TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

DECEMBER 31, 2023

Prepared for	GREEN VALLEY RECREATION, INC PO BOX 586 GREEN VALLEY, AZ 85622
Prepared by	R & A CPAS A PROFESSIONAL CORPORATION 4542 E. CAMP LOWELL STE. 100 TUCSON, AZ 85712
Amount due or refund	NOT APPLICABLE
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-TE TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS.

Form 8879-TF

IRS E-file Signature Authorization for a Tax Exempt Entity

For calendar year 2023, or fiscal year beginning	, 2023, and ending
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OMB No. 1545-0047

Do not send to the IRS. Keep for your records.

Department of the Treasury Go to www.irs.gov/Form8879TE for the latest information. Internal Revenue Service EIN or SSN Name of filer GREEN VALLEY RECREATION, INC 23-7185629 MARGE GARNEAU Name and title of officer or person subject to tax PRESIDENT Type of Return and Return Information Part I Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. Form 990 check here 1a Form 990-EZ check here ... **b Total revenue,** if any (Form 990-EZ, line 9) **2b** 2a 3a Form 1120-POL check here **b** Total tax (Form 1120-POL, line 22) ______ 3b b Tax based on investment income (Form 990-PF, Part V, line 5) 4b 4a Form 990-PF check here Form 8868 check here b Balance due (Form 8868, line 3c) 5b 5a Form 990-T check here b Total tax (Form 990-T, Part III, line 4) 6b Form 4720 check here 7a Form 5227 check here 8a b FMV of assets at end of tax year (Form 5227, Item D) 8b Form 5330 check here 9a 10a Form 8038-CP check here b Amount of credit payment requested (Form 8038-CP, Part III, line 22) **Declaration and Signature Authorization of Officer or Person Subject to Tax** Under penalties of perjury, I declare that X I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer including and resolve issues related to the payment. I have selected a payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only X | authorize R & A CPAS A PROFESSIONAL CORPORATION to enter my PIN Enter five numbers, but ERO firm name do not enter all zeros as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. 🔟 As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Signature of officer or person subject to tax **Certification and Authentication** ERO's EFIN/PIN. Enter your six-digit electronic filing identification 86232485712 number (EFIN) followed by your five-digit self-selected PIN. Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. ERO's signature Date **ERO Must Retain This Form - See Instructions**

Do Not Submit This Form to the IRS Unless Requested To Do So

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2023)

Form **8868** (Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IBS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Part I - Identification Type or Name of exempt organization, employer, or other filer, see instructions. Taxpaver identification number (TIN) **Print** 23-7185629 GREEN VALLEY RECREATION, INC File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your PO BOX 586 instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. GREEN VALLEY, AZ 85622 Enter the Return Code for the return that this application is for (file a separate application for each return) 01 Application Is For Return **Application Is For** Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) Form 8870 12 05 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 Form 990-T (corporation) 07 Form 5330 (other than individual) 14 Form 1041-A 80 • After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of DAVID WEBSTER PO BOX 586 - GREEN VALLEY, AZ 85622 Telephone No. 520-838-0145 Fax No. If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15 ,20 24 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: X calendar year 20 23 tax year beginning If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return 2 Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by 0. using EFTPS (Electronic Federal Tax Payment System). See instructions.

EXTENDED TO NOVEMBER 15, 2024 Return of Organization Exempt From Income Tax

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No. 1545-0047

А	Lot rue	e 2023 calendar year, or tax year beginning an	a enaing		
В	Check if applicabl	C Name of organization		D Employer identifi	cation number
	Addre				
	Name chang	Doing business as	23-71856	29	
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	er
	Final return	PO BOX 586		520-625-	3440
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	11,670,409.
Ļ	Amen	GREEN VALUET, AL 03022		H(a) Is this a group re	
	Applic	F Name and address of principal officer: MANGE GANNEAU		for subordinates	s? Yes X No
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
1	Tax-ex	empt status: 501(c)(3) X 501(c) (4) (insert no.) 4947(a)(1) or 52	7 If "No," attach a	list. See instructions
	Websi			H(c) Group exemption	n number
K	Form of	organization: X Corporation Trust Association Other	∟ Yea	r of formation: 1972	M State of legal domicile: AZ
P		Summary			
Θ.	1	Briefly describe the organization's mission or most significant activities: ${ t TO}$	PROMOT	E THE COMMON	GOOD AND
Activities & Governance		GENERAL WELFARE OF ITS MEMBERS IN THE CO	INUMMC	TY OF GREEN	VALLEY, AZ.
rı	2	Check this box if the organization discontinued its operations or disp	osed of mo	re than 25% of its net as	ssets.
ove	3	Number of voting members of the governing body (Part VI, line 1a)		3	12
ر مع	4	Number of independent voting members of the governing body (Part VI, line 1b			12
Ş		Total number of individuals employed in calendar year 2023 (Part V, line 2a)			144
į		Total number of volunteers (estimate if necessary)			519
Ę	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
⋖		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
ø	8	Contributions and grants (Part VIII, line 1h)		0.	0.
Ď		Program service revenue (Part VIII, line 2g)		11,342,115.	11,147,075.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		129,601.	454,933.
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		43,160.	61,980.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		11,514,876.	
		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)		0.	0.
s	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10		5,218,507.	5,029,110.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
be	b	Total fundraising expenses (Part IX, column (D), line 25)	0.		
й	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,293,253.	5,978,113.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		10,511,760.	11,007,223.
		Revenue less expenses. Subtract line 18 from line 12		1,003,116.	
Or Pos	3	Tovolido 1999 experience. Cubardor into 19 month into 12		eginning of Current Year	End of Year
Net Assets or Find Balances	20	Total assets (Part X, line 16)		37,137,120.	38,478,808.
ASS	21	Total liabilities (Part X, line 26)		5,856,518.	5,796,667.
Net	22	Net assets or fund balances. Subtract line 21 from line 20	·····	31,280,602.	32,682,141.
P	art II	Signature Block			
Unc	der pena	Ities of perjury, I declare that I have examined this return, including accompanying schedu	lles and state	ments, and to the best of m	v knowledge and belief, it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of			,,,
	,	,			
Sig	ın	Signature of officer		Date	
He		MARGE GARNEAU, PRESIDENT			
110		Type or print name and title			
_		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai	d	DAVID F SAMER		if self-employ	P00182147
_	parer	Firm's name R & A CPAS A PROFESSIONAL CORPOR	RATION		6-0550947
	Only	Firm's address 4542 E. CAMP LOWELL STE. 100		THINISEIN O	
500	,	TUCSON, AZ 85712		Phone no (5	20) 881-4900
N/a	v tha II	RS discuss this return with the preparer shown above? See instructions			X Yes No
ivia	y u le II	no discuss this return with the preparer shown above? See instructions			LAND TES LIND

