## Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 2016

Open to Public Inspection

Α	For the	2016 calend	dar year, or tax year beginning , 2016, and ending		,
В	Check if ap	pplicable:	C Name of organization Master Community Association, Inc.	D Employe	r identification number
	Addre	ess change	Doing business as	48-1	256200
	$\vdash$	e change	Number and street (or P.O. box if mail is not delivered to street address)  Room/suite	E Telephor	
	$\vdash$	-	·	/202	1 200 0704
	$\vdash$	l return	7350 E 29th Ave 300  City or town, state or province, country, and ZIP or foreign postal code	(303	3) 388-0724
	Final r	eturn/terminated			
	Amer	nded return	Denver CO 80238		ceipts \$ 5,869,240.
	Appli	cation pending		s this a group return t	
			Denise Gammon 2823 Rosalyn St Denver CO 80238 H(b) A	Are all subordinates in f'No,' attach a list. (s	ncluded? Yes No
1	Tax-ex	empt status	501(c)(3) X 501(c) ( 4 )    (insert no.) 4947(a)(1) or 527	1 140, attach a nat. (3	ee mandenormy
J	Webs	<del></del>		Group exemption num	nber ▶
K		organization:			ate of legal domicile:
Pa				2001 10	ate or regar dorment.
Pa		Summar			
	****	. <del> </del>	e the organization's mission or most significant activities: The Associat		ains
မွ			reas, greenbelts, recreation facilities, and prov	<u>ldes</u>	
Governance	S	treet 1	ights for public roads.		
E					
š	1	heck this bo	<u></u>		
			ing members of the governing body (Part VI, line 1a)		3 6
Ś			ependent voting members of the governing body (Part VI, line 1b)	ş	4 6
ı			of individuals employed in calendar year 2016 (Part V, line 2a)		<b>5</b> 179
Activities &			of volunteers (estimate if necessary)	L	6 0
¥	i e		d business revenue from Part VIII, column (C), line 12	F	7a 0.
	b N	et unrelated	business taxable income from Form 990-T, line 34 · · · · · · · · · · · · · · · ·		<b>7b</b> 0.
				Prior Year	Current Year
ø	8 C	ontributions	and grants (Part VIII, line 1h)	3,752,8	00. 3,912,866.
Revenue	9 P	rogram servi	ce revenue (Part VIII, line 2g)	700,0	05. 776,760.
š	10 In	vestment in	come (Part VIII, column (A), lines 3, 4, and 7d)	15,20	
ď	11 0	ther revenue	(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,128,9	36. 1,177,318.
	12 To	otal revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,596,9	
			nilar amounts paid (Part IX, column (A), lines 1-3)		
			o or for members (Part IX, column (A), line 4)		
		-	r compensation, employee benefits (Part IX, column (A), lines 5-10)	1,254,2	93. 1,467,058.
es			parameter 1 and 1	1/204/2	1,40,,030.
ens.			undraising fees (Part IX, column (A), line 11e)		
Expenses	b To	otal fundrais	ng expenses (Part IX, column (D), line 25) ►		
ш	17 0	ther expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)	4,225,0	96. 4,802,334.
	18 To	otal expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)	5,479,3	89. 6,269,392.
	<b>19</b> R	evenue less	expenses. Subtract line 18 from line 12	117,5	
2 6				ginning of Curren	
anc anc	20 T	otal assets (	Part X, line 16)	2,943,7	
Ass. Bal	21 T	•	(Part X, line 26)	311,9	
Net Assets Fund Balanc	20 11		· · · · · · · · · · · · · · · · · · ·		
			fund balances. Subtract line 21 from line 20	2,631,7	98. 2,348,332.
100000000000000000000000000000000000000	rt II	Signatur			
Unde	er penalties olete. Decla	s of perjury, I dec	lare that I have examined this return, including accompanying schedules and statements, and to the best of my er (other than officer) is based on all information of which preparer has any knowledge.	y knowledge and bel	ief, it is true, correct, and
		Signatu	e of officer	08/04/17 Date	<i>1</i>
Sig	jn	Jugitatu			
He	re			<u> cecutive D</u>	irector
			print name and title	······	
		Print/Type p	reparer's name Preparer's signature Date	Check	J <sub>if</sub> PTIN
Pa	id	James	Moore 07/28/17	self-employe	P00614536
	eparer	Firm's name	James Moore & Associates, Pk		
	e Only			Firm's EIN	84-1450885
	•		Aurora CO 80014	Phone no.	(303) 752-4500
Mar	the IDS	S discuse this	s return with the preparer shown above? (see instructions)	1, 1,5.16 116.	X Yes No
ivid	y are nec	- uiocuoo IIII	return with the proparer enown above; (see mendellone)		

