### COMMITTEE ON NATURAL RESOURCES Disclosure Form As required by and provided for in House Rule XI, clause 2(g) and the Rules of the Committee on Natural Resources

### Federal Regulation: Economic, job and energy security implications of federal hydraulic fracturing regulation May 2, 2012

For Individuals:

1. Name:

2. Address:

3. Email Address:

4. Phone Number:

\* \* \* \* \*

For Witnesses Representing Organizations:

- 1. Name: Kathleen Sgamma
- 2. Name of Organization(s) You are Representing at the Hearing: Western Energy Alliance (formerly the Independent Petroleum Association of Mountain States IPAMS)
- 3. Business Address: 410 17<sup>th</sup> St, Suite 700, Denver, CO 80202
- 4. Business Email Address: [Information redacted for privacy]
- 5. Business Phone Number: (303) 623-0987

Name/Organization <u>Kathleen Sgamma, Western Energy Alliance</u> Title/Date of Hearing <u>Federal Regulation: Economic, job and energy security implications of federal</u> <u>hydraulic fracturing regulation, May 2, 2012</u>

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

B.S. Political Science, Massachusetts Institute of Technology

M.S. Information Systems, Virginia Tech

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

No

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

Seven years of experience working with and representing oil and natural gas producers trying to operate on federal lands.

d. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

None

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

f. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

I represent 400 companies involved in all aspects of environmentally responsible development of oil and gas on public lands in the West.

Name/Organization <u>Kathleen Sgamma, Western Energy Alliance</u> Title/Date of Hearing <u>Federal Regulation: Economic, job and energy security implications of federal</u> hydraulic fracturing regulation, May 2, 2012

In addition, for witnesses representing organizations:

g. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

Vice President of Government & Public Affairs, Western Energy Alliance

h. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

none

i. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

*Western Energy Alliance v. Interior Secretary Ken Salazar, et al.*, Case No. 10-CV-237F. This lawsuit challenged rules issued by the BLM and U.S. Forest Service that direct federal employees to ignore statutory provisions in Section 390 of the Energy Policy Act of 2005, 42 U.S.C. § 15942 regarding categorical exclusions under the National Environmental Policy Act, 42 U.S.C. § 4332.

*Western Energy Alliance, et al. v. Interior Secretary Ken Salazar, et al.*, Case No. 10-CV-0226-DNF. This lawsuit concerned the failure of the Dept. of the Interior and BLM to comply with their non-discretionary obligation to issue mineral leases to the top qualified bidders at competitive lease sales within sixty days of the date leases are paid for as mandated by the Mineral Leasing Act, 30 U.S.C. §226(b)(1)(A). Currently in appeal to the 10<sup>th</sup> Circuit Court of Appeals.

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization.

None

k. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

Attached

### **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)

2010 **Open to Public** 

OMB No. 1545-0047

| Department | of the | Treasury |
|------------|--------|----------|
|            | ~      |          |

| Inter                          | nal Rever   | nue Service   | The organization may have to use a copy of this return to satisfy state report                                    | ting require   | ements.         | Inspection                 |
|--------------------------------|-------------|---------------|---|----------------|-----------------|----------------------------|
| <u>A</u>                       | For the     | e 2010 cale   | ndar year, or tax year beginning , 2010, and ending   |                |                 | , 20                       |
| В                              | Check if    | applicable:   | C Name of organization Western Energy Alliance  |                | D Employ        | er identification number   |
|                                | Address     | change        | Doing Business As   |                |                 | 84 0700841                 |
| ~                              | Name cl     | hange         | Number and street (or P.O. box if mail is not delivered to street address) Room/suite                             |                | E Telepho       | one number                 |
|                                | Initial ret | turn          | 410 17th Street 700   |                |                 | 303 623 0987               |
|                                | Termina     | ted           | City or town, state or country, and ZIP + 4   |                |                 |                            |
|                                | Amende      | ed return     | Denver CO 80202-4428  |                | G Gross r       | eceipts \$                 |
|                                | Applicat    | ion pending   | F Name and address of principal officer:  | H(a) Is this a | a group return  | for affiliates? 🗌 Yes 🗹 No |
|                                |             |               |   | H(b) Are al    | l affiliates ir | ncluded? Yes No            |
| <u> </u>                       | Tax-exe     | mpt status:   | _ 501(c)(3) _ 501(c) ( 6 ) ◀ (insert no.) _ 4947(a)(1) or _ 527   | lf "No         | o," attach a    | list. (see instructions)   |
| J                              | Websit      | te: 🕨         |   | H(c) Group     | o exemptior     | n number 🕨                 |
|                                |             | organization: | Corporation Trust Association Other L Year of formation   | n: <b>1974</b> | M State         | of legal domicile: CO      |
| Pa                             | art I       | Summ          | ary   |                |                 |                            |
|                                | 1           | Briefly de    | scribe the organization's mission or most significant activities: Western E                                       | Energy All     | iance is a      | n organization of indi-    |
| Ð                              |             | viduals a     | nd businesses dedicated to more efficiently exploring, developing, and produc                                     | ing oil an     | d natural       | gas using environ-         |
| anc                            |             | mentally      | sound methods, promoting their beneficial uses, and economic, environmenta  | I and ene      | rgy secur       | ity solutions, and pro-    |
| ,<br>Li                        |             | viding re     | presentation, information, and education on issues affecting the industry at loc                                  | cal, state a   | and feder       | al levels.                 |
| Ň                              | 2           | Check th      | s box $\blacktriangleright$ [] if the organization discontinued its operations or disposed of more than 25% of it | s net assets   |                 |                            |
| ୁ<br>ଅ                         | 3           | Number        | of voting members of the governing body (Part VI, line 1a)  |                | 3               | 123                        |
| es                             | 4           | Number        | of independent voting members of the governing body (Part VI, line 1b) $\ .$                                      |                | 4               | 123                        |
| Ϋ́İ                            | 5           | Total nur     | ber of individuals employed in calendar year 2010 (Part V, line 2a)   |                | 5               | 12                         |
| Activities & Governance        | 6           | Total nur     | ber of volunteers (estimate if necessary)   |                | 6               | 150                        |
| -                              | 7a          | Total unr     | elated business revenue from Part VIII, column (C), line 12   |                | 7a              | 956                        |
|                                | b           | Net unre      | ated business taxable income from Form 990-T, line 34   |                | 7b              | 0                          |
|                                |             |               |   | Prior Ye       | ar              | Current Year               |
| e                              | 8           | Contribu      | ions and grants (Part VIII, line 1h)  |                | 0               | 0                          |
| enu                            | 9           | Program       | service revenue (Part VIII, line 2g)  | 1              | ,900,025        | 2,077,560                  |
| Revenue                        | 10          |               | nt income (Part VIII, column (A), lines 3, 4, and 7d)   |                | 18,069          | 18,619                     |
| -                              | 11          |               | enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)   |                | (32,754)        | (2,499)                    |
|                                | 12          |               | nue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)  | 1              | ,885,340        | 2,093,680                  |
|                                | 13          |               | d similar amounts paid (Part IX, column (A), lines 1–3)   |                | 0               | 0                          |
|                                | 14          |               | paid to or for members (Part IX, column (A), line 4)  |                | 0               | 0                          |
| es                             | 15          |               | other compensation, employee benefits (Part IX, column (A), lines 5–10)   | 1              | ,062,361        | 1,133,179                  |
| Expenses                       | 16a         |               | nal fundraising fees (Part IX, column (A), line 11e)  |                | 0               | 0                          |
| ğ                              | b           |               | draising expenses (Part IX, column (D), line 25) ►  |                |                 |                            |
| ш                              | 17          |               | benses (Part IX, column (A), lines 11a–11d, 11f–24f)  |                | 685,654         | 797,480                    |
|                                | 18          |               | enses. Add lines 13–17 (must equal Part IX, column (A), line 25)  | 1              | ,748,015        | 1,930,659                  |
|                                | 19          | Revenue       | less expenses. Subtract line 18 from line 12  |                | 137,325         | 163,021                    |
| s or                           |             |               |   | nning of Cu    |                 | End of Year                |
| sset                           | 20          |               | ets (Part X, line 16)   |                | ,625,609        | 2,921,935                  |
| Net Assets or<br>Fund Balances | 21          |               | lities (Part X, line 26)  |                | ,288,387        | 1,421,693                  |
|                                |             |               | s or fund balances. Subtract line 21 from line 20   | 1              | ,337,222        | 1,500,242                  |
| Pa                             | art II      | Signat        | ure Block   |                |                 |                            |