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Form 990 (2023)

Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>
1	Briefly describe the organization's mission: TO PROMOTE THE COMMON GOOD AND GENERAL WELFARE OF ITS MEMBERS TO	ייחסטווכח
	THE OPERATION AND MAINTENANCE OF RECREATIONAL AND SOCIAL FACILI	
	AND THE SPONSORSHIP OF CULTURAL, EDUCATIONAL AND CIVIC ACTIVITY	
	THE SENIOR COMMUNITY OF GREEN VALLEY, ARIZONA.	
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 X 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 X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section of th	penses, and
	revenue, if any, for each program service reported.	147 075
4a	(Code:) (Expenses \$ 8,547,789. including grants of \$) (Revenue \$ 11, GREEN VALLEY RECREATION (GVR) PROVIDES RECREATION FACILITIES AN	,147,075.
	PROGRAMS TO APPROXIMATELY 23,000 LOCAL AND SEASONAL RESIDENTS	
	VALLEY, ARIZONA, AN UNINCORPORATED COMMUNITY OF APPROXIMATELY 2	
	GVR'S AQUATICS, SPORTS, AND FITNESS FACILITIES SERVE THE COMMUN	•
	14 LOCATIONS SCATTERED THROUGHOUT GREEN VALLEY.	1111111
	GVR SUPPORTED 59 CLUBS THAT SERVE APPROXIMATELY 13,850 MEMBERS	PURSUING
	RETIREMENT AVOCATIONS AND COMMUNITY CONNECTION. GVR'S LIFE-LONG	
	LEARNING PROGRAM OFFERED ABOUT 600 COURSES DURING 2023, WITH MC	RE THAN
	7,000 STUDENTS ENROLLING.	
4b	(Code:) (Expenses \$) (Revenue \$))
4c	(Code:) (Expenses \$	
	, (Lipsilott	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses 8,547,789.	- 000 (
		Form 990 (2023)

INC

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			,,
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			,
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5	х	
6	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	21	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
′	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u>'</u>		
Ū	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	_		
Ŭ	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 donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	401-		v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
14a b		144		
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			٦,
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Part IV Checklist of Required Schedules (continued)

			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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		.,	
04 -	Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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			X
00	Schedule L, Part I	25b		
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	26		x
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	27		Х
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? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in noncash 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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			\ v
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		X
35a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			l
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		Х	
Pa	Note: All Form 990 filers are required to complete Schedule O	38	Λ	
	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	_		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	

332004 12-21-23

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No			
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	2a 1	14					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?	. 2b	X				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b					
4a	4a 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		X			
b	If "Yes," enter the name of the foreign country		_					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR).						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa				Х			
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		<u>5c</u>					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				٠,,			
	any contributions that were not tax deductible as charitable contributions?		<u>6a</u>		Х			
b	If "Yes," did the organization include with every solicitation an express statement that such contribut							
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).		6b					
7	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the pay	r? 7a					
a	If "Yes," did the organization notify the donor of the value of the goods or services provided?			1				
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		·· 'B					
·	to file Form 8282?	as required	7c					
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		7e					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr							
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo							
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?							
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.							
а	a Did the sponsoring organization make any taxable distributions under section 4966?							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b					
10	Section 501(c)(7) organizations. Enter:	ı						
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	_					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	_					
11	Section 501(c)(12) organizations. Enter:	ا بد						
a	Gross income from members or shareholders	11a	_					
D	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	146						
100	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b 10/12	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	120					
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	13b						
С	Enter the amount of reserves on hand	13c						
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu	le O	14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune							
	excess parachute payment(s) during the year?		15		X			
	If "Yes," see the instructions and file Form 4720, Schedule N.				77			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t income?	16		X			
	If "Yes," complete Form 4720, Schedule O.							
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac							
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17					
	If "Yes," complete Form 6069.			000	(0000)			

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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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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 on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	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 on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c		X
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	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?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	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		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filedNONE			
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) availa	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finaı	ncial	
_	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	DAVID WEBSTER - 520-838-0145			
	PO BOX 586, GREEN VALLEY, AZ 85622			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, 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.