Form	1990(2016) Master Community Association, Inc.	48-1256200	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		<u>L</u>
	Mhe Accordation weighting		
	common areas, greenbelts, recreation facilities, and provides		
	street lights for public roads.		
	Did the appropriation and adults are in 16 of the second o		
2	Did the organization undertake any significant program services during the year which were not listed on the		г
	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 expense	es.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to cand revenue, if any, for each program service reported.	tners, the total expenses	5,
	/Code		
4 a	(Code:) (Expenses \$ 4,943,033. including grants of \$ 20,000.) (F		
	The Association maintains common areas, greenbelts, recreation		
	facilities, and provides street lights for public roads.		
	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
			·
4 b	(Code:) (Expenses \$ including grants of \$) (F	Revenue \$	)
	~		
4 c	(Code:) (Expenses \$ including grants of \$) (F	Revenue \$	)
4 d	Other program services (Describe in Schedule O.)		
	(Expenses $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		)

			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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Χ
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	Х	
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or 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, VII, VIII, IX, or X as applicable.			
a	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
t	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	11 b		Х
c	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	11 c		Х
c	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	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
k	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		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		Х

## Form 990 (2016) Master Community Association, Inc. Part IV Checklist of Required Schedules (continued)

			Yes	No
208	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
t	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	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		Х
1	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		
(	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 transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
ı	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
i	o A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
(	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
	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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
	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		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Χ
ł	o If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Х	

BAA

Form 990 (2016)

# 

			Yes	No
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
2	a 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 2 a 179			
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	*200.00
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
	b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b	***	
4	a 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)?	4 a		Х
	b If 'Yes,' enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		ļ
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		Х
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	. ~		<b> </b>
	Form 8282?	7с		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year			
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
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	,			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		ļ
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	20002562	Water Street
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	a Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	c Enter the amount of reserves on hand			***
	a 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 in Schedule O	14 b		

Pai	<b>Governance, Management, and Disclosure</b> For each 'Yes' response to lines 2 through 7b below a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes a Schedule O. See instructions.		d for	
	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
1 a	a Enter the number of voting members of the governing body at the end of the tax year			
ł	Enter the number of voting members included in line 1a, above, who are independent 1 b			
	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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		X
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	
-	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more		- 21	<b> </b>
, ,	members of the governing body?	7 a	Х	1
		7 α		<b> </b>
t	o Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			77
a	The governing body?	8 a	Х	
	Each committee with authority to act on behalf of the governing body?	8 b	X	<b> </b>
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	0.5	- 1,	
•	organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode )	
			Yes	No
10 a	a Did the organization have local chapters, branches, or affiliates?	10a	X	
	of 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?	10 b	X	
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c	Х	
13	Did the organization have a written whistleblower policy?	13	Χ	
14	Did the organization have a written document retention and destruction policy?	14	X	
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	Х	1
b	Other officers or key employees of the organization	15b	Χ	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).			
16 a	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	olf '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?	16 b		
Sec	tion C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed ▶	<del></del>		
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year.	e to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
		131 1	288-0	1724