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

| Sign<br>Here     | Signature of officer              |                                      |                           |  | Date | ! |              |
|------------------|-----------------------------------|--------------------------------------|---------------------------|--|------|---|--------------|
|                  | Type or print name and title      |                                      |                           |  |      |   |              |
| Paid<br>Preparer | Print/Type preparer's name        | Preparer's signature                 | Preparer's signature Date |  |      |   | PTIN         |
| Use Only         | Firm's name                       | Firm's EIN ►                         |                           |  |      |   |              |
|                  | Firm's address ►                  | Phone no.                            |                           |  |      |   |              |
| May the IRS      | discuss this return with the pre- | eparer shown above? (see instructior | ns)                       |  |      |   | 🗌 Yes 🗌 No   |
|                  |                                   |                                      | _                         |  |      |   | F 000 (0010) |

For Paperwork Reduction Act Notice, see the separate instructions.

| Form 99  | 0 (2010) F   | Page <b>2</b>                         |
|----------|--|---------------------------------------|
| Part     | Statement of Program Service Accomplishments           Check if Schedule O contains a response to any question in this Part III  |                                       |
|          |  |                                       |
| 1        | Briefly describe the organization's mission:<br>Western Energy Alliance is an organization of individuals and businesses dedicated to more efficiently exploring, developing, an<br>producing oil and natural gas using environmentally-sound methods in the intermountain west, promoting the beneficial uses of<br>natural gas, and the economic, environmental and energy security solutions provided, and representing, informing, and educatin<br>its members, the public, elected officials and regulatory agencies on issues affecting the industry at local, state and federal level | oil<br>1g                             |
| 2        | Did the organization undertake any significant program services during the year which were not listed on the   |                                       |
|          | prior Form 990 or 990-EZ?  | ∕ No                                  |
| 3        | If "Yes," describe these new services on Schedule O.<br>Did the organization cease conducting, or make significant changes in how it conducts, any program<br>services?  | ∕<br>∕<br>No                          |
|          | If "Yes," describe these changes on Schedule O.  |                                       |
| 4        | Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Se 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocatio others, the total expenses, and revenue, if any, for each program service reported.   |                                       |
| 4a       | (Code:) (Expenses \$ including grants of \$ ) (Revenue \$ )  |                                       |
|          | Monitor current industry developments, issues, and legislation. Distribute weekly newsletter (to approximately 1,200) and other frequent communications to keep members and press informed.  |                                       |
| 4b       | (Code:) (Expenses \$including grants of \$) (Revenue \$)<br>Annual meeting - present speakers from industry to inform membership, provide a forum for members to discuss issues, and<br>conduct the Organization's business - attendance of approximately 400  |                                       |
| 4c       | (Code:) (Expenses \$including grants of \$) (Revenue \$)<br>Speakers events and educational meetings - inform and educate membership on on general and technical issues - attendance<br>ranges from 50 - 250 per event - monthly or more frequently  |                                       |
| 4d<br>4e | Other program services. (Describe in Schedule O.)<br>(Expenses \$ including grants of \$ ) (Revenue \$ )<br>Total program service expenses ►   | · · · · · · · · · · · · · · · · · · · |
|          |  | (                                     |

|      | 0 (2010)   |     |     | Page <b>3</b> |
|------|--|-----|-----|---------------|
| Part | V Checklist of Required Schedules  |     |     |               |
| 1    | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"  |     | Yes | No            |
| -    | complete Schedule A  | 1   |     | ~             |
| 2    | Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)  | 2   |     | ~             |
| 3    | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>  | 3   |     | ~             |
| 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? <i>If "Yes," complete Schedule C, Part III</i>                         | 5   | ~   |               |
| 6    | Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>  | 6   |     | ~             |
| 7    | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>                                      | 7   |     | ~             |
| 8    | Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>   | 8   |     | ~             |
| 9    | Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> | 9   |     | ~             |
| 10   | Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-<br>endowments? <i>If "Yes," complete Schedule D, Part V</i>  | 10  |     | r             |
| 11   | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.  |     |     |               |
| а    | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  | 11a | ~   |               |
| 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? <i>If "Yes," complete Schedule D, Part VII</i>   | 11b |     | ~             |
| 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? <i>If "Yes," complete Schedule D, Part VIII</i>   | 11c |     | ~             |
| 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? <i>If "Yes," complete Schedule D, Part IX</i>  | 11d |     | ~             |
| -    | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  | 11e |     | ~             |
| f    | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .           | 11f |     | ~             |
| 12 a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII  | 12a |     | ~             |
| b    | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional                     | 12b |     | ~             |
| 13   | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | 13  |     | ~             |
| 14 a | Did the organization maintain an office, employees, or agents outside of the United States?  | 14a |     | ~             |
| b    | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>                     | 14b |     | ~             |
| 15   | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> .                             | 15  |     | ~             |
| 16   | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>                                   | 16  |     | ~             |
| 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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>                                       | 17  |     | r             |
| 18   | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>  | 18  | ~   |               |
| 19   | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>  | 19  |     | ~             |
| 20 a | Did the organization operate one or more hospitals? If "Yes," complete Schedule H  | 20a |     | ~             |
| b    | If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)                        | 20b |     |               |

| Part     | V Checklist of Required Schedules (continued)  |            |     |        |
|----------|--|------------|-----|--------|
|          |  |            | Yes | No     |
| 21       | Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>  | 21         |     | ~      |
| 22       | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  | 22         |     | ~      |
| 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         | ~   |        |
| 24a      | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25 </i>                        | 24a        |     | ~      |
|          | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?   | 24b<br>24c |     |        |
| d<br>25a | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 24d<br>25a |     | ~      |
| 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? <i>If "Yes," complete Schedule L, Part I</i>                                   | 25b        |     | ~      |
| 26       | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.  | 26         |     | ~      |
| 27       | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>  | 27         |     | ~      |
| 28       | 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):  |            |     |        |
| а        | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  | 28a        |     | ~      |
| b        | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV   | 28b        |     | ~      |
| С        | 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? <i>If "Yes," complete Schedule L, Part IV</i>  | 28c        |     | ~      |
| 29       | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M   | 29         |     | ~      |
| 30       | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>  | 30         |     | ~      |
| 31       | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I   | 31         |     | ~      |
| 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         |     | ~      |
| 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? <i>If "Yes," complete Schedule R, Part I </i>   | 33         |     | ~      |
| 34       | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 </i>  | 34         |     | ~      |
| 35       | Is any related organization a controlled entity within the meaning of section 512(b)(13)?  | 35         |     | V      |
| а        | 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  |            |     |        |
| 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? <i>If "Yes," complete Schedule R, Part VI</i> .   | 07         |     | ~      |
|          |  | 37         |     | -      |
| 38       | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O   | 38         | ~   |        |
|          |  | _          |     | (2010) |