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

- List all of the organization's **former** 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. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average			(C Posi	C) ition	1		(D) Reportable	(E) Reportable	(F) Estimated
Name and title	hours per	box,	, unle	heck ss pe id a di	rson	is bot	th an	compensation	compensation	amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer p		Highest compensated employee	Ė	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) SCOTT SOMERS	40.00	=		X	×	± 0	ı.	185,059.	0.	21,555.
(2) DAVID WEBSTER	40.00			х		M		120,760.	0.	18,542.
(3) MARGE GARNEAU	2.00									
PRESIDENT		Х		X				0.	0.	0.
(4) KATHI BACHELOR PRESIDENT/ DIRECTOR	2.00	х		х				0.	0.	0.
(5) CAROL CROTHERS	2.00				7					
VICE PRESIDENT		Х		X				0.	0.	0.
(6) BART HILLYER	2.00			,,				_	0	0
SECRETARY (A) LIM GARDEN	2.00	X		Х				0.	0.	0.
(7) JIM CARDEN TREASURER	2.00	Х		х				0.	0.	0.
(8) BEV LAWLESS	2.00									
DIRECTOR		Х						0.	0.	0.
(9) BARBARA BLAKE	2.00							_		
ASSISTANT SECRETARY		Х						0.	0.	0.
(10) BETH DINGMAN DIRECTOR	2.00	х						0.	0.	0.
(11) NANCY AUSTIN	2.00	Δ						0.	0.	0.
DIRECTOR	2.00	х						0.	0.	0.
(12) STEVE GILBERT	2.00									
DIRECTOR		Х						0.	0.	0.
(13) LAUREL DEAN	2.00									
ASSISTANT TREASURER		Х						0.	0.	0.
(14) TED BOYETT	2.00									
DIRECTOR		Х						0.	0.	0.
(15) JOE MAGLIOLA	2.00							_	_	_
ASSISTANT TREASURER		Х						0.	0.	0.
(16) RICHARD SUTHERLAND	2.00	,,						_		_
DIRECTOR (15) NAME WOULD	2 00	Х				_	<u> </u>	0.	0.	0.
(17) NANCY MOYO ADMIN SUPERVISOR	2.00	Х						0.	0.	0.
IDEITA DOLEKATOOK	I	77						<u> </u>	U •	- 000

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Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	, and	d Hi	ghe	st C	Compensated Employe	es (continued)	<u> </u>
									(F)	
Name and title	Average	(do		Posi heck		than	one	Reportable	Reportable	Estimated
	hours per week	box.	unles	ss pe	rson i	is bot or/trus	h an	compensation	compensation	amount of
	(list any	\vdash					Ĺ	from the	from related organizations	other compensation
	hours for	Individual trustee or director				D.		organization	(W-2/1099-MISC/	from the
	related	tee or	ustee			Highest compensated employee		(W-2/1099-MISC/	` 1099-NEC)	organization
	organizations	al trus	nal tr		oyee	omp.		1099-NEC)		and related
	below line)	ividua	Institutional trustee	Officer	Key employee	hest o	Former			organizations
	iii ie)	pul	lns	D#	Key	Hig en	윤			
1b Subtotal								305,819.	0.	40,097.
c Total from continuation sheets to Part V								0.	0.	0.
d Total (add lines 1b and 1c)								305,819.	0.	40,097.
Total number of individuals (including but r									0,000 of reportable	,
compensation from the organization										2
										Yes No

3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes," complete Schedule J for such person	5		X

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from 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
	'	Compensation
BARKER CONTRACTING, INC.	CONSTRUCTION	
2127 E SPEEDWAY BLVD #101, TUCSON, AZ 85719	SERVICES	866,179.
CANYON BUILDING AND DESIGN	CONSTRUCTION	
4750 N LA CHOLLA BLVD, TUCSON, AZ 85705	SERVICES	715,801.
MADERA CONSTRUCTION AND REMODELING	CONSTRUCTION	
PO BOX 413, GREEN VALLEY, AZ 85622	SERVICES	449,530.
ARIZONA HEALTH, LLC	FITNESS EQUIPMENT	
6245 E 22ND ST, TUCSON, AZ 85711	SERVICES	275,743.
IMAGINE ARCHITECTURAL CONCRETE LLC	CONSTRUCTION	
1754 S FRASER, MESA, AZ 85204	SERVICES	175,150.
2 Total number of independent contractors (including but not limited to those liste		
\$100,000 of compensation from the organization 5		
		- 000 (2222)