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - · List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any relat	ed organi	izatio	n co	mpe	ensa	ted a	ny c	current officer, dire	ctor, or trustee.	
(A) Name and Title	(B) Average hours per	director/trustee)						(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Brian Fennelly President	_1.00	X		Х				0.	0.	0.
(2) George Pavlik Vice President	_1.00	Х		Х				0.	0.	0.
(3) Lee Ferusson Treasurer	_1.00	Х		Х				0.	0.	0.
(4) Dana Elkind Secretary	_1.00	Х		Х				0.	0.	0.
(5) Tasha Jones Director	_1.00	X						0.	0.	0.
(6) Kevin Burnett  Executive Director	40.00				Х	Х		165,360.	0.	0.
_(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Fait	All [Section A. Officers, Directors, 1rd	stees, i	ney	CII	ibic	уе	es, a	anc	i rignest con	pensated Emp	oyees (continued)
	(A) Name and title	(B)  Average hours per	Position (do not check more than o box, unless person is both officer and a director/trust					an	(D) Reportable compensation from	(E) Reportable compensation from	<b>(F)</b> Estimated amount of other
		week (list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
<u>(15)</u>											
(16)										***************************************	
(17)											
(18)			1								
(19)											
(20)											
(21)											
(22)											
(23)											
(24)			<u></u>								
(25)											
1 b St	ıb-total						'	<u> </u>	165,360.	0.	0.
	otal from continuation sheets to Part VII, Sectional (add lines 1b and 1c)							<b>→</b> -	165,360.	0.	0.
2 To	tal number of individuals (including but not limited on the organization 1							ived			
<del></del>											Yes No
on	d the organization list any former officer, director, line 1a? If 'Yes,' complete Schedule J for such in	dividual		• •		• •			<i></i>		. 3 X
the	or any individual listed on line 1a, is the sum of repe e organization and related organizations greater the chindividual	nan \$150,	000?	If 'Y	es, '	com	plete	Sci	mpensation from hedule J for		. 4 X
	d any person listed on line 1a receive or accrue or services rendered to the organization? If 'Yes,' or										. 5 X
	n B. Independent Contractors			,							
1 Co	omplete this table for your five highest compensate mpensation from the organization. Report compensation.	ed indepensation for	nden r the	t cor	nda	tors yea	that ir end	rece ling	with or within the	organization's tax ye	
***************************************	(A) Name and business addre	ss					·//-de-s/k-f1146k-\$		(B) Description o		(C) Compensation
				************							
						***************************************					
	tal number of independent contractors (including 00,000 of compensation from the organization	but not lim	nited	to th	iose	liste	ed abo	ove)	) who received mo	re than	
										1 0000000000	

0.

		)(2016) Master Communi	ty A	ssociation,	Inc.		48-1256200	Page
Par	t VII	Statement of Revenue						
		Check if Schedule O contains a	a respo	nse or note to any lii	(A) Total revenue	(B)  Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e	Federated campaigns	1 a 1 b 1 c 1 d 1 e 1 f c 2 1 f : \$\frac{1}{2}\$	3,912,866.				
Revenue and	h	Non-resident pool fe	ee	Business Code 713940 713940	3,912,866. 201,350. 180,363.	201,350. 180,363.	0.	0.
Program Service Revenue	c d e f	Other pool income  All other program service revenue		713940	395,047.	395,047.	0.	0.
Ġ.	3 4 5	Total. Add lines 2a-2f  Investment income (including diviother similar amounts)  Income from investment of tax-ex Royalties	dends,	interest and	776,760. 2,296.	2,296.	0.	0.
	b b	Gross rents Less: rental expenses Rental income or (loss)  Net rental income or (loss)						
	b	Gross amount from sales of assets other than inventory  Less: cost or other basis and sales expenses  Gain or (loss)		(ii) Other				
Other Revenue	8 a	Net gain or (loss)	c).					
~	c 9a b	Net income or (loss) from fundraises Gross income from gaming activities Part IV, line 19	sing ever ies. • • •	a b				
	10 a b	Gross sales of inventory, less returned allowances	urns · · ·	a b				
	11 a b c	<u>Metro District expense reimburs</u>			963,161. 214,157.	963,161. 214,157.	0,	0.
		All other revenue			1,177,318.			