Form **990** (2010)

| Eart W         Statements Regarding Other IRS Filings and Tax Compliance<br>Check II Schedule O contains a response to any question in this Part V         Image: Check II Schedule O contains a response to any question in this Part V           1         Enter the number reported in Box 3 of Form 1996. Enter -0- if not applicable         1a         11           1         Enter the number reported in Box 3 of Form 1996. Enter -0- if not applicable         1a         11           2         Enter the number of forms W-3G induced in line 1a. Enter -0- if not applicable         1a         11           2         Enter the number of other Calendar year ending with ord within the year covered by this return?         2a         10         10         10         10         10         12         10   | Form 99  | 0 (2010)  |     | F   | Page 5 |
|--|----------|---|-----|-----|--------|
| 1a       Enter the number of Porms W-2G included in line 1a. Enter -0- if not applicable       11       17         1b       Enter the number of engineering and the organization file factor portable payments to vendors and reportable gaming (gambling) winnings to prize winners?       10       0         2       Enter the number of engineering the arguinget arguinget engineering the arguinget arguinget enginget arguinget   | Part     |   |     |     |        |
| b       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable ,  |          |   |     | Yes | No     |
| c       Did the organization comply with backup withholding rules for reportable payments. To vendors and reportable gaming (ambling withing to tripze winners?)       1c       v         2a       Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax.       2a       1c       v         3a       Total enter the calendar year ending with or within the year covered by this return.       2a       1c       v         b       If the sum of lines ta and 2a is greater than 250, you may be required to e-file. (see instructions)       3a       v         3b       Did the organization have unellead balaness gross income of \$1,000 r more during the year?       3b  | 1a       |   |     |     |        |
| reportable gaming (gambling) winnings to pize winners?       1c       v         28       Exter the number of employees reported on Form W-3, Transmittal of Wage and Tax,       12       12         b       if at least one is reported on line 2a, did the organization file all required federal employment tax returns?       12       12         30       Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       14         41       At any time during the calendar year, did the organization have an interest in, or a signature or other intancial accounts or other intancial accounts are formancial accounts are formadia account in a foreign country.       5a       14         54       At any time during the calendar year, did the organization have an interest in, or a signature or other intancial accounts.       5a       16         54       At any time during the calendar year, did the organization that was or is a party to a prohibited tax shelter transaction at any time during the tax year?       5a       16         56       50       56       56       56       56       56         57       Organization have annual gross receipts that are normaly greater than \$100,000, and did the organization include with even tax declutils?       7a       7a       7a         61       17 *s.* did the organization include with even of \$15 made party as a contribution and party for which it was required to file forealign tax was required to file organization   | b        |   |     |     |        |
| 2a       Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax 2a       12         b       fat least one is reported on line 2a, did the organization file all required federal employment tax returns?       2b       ✓         Note. If the sum of lines 1a, and 2a is greater than 250, you may be required to e-file. (see instructions)       3a       ✓         3b       Did the organization have unrelated business gross income during the year?       3a       ✓         b       If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0       3b       ✓         4       At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country: ►       3a       ✓         5e       If "Yes," enter the name of the foreign country: ►       5a       ✓       5a       ✓         5e was the organization aparty to a prohibited tax shelter transaction at any time during the cale account?       5a       ✓       5a       ✓         6a       V       5b       Fore to line 5a or 5b, did the organization file form 8886-17       5a       ✓       5a       ✓         6a       V       5b       ✓       5b       ✓       5a       ✓       5a       ✓       5a       ✓       5a       ✓       5a       ✓       5a  | С        |   |     |     |        |
| Statements, filed for the calendar year ending with me year covered by this return is returne?       12       12         b If at least one is reported on line 2a, diff be organization file all required federal employment tax returns?       2b       ✓         Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-file. (see instructions)       3a       ✓         3b       Diff the organization have unrelated business gross income of \$1,000 or more during the year?       3a       ✓         4a At any time during the calendar year, did the organization have an interest in, or a signature or other financial account, or other financial accounts, eventiles accounts, or other financial accounts, event is nancella to a subtact transaction at any time during the tax year?       5a       ✓         5a       Was the organization include with tax shorts transaction at any time during the tax year?       5a       ✓         5a       Was the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible?       5a       ✓         5a       If "Yes," idid the organization notify the viewy solicitation an express statement that such contributions or grifts were not tax deductible?       5a       ✓         7       Organization solid the payor?       7a       7a       7a         7       Organization solid the acyle and the acyle and partly as a contribution or grifts were not tax deductible?       7a       7a       7a  | 0-       |   | 1c  | ~   |        |
| b       If at least one is reported on line 2a, did the organization file all required federal employment tax returns?       2b       /         330       Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       /         341       Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       /         354       Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       /         355       At any time during the calingen country (such as a bank account, or other financial accounts?       3a       /         366       Max the prime during the calingen country (such as a bank account, or other financial Accounts.       3a       /         367       Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?       5a       /         368       Does the organization make annual gross receipts that are normally greater than \$100,000, and did the organization nother were not tax deductible?       5b       /         37       Organizations that may receive deductible contributions under section 170(c).       7a       7b       7b         368       Did the organization nothy the donor of the value of the goods or services provided?       7a       7b       7c         37       Did the organization sectin any cothenwise dispose of anglobe personal property for which i   | 2a       |   |     |     |        |
| Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)         30       Did the organization have unrelated business gross income during the year?       3a       ✓         41       At any time during the calendar year, did the organization have an interest in, or a signature or other attuchty over, a financial accountry (such as a bank account, securities account, or other financial account)       3a       ✓         42       At any time during the calendar year, did the organization have an interest in, or a signature or other attuchty over, a financial Account.       5a       ✓         43       If "Yes," enter the name of the foreign country: ►       See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.       5a       ✓         54       Was the organization nature atty to a prohibited tax shelter transaction at any time during the tax year?       5a       ✓         65       If "Yes," idid the organization have annual gross receipts that are normally greater than \$100,000, and did the organization neither were y collicitation an express statement that such contributions or gifts were not tax deductible?       5a       ✓         7       Organization stat may receive deductible contributions under section 170(c).       a       7a       7a         7       Organization stat may receive daductible contributions under section 170(c).       a bit the organization neither were solicitation an express statement that such contributions anta required to file F  | <b>h</b> |   | 0   |     |        |
| 3a       Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       ✓         3b       H "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O       3b         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 authority over, a financial account in a foreign country (such as a bank account, securities account, or other authority over, a transcial account in a foreign country (such as a bank account, securities account, or other authority over, a transcial account in a foreign country (such as a bank account, securities account, or other authority is erganization that was not an any time during the tax year?       4a         5       Was the organization requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.       5b         5       Was the organization notify the organization that twas not is a party to a prohibited tax shelter transaction?       5c         6       Dods the organization notify the organization notify the doductible?       5c       6c         7       Organization notel, exchange, or otherwise dispose of tanjble personal property for which it was required to tile form 8222?       7d       7d         7       Organization receive a payment in excess of \$75 made party, as a contribution and party for goods and services provided to the payor?       7d       7d         7       Did the organizatio  | a        |   | 20  | V   |        |
| b       H* Yes," has it filed a Form 990-T for this year," if "No," provide an explanation in Schedu <sup>ie</sup> O       3b         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;       3b         4a       At any time during the calendar year, did the organization show an interest in, or a signature or other authority over, a financial account;       4a         b       If "Yes," enter the name of the foreign country: >       >         5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a         5a       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       5a         7       Organization shat may receive deductible contributions under section 170(c).       6b       7a         7       Organization neceive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?       7a       7b         7       Did the organization notify the donor of the value of the goods or services provided?       7c       7c         7       Did the organization notify the donor of the value of the goods or services provide?       7c       7c         7       Did the organization notify the donor and the autore the pay premiums, directly or indirectl   | 3a       |   | 30  |     | ~      |
| 4a At any time during the calendar year, did the organization have an interest in, or a signature or other financial account; over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?         b If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial account.         5ee instructions for filing requirements for TD F 90-22:1, Report of Foreign Bank and Financial Accounts.         5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a         5a Does the organization that was on is a party to a prohibited tax shelter transaction?       5a         c "Yes," did the organization include with ever solicitation an express statement that such contributions that ware not tax deductible?       5a         7 Organization stat, any receive apyment in excess of 575 made party as a contribution and party for goods and services provided to the payor?       7a         7 If "Yes," did the organization notify the donor of the value of the goods or services provided?       7a         7a       7d       7d         7b If "Yes," did the organization selve any premiums, directly or indirectly, to pay premiums, directly or indirectly, on a personal benefit contract?       7a         7a       7d       7d       7a         7b If the organization neelwe any funds, directly or indirectly, on a personal benefit contract?       7d       7d         7a       7d       7d       7d  | _        |   |     |     |        |
| over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts).       4a         b       If "Yes," enter the name of the foreign country: ►       5a         See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.       5b       ✓         5       Was the organization party to a prohibited tax shelter transaction?       5b       ✓         6       Did any taxable party no tify the organization that it was or is a party to a prohibited tax shelter transaction?       5b       ✓         6       Did any taxable party no tify the organization that were not tax deductible?       5c       5c       5c         6       Did the organization notify the donor of the value of the goods or services provided?       6b       ✓         7       Organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?       7a       7a         7       Did the organization notify the donor of the value of the goods or services provided?       7c       7c         7       Did the organization receive any funds, directly or indirectly, on pay remums on a personal benefit contract?       7c         7       Did the organization receive any funds, directly or indirectly, on paynenization file form 108-C?       7t         7       Did the organization maintaining donor advised fund anintained by a sponsori   |          |   | 0.0 |     |        |
| account?       4a       ✓         b       If "Yes," enter the name of the foreign country:       ►         See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bark and Financial Accounts.       5a       ✓         5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax yea?       5a       ✓         5b       Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5a       ✓         6a       Does the organization solicit any contributions that were not tax deductible?       5c       5c       5c         7       Organization solicit any contributions that were not tax deductible?       5a       ✓       6b       ✓         7       Organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?       5a       7a       7b       7c         7       If "Yes," did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7c       7c       7c         7       If "Yes," did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7c       7c       7d       7d <th></th> <th></th> <th></th> <th></th> <th></th>   |          |   |     |     |        |
| See instructions for filing requirements for Form TD F 90:221, Report of Foreign Bank and Finacial Accounts.       5a         5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a         b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5a         c B Dees the organization have annual gross receipts that are normally greater than \$100,000, and did the organization nalcude with every solicitation an express statement that such contributions or gifts were not tax deductible?       5a         7 Organizations that may receive adductible contributions under section 170(c).       6b          8 If "Yes," did the organization notify the donor of the value of the goods or services provided?       7a       7b         7 Organizations eall, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7d       7e         9 If "Yes," did the organization or equalised indication in a personal benefit contract?       7c       7d       7e         11 If 'Yes," indicate the number of Forms 8282 filed during the year?       7d       7e       7d       7e         9 Did the organization receive a pay memiums, directly or indirectly, on a personal benefit contract?       7t       7t       7t       7t       7t         9 Did the organization receive a contribution of axis planes, or other vehicles, did the organization fee form 1090.C?       7h       7h<   |          |   | 4a  |     | ~      |
| 5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       ✓         b       Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5b       ✓         6a       ✓       5b       ✓       5b       ✓         5b       Dest 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?       ✓       6a       ✓         b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       ✓       6b       ✓         b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       ✓       7a       7a       7a       7b       ✓         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       ✓       7d       7c         d       If "Yes," indicate the number of Forms 8282 filed during the year       Zd       7d       7d <td< th=""><th>b</th><th>If "Yes," enter the name of the foreign country: ►</th><th></th><th></th><th></th></td<>   | b        | If "Yes," enter the name of the foreign country: ►  |     |     |        |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5b       ✓         c If 'Yes' to line 5a or 5b, did the organization file Form 8886-T?       5c       ✓         b Dees 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?       6a       ✓         b If 'Yes,'' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       ✓         7 Organizations that may receive a pdworth with every solicitation an express statement that such contributions and services provided to the payor?       7a       7a         0 Did the organization notify the donor of the value of the goods or services provided?       7b       7b         c If 'Yes,'' did the organization notify the donor of the value of the goods or services provided?       7c       7c         d If 'Yes,'' indicate the number of Forms 8282 filed during the year       7d       7c         g If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f         g If the organization meeive any submiss, airplanes, or other vahicles, did the organization file Form 8898 a sequire?       7h         g If the organization make any taxable distributions under section 4966?       9a       9b         g If the organization make any taxable distributions under section 4966? </th <th></th> <th>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</th> <th></th> <th></th> <th></th>   |          | See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  |     |     |        |
| c       if "Yes" to line 5a or 5b, did the organization file Form 8886-77       5c         6a       Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization notice and space to tax deductible?       5d         b       f" "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b          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?       7a       7b         0       Did the organization notify the donor of the value of the goods or services provided?       7c       7c         0       Did the organization receive any funds, directly or indirectly, on a personal benefit contract?       7t       7t         10       The organization receive any funds, directly or indirectly, on a personal benefit contract?       7t       7t         11       fi the organization receive any funds, directly or indirectly or indirectly, on a personal benefit contract?       7t         12       fi the organization receive any funds, directly or indirectly, on a personal benefit contract?       7t         13       fi the organization receive any funds, directly or indirectly, on a personal benefit contract?       7t         13       fi the organization neceshes soblines at an   | 5a       | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?           | 5a  |     | ~      |
| Ga       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?       Image: Control of Control Control of Control Control of Control of Control Control of Control Contrel Control Control Conter Control Contere Control Control Control   | b        |   | 5b  |     | ~      |
| organization solicit any contributions that were not tax deductible?       6a       ✓         b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6b       ✓         7       Organizations that may receive deductible contributions under section 170(c).       a)       a)       b)       6b       ✓         8       Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       7b       7c         c       Did the organization notify the donor of the value of the goods or services provided?       7c       7c         c       Did the organization receive any tonks, directly or indirectly, on a personal benefit contract?       7t       7t         d       ff "Yes," indicate the number of Forms 8282 filed during the year       7d       7t       7t         g       If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-0?       7t       7t         g       Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations maintaining donor advised fund maintained by a sponsoring organization make any taxable distributions under section 4966?       9a       9b       9b         s Sotion 501(c)(7) organizations. Enter:       10a       10a       10a       10a<   | С        |   | 5c  |     |        |