Form 990 (2023) GREEN V
Part VIII Statement of Revenue GREEN VALLEY RECREATION, INC

			or noto to any lin	o in this Bort VIII			
		Check if Schedule O contains a response	or note to any iin	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenuè éxcluded
						business revenue	from tax under
40							sections 512 - 514
nts	1 a	Federated campaigns 1a					
<u> </u>	b	Membership dues 1b					
S, (С	Fundraising events 1c					
ar a		Related organizations 1d					
Contributions, Gifts, Grants and Other Similar Amounts		Government grants (contributions) 1e					
Ö		All other contributions, gifts, grants, and					
he l	-	similar amounts not included above 1f					
호	~	Noncash contributions included in lines 1a-1f					
호텔	_						
- "		Total. Add lines 1a-1f	Dusiness Code				
		WENTED SHIP DIEG IND I GGEGGWENEG	Business Code	0.004.000	0.004.000		
je	2 a		624110	9,804,990.	9,804,990.		
Program Service Revenue		ACCESS CARD & LATE FEES	900099	811,125.	811,125.		
n S	С	PROGRAM REVENUE	900099	514,138.	514,138.		
e a	d	FACILITY RENTAL	900099	16,822.	16,822.		
60	е						
۵	f	All other program service revenue					
	g	Total. Add lines 2a-2f		11,147,075.			
	3	Investment income (including dividends, interes					
		other similar amounts)		456,354.			456,354.
	4	Income from investment of tax-exempt bond p					<u> </u>
	5	Royalties					
	J	(i) Real	(ii) Personal				
	6 -	47.470	(ii) i croonar				
		Zeeci Territar experiesce					
		Rental income or (loss) 6c 47,478.		45,450			45, 450
		Net rental income or (loss)		47,478.			47,478.
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a	5,000.				
_	b	Less: cost or other basis					
ا و ا		and sales expenses	6,421.				
her Revenue	С	Gain or (loss) 7c	-1,421.				
Be	d	Net gain or (loss)		-1,421.			-1,421.
Jer	8 a	Gross income from fundraising events (not					
ਰ∣		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 188a					
	b	Less: direct expenses 8b					
		Net income or (loss) from fundraising events					
		Gross income from gaming activities. See					
	Ja						
		Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances10a					
		Less: cost of goods sold10b					
\Box	С	Net income or (loss) from sales of inventory					
<u>o</u>			Business Code				
Miscellaneous Revenue	11 a	MISCELLANEOUS REVENUE	900099	14,502.			14,502.
an Sun	b						
E SE	С						
Ajš R	d	All other revenue					
2		Total. Add lines 11a-11d		14,502.			
	12	Total revenue. See instructions		11,663,988.	11,147,075.	0.	516,913.

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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).

