Form 990-EZ

Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▷ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990 All other organizations with gross receipts less than $500,000 and total assets less than $1,250,000 at the end of the year may use this form.

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Department of the Treasury
Internal Revenue Service

OMB No. 1545-1150

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning May 1st, 2009, and ending Apr. 30th, 2010

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: Hartford Ski Club

Number and street (or P.O. box, if mail is not delivered to street address): 14 Glen Dr. Room/suite:

City or town, state or country, and ZIP + 4: Cheshire CT 06410

D Employer identification number: 06 6011 490

E Telephone number: 860-277-9687

F Group Exemption Number ▶

○ Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting Method: ☐ Cash ☑ Accrual
Other (specify) ▶

I Website: ▶ Hartford Ski Club.org

J Tax-exempt status (check only one) – ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

H Check ▶ ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

K Check ▶ ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than $25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if $500,000 or more, file Form 990 instead of Form 990-EZ ▶ $37,186.59

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	0
	2	Program service revenue including government fees and contracts		2	0
	3	Membership dues and assessments		3	8,121.00
	4	Investment income		4	657.59
	5a	Gross amount from sale of assets other than inventory	5a 0		
	b	Less: cost or other basis and sales expenses	5b 0		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	0
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ▶ ☐			
	a	Gross revenue (not including $ _____ of contributions reported on line 1)	6a 0		
	b	Less: direct expenses other than fundraising expenses	6b 0		
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)		6c	0
	7a	Gross sales of inventory, less returns and allowances	7a 7,351.00		
	b	Less: cost of goods sold	7b 7,714.00		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	(363.00)
	8	Other revenue (describe ▷ See attachment)		8	21,057.00
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶		9	29,472.59
Expenses	10	Grants and similar amounts paid (attach schedule)		10	0
	11	Benefits paid to or for members		11	0
	12	Salaries, other compensation, and employee benefits		12	0
	13	Professional fees and other payments to independent contractors		13	0
	14	Occupancy, rent, utilities, and maintenance		14	19,313.80
	15	Printing, publications, postage, and shipping		15	3,688.15
	16	Other expenses (describe ▶ See attachment)		16	7,424.81
	17	**Total expenses.** Add lines 10 through 16 ▶		17	30,426.76
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	(954.17)
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	59,206.20
	20	Other changes in net assets or fund balances (attach explanation)		20	0
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶		21	58,252.03

Part II Balance Sheets. If Total assets on line 25, column (B) are $1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	43,800.23	22	46,555.76
23	Land and buildings	13,713.97	23	11,446.28
24	Other assets (describe ▷ monthly prepaid lift tickets)	1,692.00	24	250.00
25	**Total assets**	59,206.20	25	58,252.03
26	**Total liabilities** (describe ▷)	0	26	0
27	**Net assets or fund balances** (line 27 of column (B) must agree with line 21)	59,206.20	27	58,252.03

SCANNED AUG 13 2010

RECEIVED
JUL 22 2010
OGDEN, UT
IRS-OSC
12-654

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

What is the organization's primary exempt purpose? to foster interest in skiing

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

		Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)
28		
	(Grants $) If this amount includes foreign grants, check here ▶ ☐	28a
29		
	(Grants $) If this amount includes foreign grants, check here ▶ ☐	29a
30		
	(Grants $) If this amount includes foreign grants, check here ▶ ☐	30a
31	Other program services (attach schedule)	
	(Grants $) If this amount includes foreign grants, check here ▶ ☐	31a
32	**Total program service expenses** (add lines 28a through 31a) ▶	32

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
- See attachment -	Record of hours per week not maintained. All average less than 10 hours. Most average less than 1 hour.	0	0	0

Part V Other Information (Note the statement requirements in the instructions for Part V.)