| b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       Image: Control of Control Control Control Control Control Control Cont  | 6a       |   |     |     |        |
| gifts were not tax deductible?       6b       ✓         7 Organizations that may receive deductible contributions under section 170(c).       6b       ✓         8 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?       7a       7b         6 If "Yes," did the organization notify the donor of the value of the goods or services provided?       7a       7b         7c       7d       7d       7d         7d  |          |   | 6a  | ~   |        |
| 7       Organizations that may receive deductible contributions under section 170(c).       a         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?       7a         b       If "Yes," did the organization subject to the services provided?       7b         c       Did the organization subject to the services provided?       7c         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d         e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e         f       Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7h         f       He organizations maintaining donor advised funds and section 509(a)(3) supporting organizations maintaining donor advised fund maintained by a sponsoring organizations maintaining donor advised funds.       9a         9       Sponsoring organizations maintaining donor advised funds.       9a         9       Sponsoring organizations maintaining donor advised funds.       9a         9       Sponsoring organizations. Enter:       10a       10a         10       the organization make a distributions under section 4966?       9a       9b         10       the organization make a distributions included on Part VIII, line 12.   | a        |   | ch  |     |        |
| 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?       7a         b ff "Yes," did the organization notify the donor of the value of the goods or services provided?       7b         c Did the organization notify the donor of the value of the goods or services provided?       7c         d ff "Yes," did the number of Forms 8282 filed during the year       7d         d ff "Yes," indicate the number of Forms 8282 filed during the year       7d         g If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e         f If the organization received a contribution of qualified intellectual property, did the organization file Form 1088-0?       7g         g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1088-0?       7h         8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, make any taxable distributions under section 4966?       9a         9 Sponsoring organization make any taxable distributions under section 4966?       9a         10 the organization make any taxable distributions under section 4966?       9b         10 section 501(c)(7) organizations. Enter:       10a         a foress income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11a         112a       11a  | 7        |   | 60  | ~   |        |
| and services provided to the payor?       7a         b       ff "Yes," did the organization notify the donor of the value of the goods or services provided?       7b         c       Did the organization notify the donor of the value of the goods or services provided?       7c         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d         e       Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?       7e         f       Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7f         g       If the organization maintaining door advised funds and section 509(a)(3) supporting organization maintaining donor advised funds.       7g         9       Sponsoring organization make any taxable distributions under section 4966?       9a         9       Section 501(c)(7) organizations. Enter:       10a         10       the organization make a distribution to a donor advised or paid to other sources against amounts due or received from them.)       11a         12a       Iff       10a       11a         13a       11a       11a         14       Section 501(c)(2) organizations. Enter:   |          | • •   |     |     |        |
| b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7b         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d         e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e         f       If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7f         g       If the organizations cecived a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7n         8       Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, have excess business holdings at any time during the year?       8         9       Sponsoring organizations maintaining donor advised funds.       9a         b       Did the organization make any taxable distributions under section 4966?       9a         b       Did the organizations. Enter:       10a       10a         a       Initiation fees and capital contributions. Enter:       10a       11a         b       Gross income from members or shareholders       11a       10a         12       Section 501(c)(12) organizations. Enter:  | u        |   | 7a  |     |        |
| c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d         e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f         g       If the organization receive any funds, directly or indirectly, on a personal benefit contract?       7f         g       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g         h       If the organizations maintaining donor advised funds and section 509(a)(3) supporting organization, have excess business holdings at any time during the year?       8         9       Sponsoring organizations maintaining donor advised funds.       9a         9       Bid the organization make a distribution of a distributions under section 4966?       9a         9       Sponsoring organizations. Enter:       9a         a       Initiation fees and capital contributions included on Part VIII, line 12       10a         11       Section 501(c)(12) organizations. Enter:       11a         a       Gross income from members or shareholders       11th         12       Section 501(c)(12) organizations. Enter:       11b         13       Section 501(c)(29) qualified non   | b        |   | -   |     |        |
| required to file Form 8282?  |          |   |     |     |        |
| e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e         f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f         g       If the organization received a contribution of qualified intellectual property, did the organization file a Form 1089 as required?         h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1089-0?         8       Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, have excess business holdings at any time during the year?       7h         9       Sponsoring organizations maintaining donor advised funds.       9a         9       Did the organization make a distribution to a donor, donor adviser, or related person?       9a         9       Did the organization make a distributions included on Part VIII, line 12       10a         10       Section 501(c)(7) organizations. Enter:       10a         11       Section 501(c)(12) organizations. Enter:       11a         12       Gross income from members or shareholders       11a         13       Section 501(c)(29) organizations. Enter:       11b         14       Section 501(c)(212) organizations. Enter:       11b         15       Gross income from members or shareholders <t< th=""><th></th><th></th><th>7c</th><th></th><th></th></t<>  |          |   | 7c  |     |        |
| f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       7f         g       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g         h       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7h         8       Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, have excess business holdings at any time during the year?       7h         9       Sponsoring organizations maintaining donor advised funds.       9a         9       Sponsoring organizations maintaining donor advised funds.       9a         9       Sponsoring organizations. Enter:       9b         10       Gross income from members or shareholders   | d        | If "Yes," indicate the number of Forms 8282 filed during the year   |     |     |        |
| g       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g         h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h         8       Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, have excess business holdings at any time during the year?       7         9       Sponsoring organizations maintaining donor advised funds.       8         9       Sponsoring organization make any taxable distributions under section 4966?       9a         b       Did the organization make any taxable distributions under section 4966?       9a         9       Sponsoring organizations. Enter:       9b         10       Section 501(c)(7) organizations. Enter:       10a         11       Initiation fees and capital contributions included on Part VIII, line 12       10a       10b         11       Section 501(c)(12) organizations. Enter:       10a       10b       11a         10       Section 501(c)(12) organizations. Enter:       11a       11b       11b         11       Initiation fees ond capital contributions included on Part VIII, line 12, for public use of club facilities       11a       11b         12       Section 501(c)(29) qualified nonprofit health ins   | е        | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e  |     |        |
| h       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h         8       Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?       8         9       Sponsoring organizations maintaining donor advised funds.       9a         9       Did the organization make any taxable distributions under section 4966?       9a         10       Section 501(c)(7) organizations. Enter:       10a         11       Section 501(c)(12) organizations. Enter:       10b         11       Section 501(c)(12) organizations. Enter:       10b         12       Gross income from members or shareholders       11a         13       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         14       Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a         13a       Note. See the instructions for additional information the organization must report on Schedule O.       13a         13a       13a       13a   | f        | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .  | 7f  |     |        |
| <ul> <li>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?</li> <li>Sponsoring organizations maintaining donor advised funds.</li> <li>Did the organization make any taxable distributions under section 4966?</li> <li>Did the organization make a distribution to a donor, donor advisor, or related person?</li> <li>Section 501(c)(7) organizations. Enter:</li> <li>Initiation fees and capital contributions included on Part VIII, line 12</li> <li>Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</li> <li>Section 501(c)(12) organizations. Enter:</li> <li>Gross income from members or shareholders</li> <li>Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</li> <li>Section 501(c)(2) qualified nonprofit health insurance issuers.</li> <li>Is the organization licensed to issue qualified health plans in more than one state?</li> <li>Is the organization is licensed to issue qualified health plans</li> <li>Enter the amount of reserves on hand</li> <li>Enter the amount of reserves on hand</li> <li>Ita bid the organization is licensed to issue qualified health plans</li> <li>Ita bid the organization is licensed to issue qualified health plans</li> <li>Ita bid the organization is licensed to issue qualified health plans</li> <li>Ita bid the organization is licensed to issue qualified health plans</li> <li>Ita bid the organization is licensed to issue qualified health plans</li> <li>Ita bid the organization is licensed to issue qualified health plans</li> <li>Ita bid the organization is licensed to issue qualified health plans</li> <li>Ita bid the organization is licensed to issue qualified health plans</li> <li>Ita bid the organization is licensed to issue qualified health plans</li> <li>Ita bid the organizat</li></ul> | g        |   | 7g  |     |        |
| organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?       8         9       Sponsoring organizations maintaining donor advised funds.       9         a Did the organization make any taxable distributions under section 4966?       9a         b Did the organization make any taxable distributions under section 4966?       9a         10       Section 501(c)(7) organizations. Enter:       10a         a Initiation fees and capital contributions included on Part VIII, line 12       10a       10b         11       Section 501(c)(12) organizations. Enter:       10b       10b         a Gross income from members or shareholders       11a       10b       11b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         13       Section 501(c)(29) qualified nonprofit health plans in more than one state?       13a         14a       Did the organization is licensed to issue qualified health plans       13b         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a  | h        |   | 7h  |     |        |
| organization, have excess business holdings at any time during the year?       8         9       Sponsoring organizations maintaining donor advised funds.         a       Did the organization make any taxable distributions under section 4966?       9a         b       Did the organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a         a       Initiation fees and capital contributions included on Part VIII, line 12       10b         11       Section 501(c)(12) organizations. Enter:       10b         a       Gross income from members or shareholders       11b         b       Gross income from other sources (Do not net amounts due or paid to other sources) against amounts due or received from them.)       11b         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a         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.       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b<   | 8        |   |     |     |        |
| 9       Sponsoring organizations maintaining donor advised funds.       9a         a       Did the organization make any taxable distributions under section 4966?       9a         b       Did the organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a         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:       10a       10b         a       Gross income from members or shareholders       11a       11b       11b         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b       12a         13       Section 501(c)(2) qualified nonprofit health insurance issuers.       13a       13a         Note. See the instructions for additional information the organization must report on Schedule O.       13a         b       Enter the amount of reserves on hand       13b       13c         c       Enter the amount of reserves on hand       13b </th <th></th> <th></th> <th>•</th> <th></th> <th></th>  |          |   | •   |     |        |
| a Did the organization make any taxable distributions under section 4966?  | •        |   | 8   | _   |        |
| b       Did the organization make a distribution to a donor, donor advisor, or related person?       9b         10       Section 501(c)(7) organizations. Enter:       10a       10a         a       Initiation fees and capital contributions included on Part VIII, line 12       10a       10b         b       Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b       10b         11       Section 501(c)(12) organizations. Enter:       10a       10b       11a         a       Gross income from members or shareholders       11a       11b       11b         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       11b       12a         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         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.       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13c   |          |   | 00  |     |        |
| 10       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         11       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.)         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year         13       Section 501(c)(29) qualified nonprofit health insurance issuers.         a       Is the organization licensed to issue qualified health plans in more than one state?         13       Section 501 (c)(29) qualified noing 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         13a       Image: Imag  |          |   |     |     |        |
| a       Initiation fees and capital contributions included on Part VIII, line 12       10a       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:       10a       10b         a       Gross income from members or shareholders       11a       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11b       12a         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12a       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand       13c       14a  |          |   | 55  |     |        |
| 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:       11a         a       Gross income from members or shareholders .       11a         b       Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)       11a         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a         c       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         c       Enter the amount of reserves on hand       13c         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a   |          |   |     |     |        |
| 11       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.)       111         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year .       12b       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a         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.       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand       13b       13c         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a   | 11       |   |     |     |        |
| against amounts due or received from them.)       110       110       110       120         12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year .       12b       12b       12a         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       12b       13a       13a         a       Is the organization licensed to issue qualified health plans in more than one state?       13a       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b       13b         c       Enter the amount of reserves on hand       13b       13c       13a         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a  | а        |   |     |     |        |
| 12a       Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?       12a         b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year .       12b       12b         13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13a         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.       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand       13c       13a         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a  | b        |   |     |     |        |
| b       If "Yes," enter the amount of tax-exempt interest received or accrued during the year  |          |   |     |     |        |
| 13       Section 501(c)(29) qualified nonprofit health insurance issuers.       13         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.       13a         b       Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand       13b       13c         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a  |          |   | 12a |     |        |
| <ul> <li>a Is the organization licensed to issue qualified health plans in more than one state?</li> <li>Note. See the instructions for additional information the organization must report on Schedule O.</li> <li>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</li> <li>c Enter the amount of reserves on hand</li> <li>list</li> &lt;</ul>   |          |   |     |     |        |
| 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         14a       Did the organization receive any payments for indoor tanning services during the tax year?  |          |   | 10- |     |        |
| 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         c       Enter the amount of reserves on hand       13c         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a  | а        |   | 13a |     |        |
| the organization is licensed to issue qualified health plans       13b         c       Enter the amount of reserves on hand       13c         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a   | h        |   |     |     |        |
| c       Enter the amount of reserves on hand       13c         14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a  | D.       |   |     |     |        |
| 14a       Did the organization receive any payments for indoor tanning services during the tax year?       14a   | с        |   |     |     |        |
|  |          |   | 14a |     |        |
|  | _        | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O       |     |     |        |