Do r	not include amounts reported on lines 6b,	(A)	this Part IX(B)	(C)	(D)
	Bb, 9b, 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				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	2 027 622	2 060 202	0.00 420	
7	Other salaries and wages	3,837,632.	2,968,202.	869,430.	
8	Pension plan accruals and contributions (include	00 660	72 005	24 665	
_	section 401(k) and 403(b) employer contributions)	98,660.	73,995.	24,665.	
9	Other employee benefits	803,635.	598,458.	205,177.	
10	Payroll taxes	289,183.	216,887.	72,296.	
11	Fees for services (nonemployees):			*	
	Management	69,139.		69,139.	
b	Legal	37,561.		37,561.	
	Accounting	37,301		37,301.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	79,185.		79,185.	
f	Investment management fees	19,100.		19,103.	
g	Other. (If line 11g amount exceeds 10% of line 25,	197,843.	91,648.	106,195.	
	column (A), amount, list line 11g expenses on Sch O.)	28,380	28,380.	100,193.	
12	Advertising and promotion	99,241.	86,209.	13,032.	
13	Office expenses	161,641.	1,320.	160,321.	
14	Information technology	101,041.	1,520.	100,521.	
15	Royalties	1,916,856.	1,915,581.	1,275.	
16	Occupancy	105,640.	100,024.	5,616.	
17	Travel	103,040.	100,024.	3,010.	
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	17,179.	17,179.		
20	Interest Payments to effiliates	11,1190	11,1190		
21 22	Payments to affiliates	1,362,706.	1,236,947.	125,759.	
22	Depreciation, depletion, and amortization	340,565.	1,230,3410	340,565.	
23	Other expenses. Itemize expenses not covered	340,303•		340,303.	
24	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
_	amount, list line 24e expenses on Schedule 0.) SUPPLIES	547,041.	506,024.	41,017.	
a	RECREATION CONTRACTS	368,360.	368,360.	±1,01,0	
b	UNCAPITALIZED EQUIPMENT	298,233.	235,354.	62,879.	
d	COMMUNICATION	104,443.	24,048.	80,395.	
-	All other expenses	244,100.	79,173.	164,927.	
	Total functional expenses. Add lines 1 through 24e	11,007,223.	8,547,789.	2,459,434.	0
25 26	Joint costs. Complete this line only if the organization		0,041,100.	2,133,1331	0
LU	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,866,102.	1	2,532,556.
	2	Savings and temporary cash investments	1,085,294.	2	311,366.		
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			49,711.	4	301,605
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst	antial	contributor, or 35%			
		controlled entity or family member of any of thes	e pers	ons		5	
	6	Loans and other receivables from other disquali	fied pe	rsons (as defined			
		under section 4958(f)(1)), and persons described	d in sec	ction 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			23,044.	8	22,003
⋖	9	Prepaid expenses and deferred charges			275,961.	9	279,134
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	48,907,949.			
	b	Less: accumulated depreciation	10b	27,464,438.	19,177,114.	10c	21,443,511 13,456,529
	11	Investments - publicly traded securities			14,484,638.	11	13,456,529
	12	Investments - other securities. See Part IV, line 1	1			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			175,256.	15	132,104
	16	Total assets. Add lines 1 through 15 (must equa	al line 3	33)	37,137,120.	16	38,478,808
	17	Accounts payable and accrued expenses	316,061.	17	486,137		
	18	Grants payable	4 500 054	18	4 600 404		
	19	Deferred revenue			4,733,271.	19	4,607,401
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I				21	
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subst					
<u>ia</u>		controlled entity or family member of any of thes			00 000	22	77 000
_	23	Secured mortgages and notes payable to unrela			88,000.	23	77,000.
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa	-				
		parties, and other liabilities not included on lines	17-24). Complete Part X	710 106		626 120
		of Schedule D			719,186.	25	626,129. 5,796,667.
	26	Total liabilities. Add lines 17 through 25			5,856,518.	26	5,130,001
es		Organizations that follow FASB ASC 958, che	ck ner	e 🔼			
ğ	07	and complete lines 27, 28, 32, and 33.			31,280,602.	27	32,682,141.
Sale	27	Net assets without donor restrictions			31,200,002.		32,002,141.
βE	28	Net assets with donor restrictions				28	
Ē		Organizations that do not follow FASB ASC 9	oo, cn	eck nere \square			
ō		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds				29 30	
Ass	30	Paid-in or capital surplus, or land, building, or eq					
et/	31	Retained earnings, endowment, accumulated in			31,280,602.	31 32	32,682,141.
Z	32	Total liabilities and not assets fund balances			37,137,120.	33	38,478,808.
	33	Total liabilities and net assets/fund balances			31,131,140.	ა პ	50,470,000

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

1 Total revenue (must equal Part VIII, column (A), line 12)

Part XI Reconciliation of Net Assets

2	Total expenses (must equal Part IX, column (A), line 25)	2	11,		7,2	
3		3			6,7	
4		4	31,		0,6	
5	Net unrealized gains (losses) on investments	5		74	0,7	74.
6		6			4,0	00.
7		7				
8		8				
9		9				0.
10		10	32,	, 68	2,1	41.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule C	Э.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed or	n a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		L	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate k	oasis,				
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sched	dule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		L	За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	d audit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		
				Form	990 ((2023

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete 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. Name of organization **Employer identification number** 23-7185629 GREEN VALLEY RECREATION, INC Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures 3 Volunteer hours for political campaign activities Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Nο 4a Was a correction made? No b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ ______\$ _ 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,\$<u> </u> 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (b) Address (d) Amount paid from (a) Name (c) EIN (e) Amount of political contributions received and filing organization's promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990) 2023

Part II-A	Complete if the organization section 501(h)).		mpt under sectio		ed Form 5768 (e	election under
A Check	if the filing organization beloevenses, and share of exc	-	- · ·	Part IV each affiliated	group member's nar	me, address, EIN,
B Check	if the filing organization che	cked box A a	nd "limited control" pro	visions apply.		
	Limits on Lo (The term "expenditures"	bbying Expe	nditures		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lo	bbying expenditures to influence p	ıblic opinion ((grassroots lobbying)			
	bbying expenditures to influence a	•				
	bbying expenditures (add lines 1a a					
	empt purpose expenditures (add li					
	ng nontaxable amount. Enter the ar					
	nount on line 1e, column (a) or (b) is:		bying nontaxable am			
	r \$500,000,		the amount on line 1e.			
	00,000 but not over \$1,000,000,	+	00 plus 15% of the exc	ess over \$500,000		
	,000,000 but not over \$1,500,000,	1	00 plus 10% of the exc			
	,500,000 but not over \$17,000,000	-	00 plus 5% of the exce			
	7,000,000,	\$1,000,		33 3731 \$1,033,003.		
•	oots nontaxable amount (enter 25%	611 46				
=	ct line 1g from line 1a. If zero or less					
	et line 1f from line 1c. If zero or less					
	is an amount other than zero on eit					
-						Yes No
·	(Some organizations that mad	4-Year Ave e a section 5	eraging Period Under	Section 501(h) have to complete all		below.
	Lo	bbying Expe	nditures During 4-Yea	ar Averaging Period		
	Calendar year al year beginning in) (a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
•	ng nontaxable amount					
•	ng ceiling amount of line 2a, column(e))					
c Total lo	bbying expenditures					
	oots nontaxable amount					
	oots ceiling amount of line 2d, column (e))					
f Grassro	oots lobbying expenditures					