### Part IX | Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21								
2	Grants and other assistance to domestic individuals. See Part IV, line 22								
3	Grants and other assistance to foreign organizations, foreign governments, and foreign 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	165,360.	0.	165,360.	0.				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)								
. 7	Other salaries and wages	1,093,136.	587,577.	505,559.	0.				
8	Pension plan accruals and contributions (include section 401(k) and 403(b)	1,030,130.		3037333.					
	employer contributions)	42,040.	0.	42,040.	0.				
9	Other employee benefits	73,075.	0.	73,075.	0.				
10	Payroll taxes	93,447.	44,950.	48,497.	0.				
11	Fees for services (non-employees):								
ä	Management	182,185.	0.	182,185.	0.				
ı	Legal	16,036.	0.	16,036.	0.				
	Accounting	23,328.	0.	23,328.	0.				
(	Lobbying			207000.	<u>~</u>				
•	Professional fundraising services. See Part IV, line 17								
	Investment management fees								
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)								
13	Office expenses	01 500	^	01 500	0.				
14	Information technology	81,560.	0.	81,560.	<u> </u>				
15	Royalties								
16	Occupancy	262,402.	262 402						
17	Travel	202,402.	262,402.	0.	0.				
	F								
18	expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings								
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	86,901.	86,901.	0.	0.				
23	Insurance	188 <b>,</b> 719.	0.	188,719.	0.				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)								
á	PC Metro District expenses	941,232.	941,232.	0.	0.				
	Reserve expenses	199,047.	199,047.	0.	0.				
	Community room exp	197,190.	197,190.	0.	0.				
	Community events	709,775.	709,775.	0.	0.				
	All other expenses	1,913,959.	1,913,959.	Ö.	0.				
	Total functional expenses. Add lines 1 through 24e.	6,269,392.	4,943,033.	1,326,359.	0.				
26				ŕ					

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	31( \	(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing			1	-
	2	Savings and temporary cash investments		1,573,894.	2	1,349,949.
	3	Pledges and grants receivable, net		1,373,034.	3	1,349,949.
	4	Accounts receivable, net		279,255.	4	238,712.
	_		275,255.		230,712.	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Comple Part II of Schedule L	te		5	
	6	Loans and other receivables from other disqualified persons (as defined section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contemployers and sponsoring organizations of section 501(c)(9) voluntary ebeneficiary organizations (see instructions). Complete Part II of Schedule	ributing mplovees'		6	
ţ	7	Notes and loans receivable, net			7	,
Assets	8	Inventories for sale or use		10,949.	8	10,981.
Ä	9	Prepaid expenses and deferred charges		132,209.	9	51,418.
	10 a	Land, buildings, and equipment: cost or other basis.  Complete Part VI of Schedule D	323,582.			
	b		252,950.	337,904.	10 c	1,070,632.
	11	Investments – publicly traded securities		581,554.	11	0.
	12	Investments — other securities. See Part IV, line 11			12	
	13	Investments – program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		27,952.	15	14,000.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		2,943,717.	16	2,735,692.
	17	Accounts payable and accrued expenses		120,246.	17	148,685.
l	18	Grants payable			18	
	19	Deferred revenue		164,222.	19	187,422.
	20	Tax-exempt bond liabilities			20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D .			21	
Liabilities	22	Loans and other payables to current and former officers, directors, truste key employees, highest compensated employees, and disqualified person Complete Part II of Schedule L	ns l		22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third payand other liabilities not included on lines 17-24). Complete Part X of Sch	arties, edule D	27,451.	25	51,253.
	26	Total liabilities. Add lines 17 through 25		311,919.	26	387,360.
S		Organizations that follow SFAS 117 (ASC 958), check here ► X and	complete			
ĕ		lines 27 through 29, and lines 33 and 34.				
an	27	Unrestricted net assets	1	1,151,087.	27	866,379.
Ba	28	Temporarily restricted net assets	ŀ	1,480,711.	28	1,481,953.
ק	29	Permanently restricted net assets	, , , , , , , , , , , , , , , , , , ,		29	
Net Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here $^{\blacktriangleright}$ and complete lines 30 through 34.				
ts	30	Capital stock or trust principal, or current funds			30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund $\ \ldots \ \ldots$	[		31	
As	32	Retained earnings, endowment, accumulated income, or other funds			32	
et	33	Total net assets or fund balances		2,631,798.	33	2,348,332.
_	34	Total liabilities and net assets/fund balances		2,943,717.	34	2,735,692.
BAA	1					Form 990 (2016)