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|-------------|--|--------|----------|---------------|
| Part        | VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b b<br>"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chang   |        |          |               |
|             | O. See instructions.<br>Check if Schedule O contains a response to any question in this Part VI  |        |          | . 🗸           |
| Secti       | on A. Governing Body and Management  |        |          |               |
|             |  |        | Yes      | No            |
| 1a<br>b     | Enter the number of voting members of the governing body at the end of the tax year <b>1a</b> 123<br>Enter the number of voting members included in line 1a, above, who are independent . <b>1b</b> 123  | -      |          |               |
| 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?  |        |          |               |
| 3           | Did the organization delegate control over management duties customarily performed by or under the direct  | 2      | ~        |               |
| •           | supervision of officers, directors or trustees, or key employees to a management company or other person?  | 3      |          | ~             |
| 4           | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?   | 4      |          | ~             |
| 5           | Did the organization become aware during the year of a significant diversion of the organization's assets? .   | 5      |          | ~             |
| 6           | Does the organization have members or stockholders?  | 6      | ~        |               |
| 7a          | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?  |        |          |               |
|             |  | 7a     |          |               |
| b<br>8      | Are any decisions of the governing body subject to approval by members, stockholders, or other persons?<br>Did the organization contemporaneously document the meetings held or written actions undertaken during  | 7b     |          | ~             |
| Ū           | the year by the following:   |        |          |               |
| а           | The governing body?  | 8a     | V        |               |
| b           | Each committee with authority to act on behalf of the governing body?  | 8b     | ~        |               |
| 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 in Schedule O  | 9      |          | ~             |
| Secti       | on B. Policies (This Section B requests information about policies not required by the Internal Rever  | ue C   | <u> </u> |               |
| 40          |  | 40     | Yes      | No            |
| 10a<br>b    | Does the organization have local chapters, branches, or affiliates?  | 10a    |          | ~             |
| D           | chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? .   | 10b    |          |               |
| <b>11</b> a | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?   | 11a    | ~        |               |
| b           | Describe in Schedule O the process, if any, used by the organization to review this Form 990.  |        |          |               |
| 12a         | Does the organization have a written conflict of interest policy? If "No," go to line 13   | 12a    | ~        |               |
| b           | Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  | 12b    | ~        |               |
| С           | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"   |        |          |               |
|             | describe in Schedule O how this is done  | 12c    |          |               |
| 13          | Does the organization have a written whistleblower policy?   | 13     | ~        |               |
| 14<br>15    | Does the organization have a written document retention and destruction policy?  | 14     | ~        |               |
| 15          | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  |        |          |               |
| а           | The organization's CEO, Executive Director, or top management official   | 15a    | V        |               |
| b           | Other officers or key employees of the organization  | 15b    |          |               |
|             | If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)   |        |          |               |
| 16a         | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement   |        |          |               |
|             | with a taxable entity during the year?   | 16a    |          | ~             |
| b           | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the   |        |          |               |
| 0           | organization's exempt status with respect to such arrangements?  | 16b    |          |               |
|             | on C. Disclosure   |        |          |               |
| 17<br>18    | List the states with which a copy of this Form 990 is required to be filed ► none<br>Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3<br>for public inspection. Indicate how you make these available. Check all that apply. | )s onl | y) ava   | ailable       |
|             |  |        |          |               |