Schedule C (Form 990) 2023

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(k)
of th	e lobbying activity.	Yes	No	Amo	ount
1	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:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
j	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
	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				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5), or se	ction	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			X	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 5		3	L	X
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."			: III-A, lin	e 3, is
1	Dues, assessments and similar amounts from members		. 1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	iai			
_			2a		
	Current year				
0	Carryover from last year Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		· —		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		. 5		
Par	t IV Supplemental Information		•	•	
Prov	de 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	
	uctions); and Part II-B, line 1. Also, complete this part for any additional information.	,,		•	

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

GREEN VALLEY RECREATION, INC

Employer identification number 23-7185629

Pa	organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		s or Accounts.Complete if the
	organization answered Tes off off 550,1 artiv, in	(a) Donor advised funds	(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 advisors in	writing that the assets held in donor adv	ised funds
	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) Preservation o	of a historically important land area
	Protection of natural habitat	Preservation of	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
С.	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included on line 2c acqu		
•	on a historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by tr	ne organization during the tax
4	year Number of states where property subject to conservation ea	sement is leasted	
4 5	Does the organization have a written policy regarding the per		f
3	violations, and enforcement of the conservation easements i		
6	Staff and volunteer hours devoted to monitoring, inspecting,		
Ū	etan and voidinteen nears develor to morntoning, inspecting,	Thanlaining of Violationic, and emoroting con	neer valien easemente daning the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	vation easements during the year
	3, 1	, ,	3 ,
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170	(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial stater	ments that describes the
	organization's accounting for conservation easements.		
Pa	t III Organizations Maintaining Collections o		Other Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95		
	of art, historical treasures, or other similar assets held for pul	· · · · · · · · · · · · · · · · · · ·	•
	service, provide in Part XIII the text of the footnote to its final		
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public	e exhibition, education, or research in fur	therance of public service,
	provide the following amounts relating to these items.		Φ.
	(i) Revenue included on Form 990, Part VIII, line 1		*
0	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical tre	agurag or other similar agests for financia	
2			ıaı yaırı, provide
а	the 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		