Forr	m 990 (2016) Master Community Association, Inc. 48-1	256200		Pa	ige 12
Pa	rt XI Reconciliation of Net Assets			***************************************	
	Check if Schedule O contains a response or note to any line in this Part XI				. X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,8	69,2	240.
2	Total expenses (must equal Part IX, column (A), line 25)	2		69,3	
3	Revenue less expenses. Subtract line 2 from line 1	3		00,1	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		31,7	
5	Net unrealized gains (losses) on investments	5			314.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1	17,C	000.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
uven ezezoni		10	2,3	48,3	<u>332.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	1			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?	<i></i>	2 a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
	b Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate				
	basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
,	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit				
	review, or compilation of its financial statements and selection of an independent accountant?		2 c	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single				.,
	Audit Act and OMB Circular A-133?		3 a		X
į	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required au	1			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b		<b>I</b>

BAA

Form **990** (2016)

TEEA0112 11/16/16

#### SCHEDULE C (Form 990 or 990-EZ)

#### **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

0 (	Section 501(c)(4), (5), or (6) org	anizations: Complete Part III.			
	of organization			Employer identific	ation number
Mas	ster Community Asso	ciation, Inc.		48-125620	0
Pai	rt I-A Complete if the o	rganization is exempt under secti	on 501(c) or is a	section 527 organi	zation.
1		ganization's direct and indirect political camp of 'political campaign activities')	eaign activities in Part I	V.	
2	Political campaign activity exp	enditures (see instructions)		<b>&gt;</b> \$	
3	Volunteer hours for political ca	ampaign activities (see instructions)			
Pai		rganization is exempt under secti			
1	Enter the amount of any excis	e tax incurred by the organization under sect	ion 4955		
2	Enter the amount of any excis	e tax incurred by organization managers und	er section 4955		
3	If the organization incurred a s	section 4955 tax, did it file Form 4720 for this	year?		Yes No
4 a	a Was a correction made?				· · · Yes No
	b If 'Yes,' describe in Part IV.				
Pai		rganization is exempt under secti			
1	Enter the amount directly expe	ended by the filing organization for section 52	27 exempt function act	ivities ▶ \$	
2	Enter the amount of the filing function activities	organization's funds contributed to other orga	anizations for section 5	27 exempt	
3	Total exempt function expending 17b	itures. Add lines 1 and 2. Enter here and on I	Form 1120-POL,		
4	Did the filing organization file I	Form 1120-POL for this year?			Yes No
5	organization made payments. amount of political contribution	and employer identification number (EIN) of a For each organization listed, enter the amounts received that were promptly and directly defaction committee (PAC). If additional space is	int paid from the filing of the control of the cont	organization's funds. Also political organization, suc	enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2016