□ Own website □ Another's website ☑ Upon request

**19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Sarah S Cornwell 410 17th Street Suite 700 Denver CO 80202

### 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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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 related organization compensated any current officer, director, or trustee.

| (A)  | (B)  |                                   |                       | (0      | C)           |                              |        | (D)  | (E)  | (F)  |
|--|--|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|--|--|
| Name and Title                                 | Average  | Posit                             | ion (d                | chec    | k all t      | that ap                      |        | Reportable   | Reportable   | Estimated  |
|  | hours per<br>week<br>(describe<br>hours for<br>related<br>organizations<br>in Schedule<br>O) | Individual trustee<br>or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | compensation from<br>related<br>organizations<br>(W-2/1099-MISC) | amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| (1) James Schroeder<br>President               | - 1  | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |
| (2) Tom Sheffield<br>First Vice President      | .5   | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |
| (3) Peter Dea<br>Second Vice President         | .5   | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |
| (4) Rebecca Watson<br>Vice President Secretary | .5   | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |
| (5) Phil Doty<br>Vice President Treasurer      | - ,5   | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |
| (6) George Solich<br>Immediate Past President  | .5   | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |
| (7) Fred Barrett<br>Vice President             | .5   | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |
| (8) Jay Ottson<br>Vice President               | .5   | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |
| (9) Jack Ekstrom<br>Vice President             | .5   | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |
| (10) Ted Brown<br>Vice President               | .5   | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |
| (11) Don DeCarlo<br>Vice President             | 5  | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |
| (12) Rich Frommer<br>Vice President            | 5  | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |
| (13) John Harpole<br>Vice President            | 5  | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |
| (14) Darryl Howard<br>Vice President           | .5   | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |
| (15) Jim Kleckner<br>JVice President           | .5   | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |
| (16) Don Law<br>Vice President                 | 5  | ~                                 |                       | ~       |              |                              |        | 0  | 0  | 0  |

| Part VII Section A. Officers, Directors, Trus | stees, Key I  | Emplo                             | yee                   | s, a    | and          | Highe                        | est    | Compensated                                    | Employees (conti                            | inued)  |
|---|---|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| (A)   | (B)   |                                   | -                     | (0      |              |                              |        | (D)  | (E)   | (F)   |
| Name and title                                | Average<br>hours per  |                                   |                       |         |              | hat ap                       |        | Reportable compensation                        | Reportable compensation from                | Estimated<br>amount of  |
|   | (describe<br>hours for<br>related<br>organizations<br>in Schedule<br>O) | Individual trustee<br>or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from<br>the<br>organization<br>(W-2/1099-MISC) | related<br>organizations<br>(W-2/1099-MISC) | other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| (17) Logan Magruder<br>Vice President         | .5  | ~                                 |                       | ~       |              |                              |        | 0  | 0   | 0   |
|   |   | V                                 |                       | •       |              |                              |        |  |   |   |
| (18) Don McClure<br>Vice President            | .5  | ~                                 |                       | ~       |              |                              |        | 0  | 0   | 0   |
| (19) Rick McCullough                          | .5  |                                   |                       |         |              |                              |        | 0  | 0   | 0   |
| Vice President                                |   | ~                                 |                       | ~       |              |                              |        |  |   |   |
| (20) Brad Miller<br>Vice President            | .5  | ~                                 |                       | ~       |              |                              |        | 0  | 0   | 0   |
| (21) Jay Neese<br>Vice President              | .5  | ~                                 |                       | ~       |              |                              |        | 0  | 0   | 0   |
| (22) Bobby Plowman                            | .5  | ~                                 |                       | ~       |              |                              |        | 0  | 0   | 0   |
| (23) Chuck Stanley<br>Vice President          | · .5  | ~                                 |                       | ~       |              |                              |        | 0  | 0   | 0   |
| (24) Neal Stanley<br>Vice President           | .5  | ~                                 |                       | ~       |              |                              |        | 0  | 0   | 0   |
| (25) Brian Wold<br>Vice President             | .5  | ~                                 |                       | ~       |              |                              |        | 0  | 0   | 0   |
| (26) Duane Zavadil<br>Vice President          | .5  | ~                                 |                       | ~       |              |                              |        | 0  | 0   | 0   |
| (27) John Benton                              | .5  | ~                                 |                       | ~       |              |                              |        | 0  | 0   | 0   |
| Vice President Crude Oil Markets              |   | V                                 |                       | •       |              |                              |        |  |   |   |
| (28) Jeff Lang<br>Vice President Events       | .5  | ~                                 |                       | ~       |              |                              |        | 0  | 0   | 0   |
| 1b Sub-total                                  |   |                                   |                       |         |              |                              |        | 0  | 0   | 0   |
| c Total from continuation sheets to Part      |   | n A                               |                       |         |              |                              |        | 684,807  | 0   | 57,224  |
| d Total (add lines 1b and 1c) .               |   |                                   |                       |         |              |                              |        | 684,807  | 0   | 57,224  |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ► four

