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18:)	5
	rt XIII Supplemental Information.	
	ide 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	t Y line
		(A, fille
Z; Pé	art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	
		1.1. II. a. a. (1.1. ii.a. ii. ii.a. ii. ii.a. ii.

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Employer identification number Name of the organization 23-7185629 Green Valley Recreation, Inc. **Questions Regarding Compensation** Part I No Yes 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Housing allowance or residence for personal use First-class or charter travel Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees Tax indemnification and gross-up payments Personal services (such as maid, chauffeur, chef) Discretionary spending account If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 2 Indicate which, if any, of the following the filling organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Written employment contract X Compensation committee Compensation survey or study Independent compensation consultant Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, PartVII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? 4h b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4c c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a a The organization? 5b If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

Page 2

23-7185629

Schedule J (Form 990) 2018 Green Valley Recreation, Inc

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

(A) Name and Title Kent Blumenthal (i) 1 CEO (ii) 2 (ii) 3 (ii) 4 (ii) 5 (ii) 6 (ii) 6	(i) Base compensation 160,177	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred	benefits	(B)(I)-(D)	in column (B) reported
CEO	160,177						as deferred on prior Form 990
CEO		0	0	7.351	14.880	182 408	
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						71	T T T T T T T T T T T T T T T T T T T
						14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
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9				The state of the s	**************************************		
(ii)				A TALL THE THE THE THE THE THE THE THE THE THE			
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(1)		ć					
6							
12 (ii)							
(1)							
13 (11)							
(0)						WWW	
14 (ii)							
(9)							
15 (ii)							
9							
(ii)				·			

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2018

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.

Employer identification number Name of the organization 23-7185629 Green Valley Recreation, Inc 01. Amended return information Part VII Officers compensation had overreported \$9,470 of other compensation for the CEO. 02. Members or stockholder classes and rights (Part VI, line 6) Many residents of Green Valley, AZ are retired seniors and members of GVR. 03. Member election for additional members (Part VI, line 7a) The members of GVR elect the incoming board members on an annual basis 04. Governing body decisions (Part VI, line 7b) are available to be voted upon by all Certain major decisions, such as bylaw amendments GVR members 05. Form 990 governing body review (Part VI, line 11) The Chair of the Audit Committee receives a draft of the 990 before it is filed for review on behalf of the entire board 06. Conflict of interest policy compliance (Part VI, line 12c) All board members are required to sign a code of conduct (conflict of interest) policy and also report any changes to the board at any board meeting.

determine the compensation package of the executive director.

07. CEO, executive director, top management comp (Part VI, line 15a)

Salary surveys are obtained by the board of other similar size nonprofit entities to

inedule () (Form 990 of 990-EZ) (2010)	Employer identification number
reen Valley Recreation, Inc	23-7185629
8. Governing documents, etc, available to public (Part VI, line 19)	
	thace documents are
pon written or physical request to the administrative office, any of t	enese documents are
ade available for public inspection.	
9. List of other fees for services expenses (Part IX, line 11g)	
ROGRAM INSTRUCTORS AND PERFORMERS \$649,103	
0. List of other expenses (Part IX, line 24e)	
OTHER EXPENSES AS DETAILED IN SUPPLEMENTAL SCHEDULE	
	· · · · · · · · · · · · · · · · · · ·
	•
The state of the s	
	•••

Page 2

FOR YOUR RECORDS ONLY Federal Supporting Statements	2018 PG01
Name(s) as shown on return	Tax ID Number
Green Valley Recreation, Inc	23-7185629

Form 990 - Schedule D - Part VI - Line 1e Statement #Dle Investments - Other

Description of Investment	Cost/basis (Investment)	Cost/basis (Other)	Depr	Book <u>Value</u>
Vehicles	0	665,917	337,649	328,268
Projects in progress	<u> </u>	348,110	0	348,110
Total	0	<u> 1,014,027</u> =	337,649	<u>676,378</u>

990 Overflow Statement Page 1 Name(s) as shown on return Green Valley Recreation, Inc 23-7185629

l	Description					Amount
l	Recreational	instructors	and	contracts		\$ 622,587
l					Total:	\$ 622,587

Part IX, Line 24f, Other Expenses, Program

Description		Amount	
Dues and subscriptions		\$	2,189
Vehicles expenses	PART 1990 - 120 -		50,890
Other	×.		31,300
Postage			7,974
Printing			47,052
Permits and fees			11,205
Small equipment and minor furniture		*****	234,115
	Total:	\$	384,725

Part IX, Line 24f, Other Expenses, General and Admin

Description	Amount	
Dues and subs	\$ 8,717	
Real estate and pers prop taxes	20,282	
Postage	10,913	
Printing	45,291	
Bad debts	79,129	
Vehicles repair and maintenance	8,800	
Small equipment and minor furniture	5,685	
Other	690	
Permits and fees	2,449	
Total:	\$ 181,956	

990	Overflow Statement	2018 Page 2
Name(s) as shown on return		FEIN
Green Valley Recreation,	Inc	23-7185629

Part IX, Line 24g, Other Expenses, Fundraising

Description	Amount	
Dues and subs	\$	178
Postage		231
Printing		925
Bad debts		1,615
Other		13
Vehicles repairs and maintenance		180
Small equipment and minor furniture		116
Real estate and pers prop taxes		414
Permits and fees		56
Total:	\$	3,728