332051 09-28-23

Schedule D (Form 990) 2023

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

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection tense, (check all that apply): a Public exhibition	Pai	t III Organizations Maintaining Co	llections of Ar	rt, His	torical Tr	easures,	or Othe	r Similar <i>i</i>	Asse	ts (contii	nued)
a Public exhibition d	3	Using the organization's acquisition, accession	, and other record	ls, chec	k any of the	following the	at make s	ignificant use	of its		
b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sed for usiae funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? 1b If "Yes," explain the arrangement in Part XIII and complete the following table: 1c Beginning balance 1d Admitions during the year 1 to 1 t		collection items (check all that apply).									
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Peart IV Excrew and Custodial Arrangements Complete if the organization answered "Ves" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodial, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount 1c d.	а	Public exhibition	d		Loan or exc	hange progr	am				
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b If "Yes," explain the arrangement in Part XIII and complete the following table: 2 Beginning balance 2 Both the organization of the year 1 Electric and the year 1 Is a Beginning of year balance 2 Both the organization and part XIII. Check here if the explanation has been provided in Part XIII. 2 Beginning of year balance 3 Both organization and programs 1 Beginning of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 5 Combibutions 1 Administrative expenses 9 End of year balance 1 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 5 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 5 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated	b	Scholarly research	е		Other						
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sed to traise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 11 to donations during the year 1d d	С	Preservation for future generations									
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sed to traise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 11 to donations during the year 1d d	4	Provide a description of the organization's colle	ections and explain	n how tl	ney further t	he organizat	ion's exer	npt purpose	in Par	t XIII.	
Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 11. 1a is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part IV Yes No If "Yes" explain the arrangement in Part XIII and complete the following table: C	5	During the year, did the organization solicit or r	eceive donations	of art, h	istorical trea	sures, or oth	ner similar	assets			
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?		to be sold to raise funds rather than to be main	ntained as part of t	he orga	nization's co	ollection?				Yes	☐ No
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?	Pai									ne 9, or	
on Form 990, Part X? b if "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year e Distributions during the year f Ending balance 1 te 2 bit this during the year f Ending balance 1 tr 2 bit the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1 Beginning of year balance 1 th 2 bit the very sear to the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1 Beginning of year balance 1 th 2 contributions 1 th 3 contributions 1 th 4 th 4 th 4 th 5 th											
b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount Itc	1a	Is the organization an agent, trustee, custodiar	n, or other intermed	diary for	r contributio	ns or other a	ssets not	included			
b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount Itc										Yes	☐ No
c Beginning balance d Additions during the year e Distributions during the year 1 te ding balance 2 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	b										
d Additions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow of custodial account liability? Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10. [a] Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (for the years back) (e) Four years back (for the years back)			·	· ·						Amoun	t
d Additions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow of custodial account liability? Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10. [a] Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (for the years back) (e) Four years back (for the years back)	С	Beginning balance						1c			
e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow of custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10. [a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back on Contributions [a] Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back on Contributions [a] Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back on Contributions [a] Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (
f Ending balance											
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IX, line 10. Contract Column	f										
Bill Tyes, "explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Image: Part V Endowment Funds Complete if the organization answered Yes* on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years	2a									Yes	□ No
Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years years (e) Fou		_									
1a Beginning of year balance).			
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year endowment The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? (iii) Related organizations? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) c Leasehold improvements d Equipment 7,566,310,6,197,277,1,369,033. e Other 7,566,310,6,197,277,1,369,033.			(a) Current year	(b) F	rior year	(c) Two yea	rs back ((d) Three years	back	(e) Fou	r years back
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment year endowment The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? (iii) Related organizations? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) c Leasehold improvements d Equipment 7,566,310,6,197,277,1,369,033. e Other 7,566,310,6,197,277,1,369,033.	1a	Beginning of year balance		47							
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	_										
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Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment											
a Board designated or quasi-endowment	_		nt year end balanc	e (line 1	a. column (a	a)) held as:					
b Permanent endowment		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		3,	-,,					
c Term endowment	b		%								
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 4, 569, 413 b Buildings 32, 344, 581 20, 544, 947 11, 799, 634 c Leasehold improvements d Equipment 7, 566, 310 6, 197, 277 1, 369, 033 e Other Other	c		—								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? (iii) Related organizations? (iii) Related organizations? (iii) Related organizations? (iv) If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 4,569,413. 4,569,413. b Buildings 32,344,581. 20,544,947. 11,799,634. c Leasehold improvements d Equipment 6 Other 7,566,310. 6,197,277. 1,369,033. e Other	•		d equal 100%.								
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(ii) Related organizations? b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) 1a Land 4,569,413. b Buildings 32,344,581. 20,544,947. 11,799,634. c Leasehold improvements d Equipment 6 Other 7,566,310. 6,197,277. 1,369,033. e Other		· ·								3a(i)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) 1a Land 4,569,413. b Buildings c Leasehold improvements d Equipment 7,566,310. 6,197,277. 1,369,033. e Other 4,427,645. 722,214. 3,705,431.											
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Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 4,569,413. 4,569,413. b Buildings 32,344,581. 20,544,947. 11,799,634. c Leasehold improvements 7,566,310. 6,197,277. 1,369,033. e Other 4,427,645. 722,214. 3,705,431.										0.5	
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basis (investment) basis (other) depreciation 1a Land 4,569,413. 4,569,413. b Buildings 32,344,581. 20,544,947. 11,799,634. c Leasehold improvements 7,566,310. 6,197,277. 1,369,033. e Other 4,427,645. 722,214. 3,705,431.	-	· · · · · · · · · · · · · · · · · · ·								(d) Boo	k value
1a Land 4,569,413. 4,569,413. b Buildings 32,344,581. 20,544,947. 11,799,634. c Leasehold improvements 7,566,310. 6,197,277. 1,369,033. e Other 4,427,645. 722,214. 3,705,431.		bescription of property								(u) D00	N Value
b Buildings 32,344,581. 20,544,947. 11,799,634. c Leasehold improvements 7,566,310. 6,197,277. 1,369,033. e Other 4,427,645. 722,214. 3,705,431.	12	Land				, ,				4,56	9.413.
c Leasehold improvements 7,566,310. 6,197,277. 1,369,033. e Other 4,427,645. 722,214. 3,705,431.							20.5	44.947			
d Equipment 7,566,310. 6,197,277. 1,369,033. e Other 4,427,645. 722,214. 3,705,431.					32,31	_,		,	1 -	_,,,	-,0010
e Other 4,427,645. 722,214. 3,705,431.					7.56	6.310	6 1	97.277	_	1.36	9.033.
					-	-				-	-
			ual Form 990 Part	X line 1			·	,			

Schedule D (Form 990) 2023

COLIC GGIC B	(1 01111 000) 2020		
Part VII	Investments	- Other Se	

Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. 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 value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990. Part X. line 13. col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	ACCRUED PAYROLL	247,953.
(3)	REFUNDABLE CAPITAL FEE LIABILITY	212,826.
(4)	CUSTODIAL LIABILITIES	30,422.
(5)	IN-KIND LEASE PAYABLE	50,667.
(6)	LEASE LIABILITIES	84,261.
(7)		
(8)		
(9)		
Total.	626,129.	

^{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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2023

che	edule D (Form 990) 2023 GREEN VALLEY RECREATION,	, INC		23-	7185629 P	age		
Paı	Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return							
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.						
1	Total revenue, gains, and other support per audited financial statements			1	11,198,5	10		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:							
а	Net unrealized gains (losses) on investments	2a						
b	Donated services and use of facilities	2b	4,000.					
С	Recoveries of prior year grants	2c						
	Other (Describe in Part XIII.)							
е	Add lines 2a through 2d	2e	4,0					
3	Subtract line 2e from line 1	3	11,194,5	10				
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:							
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a						
b	Other (Describe in Part XIII.)	4b	469,478.					
С	Add lines 4a and 4b	4c	469,4					
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	11,663,9	88		
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	tements Witl	1 Expenses per	Retu	ırn			
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.						
1	Total expenses and losses per audited financial statements			1	10,928,0	138		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:							

Other (Describe in Part XIII.) Add lines 2a through 2d 10,928,038. Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: 79,185. a Investment expenses not included on Form 990, Part VIII, line 7b 4a

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

79,185. 11,007,223.