|   |   |  | Yes | No |  |  |  |
|---|---|--|-----|----|--|--|--|
| 3 | Did the organization list any former officer, director or trustee, key employee, or highest compensated     |  |     |    |  |  |  |
|   | employee on line 1a? If "Yes," complete Schedule J for such individual                                      |  |     |    |  |  |  |
| 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* 

**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* . . . . . . . .

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

|      | (A)<br>Name and business address   | <b>(B)</b><br>Description of services | <b>(C)</b><br>Compensation |
|------|--|---------------------------------------|----------------------------|
| none |  |                                       |                            |
|      |  |                                       |                            |
|      |  |                                       |                            |
|      |  |                                       |                            |
|      |  |                                       |                            |
| 2    | Total number of independent contractors (including but not limited to received more than \$100,000 in compensation from the organization > z | those listed above) who<br>ero        |                            |

4 🖌

5

V

|   | 90 (201                               |  |  |                                      |                             |   |  | Page <b>9</b>  |
|---|---------------------------------------|--|--|--------------------------------------|-----------------------------|---|--|--|
| Part  |                                       | Statement of Rev   | venue  |                                      | <b>(A)</b><br>Total revenue | <b>(B)</b><br>Related or<br>exempt<br>function<br>revenue | <b>(C)</b><br>Unrelated<br>business<br>revenue | <b>(D)</b><br>Revenue<br>excluded from tax<br>under sections<br>512, 513, or 514 |
| Contributions, gifts, grants<br>and other similar amounts | 1a<br>b<br>c<br>d<br>e<br>f<br>g<br>h | Federated campaigns<br>Membership dues .<br>Fundraising events .<br>Related organizations<br>Government grants (con<br>All other contributions, g<br>and similar amounts not inc<br>Noncash contributions inclue<br><b>Total.</b> Add lines 1a–1 | 1b           .         .           1c           1d           1d           1fs, grants,           1c           1f           ded in lines 1a-1f: \$ | 0<br>0<br>0<br>0<br>0<br>0<br>0<br>0 | 0                           |   |  |  |
| Program Service Revenue                                   |                                       |  |  | Business Code                        |                             |   |  |  |
| evel  | 2a                                    | Dues and sponsorship   |  | 900099                               | 1,930,560                   | 1,930,560   | 0  | 0  |
| ë   | b                                     | Registration fees  |  | 900099                               | 147,000                     | 147,000   | 0  | 0  |
| rzic  | C .                                   |  |  |                                      |                             |   |  |  |
| Se  | d                                     |  |  |                                      |                             |   |  |  |
| Jran  | e<br>f                                | All other program oor  |  |                                      |                             |   |  |  |
| Prog  | g                                     | All other program ser<br><b>Total.</b> Add lines 2a–2  |  |                                      | 2,077,560                   |   |  |  |
| <u> </u>  | 3                                     | Investment income  | (including divid   |                                      | 2,011,300                   |   |  |  |
|   |                                       | and other similar amo  |  |                                      | 18,619                      | 0   | 0  | 18,619   |
|   | 4                                     | Income from investmen  | -  |                                      | 0                           | 0   | 0  | 0  |
|   | 5                                     | Royalties  | •  |                                      | 0                           | 0   | 0  | 0  |
|   |                                       | 5  | (i) Real   | (ii) Personal                        |                             |   |  |  |
|   | 6a                                    | Gross Rents  | 0  | 0                                    |                             |   |  |  |
|   | b                                     | Less: rental expenses  | 0  | 0                                    |                             |   |  |  |
|   | c                                     | Rental income or (loss)  | 0  | 0                                    |                             |   |  |  |
|   | d                                     | Net rental income or   | <u>(loss)</u>  | ►                                    | 0                           | 0   | 0  | 0  |
|   | 7a                                    | Gross amount from sales of<br>assets other than inventory  | (i) Securities   | (ii) Other 0 0                       |                             |   |  |  |
|   | b                                     | Less: cost or other basis and sales expenses .   | 0  |                                      |                             |   |  |  |
|   | С                                     | Gain or (loss)   | 0  | 0                                    |                             |   |  |  |
|   | d                                     | Net gain or (loss) .   |  | 🕨                                    | 0                           | 0   | 0  | 0  |
| Other Revenue   | 8a<br>b                               | Gross income from fu<br>events (not including \$<br>of contributions report<br>See Part IV, line 18.<br>Less: direct expenses  | 0<br>ed on line 1c).   |                                      |                             |   |  |  |
| 0   | c                                     | Net income or (loss) f   |  |                                      | (3,455)                     |   | (3,455)  | 0  |
|   | 9a                                    | Gross income from ga   | aming activities.  |                                      |                             |   |  |  |
|   | b                                     | Less: direct expenses  |  |                                      |                             |   |  |  |
|   | с                                     | Net income or (loss) f   |  | ivities 🕨                            | 0                           | 0   | 0  | 0  |
|   | 10a                                   | Gross sales of in returns and allowance  |  | 0                                    |                             |   |  |  |
|   | b                                     | Less: cost of goods s  |  |                                      |                             |   |  |  |
|   | c                                     | Net income or (loss) f   |  | -                                    | 0                           | 0   | 0  | 0  |
|   |                                       | Miscellaneous R  |  | Business Code                        |                             |   |  |  |
|   | 11a                                   | Employment advertisi   | ng   | 900099                               | 956                         |   | 956  |  |
|   | b                                     |  |  |                                      |                             |   |  |  |
|   | C                                     |  |  |                                      |                             |   |  |  |
|   | d                                     | All other revenue .  |  |                                      |                             |   |  |  |
|   | 10                                    | Total. Add lines 11a-  |  |                                      | 956                         | 0.077.5/0   | 10,100   | 40.742   |
|   | 12                                    | Total revenue. See in  | istructions  | 🕨                                    | 2,093,680                   | 2,077,560   | (2,499)  | 18,619   |

Statement of Functional Expenses

campaign and fundraising solicitation

#### All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (C) Management and general expenses (A) Total expenses **(B)** Program service (D) Fundraising Do not include amounts reported on lines 6b, 7b. 8b. 9b. and 10b of Part VIII. expenses expenses 1 Grants and other assistance to governments and organizations in the U.S. See Part IV. line 21 . . 0 2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 . . . . . . 0 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV. lines 15 and 16 0 4 Benefits paid to or for members . . . . 0 5 Compensation of current officers, directors, trustees, and key employees . . . . . 487.734 Compensation not included above, to disgualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 0 Other salaries and wages . . . . . . 499,293 7 Pension plan contributions (include section 401(k) 8 and section 403(b) employer contributions) . . 24,164 Other employee benefits . . . . . . . 9 63,600 10 58,388 11 Fees for services (non-employees): 6,000 Management . . . . . . . а Legal . . . . . . . . 20,569 b . . . . . С Accounting . . . . . . . . . . . 0 d Lobbying . . . . . . . . . . 76,725 Professional fundraising services. See Part IV, line 17 0 е Investment management fees . . . . . 0 f 41,146 g Other . . . . . . . . . . . . 12 Advertising and promotion . 29,618 13 Office expenses . . . . 84,251 . 14 33,242 Information technology . . . . 0 15 Royalties . . . . . . . . . 96,757 16 Occupancy . . . . . . . . Travel . . . . . . . . . . . . . . 21,968 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 323,407 19 Conferences, conventions, and meetings . 20 0 Interest . . . . . . . . . . . . 0 21 Payments to affiliates . . . . . . . . 22 Depreciation, depletion, and amortization . 22,449 23 6,651 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) Dues 7,248 а Training & Publications 11,526 b С d \_\_\_\_\_ е 15,923 f All other expenses Miscellaneous 25 **Total functional expenses.** Add lines 1 through 24f 1,930,659 Joint costs. Check here ► ☐ if following SOP 98-2 (ASC 958-720). Complete this line 26 only if the organization reported in column (B) joint costs from a combined educational