Part II-A Complete if section 501	the organization	n is exempt under se		l filed Form 5768 (el	
	· · · · · · · · · · · · · · · · · · ·	gs to an affiliated group (ar	nd list in Part IV each affili	ated group member's nan	10,
		share of excess lobbying e			,
B Check ► if the filin	g organization check	ed box A and 'limited contr	ol' provisions apply.		
		ns amounts paid or incu	•	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu					
b Total lobbying expenditu	_	* '			
c Total lobbying expenditu d Other exempt purpose ex		•			
e Total exempt purpose ex	•				
		·			
f Lobbying nontaxable am both columns	· · · · · · · · · · · ·	int from the following table			
If the amount on line 1e, colo	T	The lobbying nontaxable			
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1		\$100,000 plus 15% of the exces			
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the exces			
Over \$1,500,000 but not over \$		\$225,000 plus 5% of the excess	over \$1,500,000.		
g Grassroots nontaxable a		\$1,000,000.	<u> </u>		
h Subtract line 1g from line	·	,			
i Subtract line 1f from line	·				
j If there is an amount othe section 4911 tax for this	er than zero on either	line 1h or line 1i, did the o	rganization file Form 472	0 reporting	Yes No
(Som	e organizations that	-Year Averaging Period I t made a section 501(h) e ow. See the separate ins	lection do not have to c	omplete all of the five	
		ying Expenditures During			
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e)) · · · ·		Table 9			
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e)) · · · ·					
f Grassroots lobbying expenditures	***************************************				
BAA				Schedule C (Form	1 990 or 990-EZ) 2016

## 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 each 'Ver' reproved on lines to through ti helpy, provide in Dort IV a detailed description		a)	(b)			
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No		Amou	nt	
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:						
a Volunteers?						
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
c Media advertisements?						
d Mailings to members, legislators, or the public?						
e Publications, or published or broadcast statements?	• • •					
f Grants to other organizations for lobbying purposes?						
g Direct contact with legislators, their staffs, government officials, or a legislative body?					***************************************	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i Other activities?						
j Total. Add lines 1c through 1i						
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b If 'Yes,' enter the amount of any tax incurred under section 4912						
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912						***********
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	• •					
Part III-A Complete if the organization is exempt under section 501(c)(4), section	501(c)(5)	, or				*********
section 501(c)(6).	. , , ,					
				Y	es	No
1 Were substantially all (90% or more) dues received nondeductible by members?			[	1	X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			[	2	X	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the pr	ior year? .		<u>.</u> [	3		Χ
Part III-B Complete if the organization is exempt under section 501(c)(4), section (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR answered 'Yes.'	501(c)(5) (b) Part	, or s III-A,	ectio line 3	n 501( , is	(c)	
1 Dues, assessments and similar amounts from members		1				
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).						
a Current year		2a				
b Carryover from last year		2 b				
c Total		2 c	***************************************	****		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic expenditure next year?	al 	4				
5 Taxable amount of lobbying and political expenditures (see instructions)		5	***************************************			

Part IV | Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

#### **SCHEDULE D** (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes' on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 2016