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

a Donated services and use of facilities **b** Prior year adjustments

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

PART X, LINE 2:

GVR IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(4) OF THE INTERNAL REVENUE CODE. HOWEVER, INCOME FROM CERTAIN ACTIVITIES NOT DIRECTLY RELATED TO THE ENTITY'S TAX-EXEMPT PURPOSE MAY BE SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME.

IN ACCORDANCE WITH US GAAP, MANAGEMENT BELIEVES GVR HOLDS NO UNCERTAIN TAX POSITIONS AND, THEREFORE, HAS NO POLICY FOR EVALUATING THEM. GVR'S FORMS 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAXES, ARE GENERALLY SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE FOR THREE YEARS AFTER THE DATE THE RETURNS WERE FILED.

Schedule D (Form 990) 2023

SCHEDULE J (Form 990)

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.

2023

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

GREEN VALLEY RECREATION, INC

 $Employer\ identification\ number\\23-7185629$

			Yes	No	
1 a	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.				
	First-class or charter travel Housing allowance or residence for personal use				
	Travel for companions Payments for business use of personal residence				
	Tax indemnification and gross-up payments Health or social club dues or initiation fees				
	Discretionary spending account Personal services (such as maid, chauffeur, chef)				
b	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 explain	1b			
2	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 1a?	2			
3	Indicate which, if any, of the following the 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 Compensation committee				
	Independent compensation consultant Compensation survey or study				
	Form 990 of other organizations X Approval by the board or compensation committee				
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a related organization:			37	
	Receive a severance payment or change-of-control payment?	4a		X	
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b 4c		X	
С	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.				
5	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:	_		v	
	The organization?	5a		X	
b	Any related organization?	5b		Λ	
_	If "Yes" on line 5a or 5b, describe in Part III.				
6	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:	C-		Х	
	The organization?	6a		X	
D	Any related organization?	6b		21	
7	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 payments				
'	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	- '-			
J	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х	
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	O		-2	
9	Regulations section 53.4958-6(c)?	9			
	1 regulations section 30.4300 o(c):	9			

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

Schedule J (Form 990) 2023

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.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) SCOTT SOMERS	(i)	185,059.	0.	0.	0.	21,555.	206,614.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 3:
THE CFO SALARY IS ESTABLISHED UTILIZING A COMPENSATION AND CLASSIFICATION
SURVEY CONDUCTED BY A THIRD PARTY. THE CEO SALARY IS ESTABLISHED BY THE
BOARD OF DIRECTORS OF GVR BASED ON THE RECOMMENDATION OF AN INDEPENDENT
CONSULTANT.

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

2023
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

Name of the organization

GREEN VALLEY RECREATION, INC

Employer identification number 23-7185629

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

MEMBERS ARE DEFINED BY ARTICLE II OF THE BYLAWS AND ARE DETERMINED BY

RESIDENTIAL LAND OWNERSHIP WITHIN GREEN VALLEY, ARIZONA

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

VOTING RIGHTS ARE DETAILED IN ARTICLE II SECTION 6 OF THE BYLAWS INCLUDING

THE RIGHT TO ASSIGN THE VOTING RIGHT.

EACH BOARD MEMBER IS ELECTED BY A VOTE OF THE MEMBERSHIP.

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

MEMBERS IN GOOD STANDING ARE ALLOWED TO VOTE TO EITHER APPROVE OR OVERTURN
THE RECOMMENDATION OF THE BOARD OF DIRECTORS ON MATTERS WHICH IN CERTAIN

CIRCUMSTANCES MAY REQUIRE APPROVAL.

FORM 990, PART VI, SECTION B, LINE 11B:

THE CEO, CFO, AND AUDIT COMMITTEE REVIEW A DRAFT COPY OF THE 990 TAX RETURN
WITH THE PROFESSIONAL TAX PREPARER. AFTER NEEDED ADJUSTMENTS, THE EDITED
COPY OF THE TAX RETURN IS REVIEWED AND APPROVED BY ALL DIRECTORS ON THE

BOARD PRIOR TO FILING.

FORM 990, PART VI, SECTION C, LINE 19:

ALL DOCUMENTS ARE AVAILABLE ON THE GREEN VALLEY RECREATION, INC. PUBLIC

WEBSITE. DOCUMENTS CAN BE REVIEWED UPON REQUEST AT THE GREEN VALLEY

RECREATION ADMINISTRATIVE OFFICES.

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

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Name of the organization GREEN VALLEY RECREATION, INC	Employer identification number 23-7185629
FORM 990, PART XII, LINE 2C	
NEITHER THE ORGANIZATION'S OVERSIGHT NOR ITS SELECTION PR	OCESS HAS
CHANGED FROM THE PRIOR YEAR.	