			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		X
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but **not** reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
a	Did the organization have unrelated business gross income of $1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	35b		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0			
b	Did the organization file **Form 1120-POL** for this year?	37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b 0			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9 39a 600.00			
b	Gross receipts, included on line 9, for public use of club facilities 39b 0			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▷ 0			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e		X
41	List the states with which a copy of this return is filed. ▶ _____			
42a	The organization's books are in care of ▶ MARK YINGLING Telephone no. ▶ 860-277-9687			
	Located at ▷ 14 GLEN CT., CHESHIRE CT ZIP + 4 ▶ 06410-2320			
b	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)?	42b		X
	If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.**			
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶ _____	42c		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▷ 43 0			
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		X

Part VI **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b and complete the tables for lines 50 and 51.

			Yes	No
46	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	46		X
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47		X
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		X
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		X
b	If "Yes," was the related organization a section 527 organization?	49b		X

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than $100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over $100,000 . . . . ▶

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than $100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over $100,000 . . ▶

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

▶ Signature of officer — Date: 7/18/2010

▶ MARK E. HINGLING, TREASURER
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed ▷ ☐	Preparer's identifying number (See instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶		EIN ▶	
		Phone no. ▷	

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ▶ ☐ Yes ☐ No

THE HARTFORD SKI CLUB, INC.
c/o Mark Yingling
14 Glen Court
Cheshire, CT 06410

E.I.N. 06-6011490

Attachment to Form 990EZ HSC: 2010 FY / IRS-Form 990		2009 990-EZ 2009 FY 5-1-09 thru 4-30-10	2008 990-EZ 2009 FY 5-1-08 thru 4-30-09	2007 990-EZ 2008 FY 5-1-07 thru 4-30-08
Part I, Line 8, Other revenue				
Roster Advertising		$950 00	$150.00	$220.00
Social Events		$1,517.00	$979.00	$2,479.32
Lodging Fees		$15,616.00	$14,409.30	$16,940.99
Snowshoe Rental		$12.00	$33.00	$6.00
Single Chair Contributions*		$2,730.00	$4,190.00	$3,410.00
Miscellaneous		$232.00	$195.00	$2.00
	Total	$21,057 00	$19,956.30	$23,058.31
Part I, Line 16, Other expenses				
Social Events		$3,477.03	$2,950.06	$4,728.31
Racing Program		$0.00	$0.00	$0.00
Insurance Bond		$642.00	$0.00	$0.00
Stark Mountain Foundation		$2,425.00	$4,190.00	$2,240.00
Miscellaneous		$880.78	$563.54	$641.50
	Total	$7,424.81	$7,703.60	$7,609.81

*note: Single Chair Contributions for a gift to the Stark Mountain Foundation for preservation of the Single Chair.
The Stark Mountain Foundation gift was for $2,425. The Stark Mountain Foundation is a 501c organization (see www.starkmountain org).

HSC BOARD OF DIRECTORS CONTACT LIST (2009 - 2010)

President	Jeff Doolittle 78 Robin Road Windsor, CT 06095
1st Vice President	John Burke 26 Robert Road Manchester, CT 06040
2nd Vice President	Pat MacBeth 15 Sakrison Road Granby, CT 06035
Treasurer	Mark Yingling 14 Glen Ct. Cheshire, CT 06410
Assistant Treasurer	Jim Corrigan 749 Wrights Mill Rd Coventry, CT 06238
Secretary	Rich Madden 51 Meadow Rd. Glastonbury, CT 06033
Assistant Secretary	Matt Holcomb 88 Bradford Corner Rd. Woodstock Valley, CT 06282
Past President	Jack Marshall 17 Cedar Lane Middletown, CT 06457
Lodge Director	Stephen Dee 21 Magnolia Hill Ct. Cromwell, CT 06416

Directors:

Jeff Gould
23 Kingston St.
W Hartford, CT 06119

Rich Kopacz
15 Tavenrner Rd.
Windsor, CT 06095

Rich Allen
12 Farmcliff Dr.
Glastonbury, CT 06033

John Zimmer
410 Oak St.
East Hartford, CT 06118