Department of the Treasury Internal Revenue Service Name of the organization

m990. Open to Public Inspection
Employer identification number

	Master Community Association	. Inc.		40 1056000
Pa			er Similar Funds or	48-1256200   <b>Accounts</b>
Га	Complete if the organization answere	ed 'Yes' on Form 990, F	Part IV, line 6.	Accounts.
		(a) Donor advised f	unds	(b) Funds and other accounts
1	Total number at end of year	(4) 201101 33110001		(a) I dilad dila dila di decedano
2	Aggregate value of contributions to (during year)	A. W. Miller II. Miller		
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor ad are the organization's property, subject to the organ			
6	Did the organization inform all grantees, donors, an for charitable purposes and not for the benefit of the impermissible private benefit?	nd donor advisors in writing the e donor or donor advisor, or f	at grant funds can be used or any other purpose confe	d only
Da	rt II Conservation Easements.			
га	Complete if the organization answere	ed 'Yes' on Form 990. F	Part IV. line 7.	
1			······································	
	Preservation of land for public use (e.g., recrea	•		rically important land area
	Protection of natural habitat	,	Preservation of a certifi	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation co	ontribution in the form of a	conservation easement on the
	last day of the tax year.		Contribution (Contribution Contribution Cont	×1
				Held at the End of the Tax Year
	a Total number of conservation easements			
	b Total acreage restricted by conservation easements			
	c Number of conservation easements on a certified h	istoric structure included in (a	a) <u>2</u> e	
•	d Number of conservation easements included in (c) structure listed in the National Register	acquired after 8/17/06, and n	ot on a historic	d
3	Number of conservation easements modified, trans tax year ►	ferred, released, extinguished	d, or terminated by the org	anization during the
4	Number of states where property subject to conserv	vation easement is located >		
5	Does the organization have a written policy regarding and enforcement of the conservation easements it l			
6	Staff and volunteer hours devoted to monitoring, ins	specting, handling of violation	ns, and enforcing conserva	tion easements during the year
7	Amount of expenses incurred in monitoring, inspect ► \$	ting, handling of violations, ar	nd enforcing conservation of	easements during the year
8	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?	2(d) above satisfy the require	ements of section 170(h)(4	l)(B)(i) · · · · · · Yes No
9	In Part XIII, describe how the organization reports of include, if applicable, the text of the footnote to the	conservation easements in its organization's financial states	revenue and expense sta nents that describes the o	tement, and balance sheet, and rganization's accounting for
	conservation easements.	ione of Aut III-tenieni	T	Cimilan Assata
Pai	Complete if the organization answere	ed 'Yes' on Form 990, F	Part IV, line 8.	Similar Assets.
1 :	a If the organization elected, as permitted under SFA art, historical treasures, or other similar assets held in Part XIII, the text of the footnote to its financial st	for public exhibition, educati	on, or research in furtherar	
!	b If the organization elected, as permitted under SFA historical treasures, or other similar assets held for following amounts relating to these items:	S 116 (ASC 958), to report in public exhibition, education, or	its revenue statement and or research in furtherance	d balance sheet works of art, of public service, provide the
	(i) Revenue included on Form 990, Part VIII, line			
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, his amounts required to be reported under SFAS 116 (.	storical treasures, or other sim ASC 958) relating to these its	nilar assets for financial ga ems:	in, provide the following
;	a Revenue included on Form 990, Part VIII, line 1 .			
1	b Assets included in Form 990, Part X			▶ Ś

Part III Organizations Maintaining	Collections	of Art, Histo	orical Treasures, c	or Other Similar Ass	ets (c	ontinu	ed)
3 Using the organization's acquisition, acces items (check all that apply):	sion, and othe	er records, check	any of the following tha	t are a significant use of it	s collec	tion	
a Public exhibition d Loan or exchange programs							
b Scholarly research	b Scholarly research e Other						
c Preservation for future generations		h					
4 Provide a description of the organization's Part XIII.	collections and	d explain how the	ey further the organization	on's exempt purpose in			
5 During the year, did the organization solicit to be sold to raise funds rather than to be r	naintained as	part of the organ	ization's collection?				No
Escrow and Custodial Arrai line 9, or reported an amount	on Form 99	Complete if the complete if the complete if the complete in th	he organization ans e 21.	swered 'Yes' on Form	1 990,	Part IV	ſ,
1 a Is the organization an agent, trustee, custo on Form 990, Part X?				sets not included	Yes		No
bit 163, explain the arrangement in Fart An	ii aliu complet	e the following to	ible.		Amoun		
c Beginning balance					Amoun	L	
d Additions during the year							
e Distributions during the year						***************************************	
f Ending balance							
				· · · · · · · · · · · · · · · · · · ·	137	I	T
2 a Did the organization include an amount on				,		ļ	No
b If 'Yes,' explain the arrangement in Part XII	I. Check here	if the explanation	n has been provided on	Part XIII		• • • _	_
Part V Endowment Funds. Comple	to if the ave	animatica ana		000 DLIV (: 4			
F-/Para-Cartinos-annosage		Y	······				
	Current year	(b) Prior year	(c) Two years bac	k (d) Three years back	(e) F	our years	back
<b>b</b> Contributions					ļ		
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 cu	irrent year end	l balance (line 1g	g, column (a)) held as:				
a Board designated or quasi-endowment		90					
b Permanent endowment ►	90	- Inches					
c Temporarily restricted endowment		ojo					
The percentages on lines 2a, 2b, and 2c sh	ould equal 10	 10%.					
3 a Are there endowment funds not in the poss organization by:	ession of the	organization that	are held and administe	red for the	Γ	Yes	No
(i) unrelated organizations					3a(i)	103	
(ii) related organizations							
b If 'Yes' on line 3a(ii), are the related organization					-		
4 Describe in Part XIII the intended uses of the					.  3b		
		iis endowinent ii	unus.			***************************************	
Part VI Land, Buildings, and Equip		·	000 Daniel IV 12 - 44	. 0 = 000 =		40	
Complete if the organization a	inswered Y	es on Form s	990, Part IV, line 11	a. See Form 990, Pa	art X, II	ne 10.	
Description of property	(inv	or other basis vestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) l	Book val	iue
1 a Land						·	
<b>b</b> Buildings	ļ					·····	
c Leasehold improvements			926,219.	62,850.		863,	369.
d Equipment			397,363.	190,100.			263.
e Other							
Total. Add lines 1a through 1e. (Column (d) mus	t equal Form 9	990, Part X, colur	mn (B), line 10c.)	, , , , ,	1	,070,	632.

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Schedule **D** (Form 990) 2016

Part VII Investments — Other Securities.  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)		
(l)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) >		
Part VIII Investments - Program Related.		
Complete if the organization answered "	······································	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)		
(5) (6)		
(7)		
(8)		
(9)	***************************************	
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) >		
Part IX Other Assets.	/ 1 E 000	D
	res on Form 990, scription	Part IV, line 11d. See Form 990, Part X, line 15.
(1)	scription	(b) Book value
(2)		
(3)		
(4)		
(5)		
(6)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) li	ne 15.)	
Part X Other Liabilities.		
Complete if the organization answered 'Yes' on F		1e or 11f. See Form 990, Part X, line 25
(a) Description of liability (1) Federal income taxes	(b) Book value	
(2) Credit card	1,8	21
(3) Employee benefits payable	6,48	
(4) Swim team fund	5,4	
(5) Other	-20	50.
(6) Storm Sewer reserve fund	36,00	
(7) Direct deposit liability	1,7	78.
(8) (0)		
(9) (10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	.► 51,2	53
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footr		

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu	ırn.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements	1 5,869,240.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains (losses) on investments	
b Donated services and use of facilities	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	3 5,869,240.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 5,869,240.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Re	eturn.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	eturn.
	-
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements	-
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements	-
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements	-
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements	-
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements	-
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements	1 6,269,392. 2e
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Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments  c Other losses  d Other (Describe in Part XIII.)  e Add lines 2a through 2d  3 Subtract line 2e from line 1  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  b Other (Describe in Part XIII.)  c Add lines 4a and 4b	1 6,269,392. 2e 3 6,269,392.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  4 Add lines 4a and 4b.	1 6,269,392. 2e 3 6,269,392.

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.

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#### SCHEDULE J

Department of the Treasury Internal Revenue Service

(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.

► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Master Community Association, Inc.

Part I Questions Regarding Compensation

Employer identification number

48-1256200

				—Т		
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.				Yes	No
	First-class or charter travel Housing allowance or residence for personal use					
	Travel for companions Payments for business use of personal residence				10.0	
	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			1 b		
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 in line 1a?			2		
3	Indicate which, if any, of the following the filing 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.					
	Compensation committee Written employment contract					
	Independent compensation consultant Compensation survey or study					
	Form 990 of other organizations 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:					
	a Receive a severance payment or change-of-control payment?		.	4 a		X
	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?			4 b		Х
	c Participate in, or receive payment from, an equity-based compensation arrangement?		٠L	4 c		Χ
	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:					
	a The organization?		- 1	5 a		Χ
	b Any related organization?			5 b		Χ
	If 'Yes' on line 5a or 5b, describe in Part III.					
6	contingent on the net earnings of:					
	a The organization?			6 a		X
	b Any related organization?	•		6 b		Χ
	If 'Yes' on line 6a or 6b, describe in Part III.					
7	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 initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III			8		Х
9				9		