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

| Ρ                           | art X | Balance Sheet   |                                 |        |                           |
|-----------------------------|-------|---|---------------------------------|--------|---------------------------|
|                             |       |   | <b>(A)</b><br>Beginning of year |        | <b>(B)</b><br>End of year |
|                             | 1     | Cash-non-interest-bearing   | 51,540                          | 1      | 176,068                   |
|                             | 2     | Savings and temporary cash investments  | 2,445,451                       | 2      | 2,660,696                 |
|                             | 3     | Pledges and grants receivable, net  | 0                               | 3      | 0                         |
|                             | 4     | Accounts receivable, net  | 29,937                          | 4      | 4,705                     |
|                             | 5     | Receivables from current and former officers, directors, trustees, key  |                                 |        |                           |
|                             |       | employees, and highest compensated employees. Complete Part II of Schedule L  | 0                               | 5      | 0                         |
|                             | 6     | Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) |                                 |        |                           |
| ets                         | -     |   | 0                               | 6<br>7 | 0                         |
| Assets                      | 7     | Notes and loans receivable, net   | 0                               | 7<br>8 | 0                         |
| ~                           | 8     | Inventories for sale or use   | -                               | 8<br>9 | 0                         |
|                             | 9     | Prepaid expenses and deferred charges   | 55,228                          | 9      | 43,473                    |
|                             | 10a   | other basis. Complete Part VI of Schedule D 10a 98,342  |                                 |        |                           |
|                             | b     | Less: accumulated depreciation <b>10b</b> 61,349  | 43,453                          | 10c    | 36,993                    |
|                             | 11    | Investments-publicly traded securities  | 0                               | 11     | 0                         |
|                             | 12    | Investments-other securities. See Part IV, line 11  | 0                               | 12     | 0                         |
|                             | 13    | Investments-program-related. See Part IV, line 11   | 0                               | 13     | 0                         |
|                             | 14    | Intangible assets   | 0                               | 14     | 0                         |
|                             | 15    | Other assets. See Part IV, line 11  | 0                               | 15     | 0                         |
|                             | 16    | Total assets. Add lines 1 through 15 (must equal line 34)   | 2,625,609                       | 16     | 2,921,935                 |
|                             | 17    | Accounts payable and accrued expenses   | 150,835                         | 17     | 412,035                   |
|                             | 18    | Grants payable  | 0                               | 18     | 0                         |
|                             | 19    | Deferred revenue  | 1,137,553                       | 19     | 1,009,658                 |
|                             | 20    | Tax-exempt bond liabilities   | 0                               | 20     | 0                         |
| es                          | 21    | Escrow or custodial account liability. Complete Part IV of Schedule D .   | 0                               | 21     | 0                         |
| Liabilities                 | 22    | Payables to current and former officers, directors, trustees, key<br>employees, highest compensated employees, and disqualified persons.  |                                 |        |                           |
| Ë                           |       | Complete Part II of Schedule L  | 0                               | 22     | 0                         |
|                             | 23    | Secured mortgages and notes payable to unrelated third parties  | 0                               | 23     | 0                         |
|                             | 24    | Unsecured notes and loans payable to unrelated third parties  | 0                               | 24     | 0                         |
|                             | 25    | Other liabilities. Complete Part X of Schedule D  | 0                               | 25     | 0                         |
|                             | 26    | Total liabilities. Add lines 17 through 25  | 1,288,388                       | 26     | 1,421,693                 |
| ses                         |       | Organizations that follow SFAS 117, check here ►  |                                 |        |                           |
| anc                         | 27    | Unrestricted net assets   | 0                               | 27     | 0                         |
| 3al                         | 28    | Temporarily restricted net assets   | 0                               | 28     | 0                         |
| Ч                           | 29    | Permanently restricted net assets   | 0                               | 29     | 0                         |
| Net Assets or Fund Balances |       | Organizations that do not follow SFAS 117, check here ► □ and complete lines 30 through 34.   |                                 |        |                           |
| S                           | 30    | Capital stock or trust principal, or current funds  | 0                               | 30     | 0                         |
| sei                         | 31    | Paid-in or capital surplus, or land, building, or equipment fund  | 0                               | 31     | 0                         |
| As                          | 32    | Retained earnings, endowment, accumulated income, or other funds .  | 0                               | 32     | 0                         |
| let                         | 33    | Total net assets or fund balances   | 1,337,221                       | 33     | 1,500,242                 |
| 2                           | 34    | Total liabilities and net assets/fund balances  | 2,625,609                       |        | 2,921,935                 |
|                             |       |   | · · · ·                         |        | <b>E</b> 000 (2010)       |

Form **990** (2010)

|      | 0 (2010)   |    | Pa   | age <b>12</b>         |  |  |  |  |  |  |
|------|--|----|------|-----------------------|--|--|--|--|--|--|
| Part |  |    |      |                       |  |  |  |  |  |  |
|      | Check if Schedule O contains a response to any question in this Part XI  |    |      |                       |  |  |  |  |  |  |
|      | Total revenue (must equal Part VIII. column (A). line 12)  |    | 2.00 | 3,680                 |  |  |  |  |  |  |
| 2    | Total revenue (must equal Part VIII, column (A), line 12)         1         1           Total expenses (must equal Part IX, column (A), line 25)         2         2 |    |      | <u>3,660</u><br>0,659 |  |  |  |  |  |  |
| 2    | Revenue less expenses. Subtract line 2 from line 1   |    |      | 3,021                 |  |  |  |  |  |  |
| 4    | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4  |    |      | 7,221                 |  |  |  |  |  |  |
| 5    | Other changes in net assets or fund balances (explain in Schedule O)   |    |      |                       |  |  |  |  |  |  |
| 6    | Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,   |    |      | 0                     |  |  |  |  |  |  |
| Ŭ    | column (B))  |    | 1,50 | 0,242                 |  |  |  |  |  |  |
| Part |  |    |      |                       |  |  |  |  |  |  |
|      | Check if Schedule O contains a response to any question in this Part XII   |    |      |                       |  |  |  |  |  |  |
|      |  |    | Yes  | No                    |  |  |  |  |  |  |
| 1    | Accounting method used to prepare the Form 990:  Cash  Accrual Other   |    |      |                       |  |  |  |  |  |  |
|      | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  |    |      |                       |  |  |  |  |  |  |
| 2a   | Were the organization's financial statements compiled or reviewed by an independent accountant?  | 2a |      | ~                     |  |  |  |  |  |  |
| b    | Were the organization's financial statements audited by an independent accountant?   | 2b |      | ~                     |  |  |  |  |  |  |
| С    | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight  |    |      |                       |  |  |  |  |  |  |
|      | of the audit, review, or compilation of its financial statements and selection of an independent accountant?   | 2c |      |                       |  |  |  |  |  |  |
|      | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  |    |      |                       |  |  |  |  |  |  |
| d    | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: |    |      |                       |  |  |  |  |  |  |
|      | Separate basis Consolidated basis Both consolidated and separate basis   |    |      |                       |  |  |  |  |  |  |
| 3a   | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in  |    |      |                       |  |  |  |  |  |  |
|      | the Single Audit Act and OMB Circular A-133?   | 3a |      | ~                     |  |  |  |  |  |  |
| b    | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the   |    |      |                       |  |  |  |  |  |  |
|      | required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits  | 3b |      |                       |  |  |  |  |  |  |

### 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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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 related organization compensated any current officer, director, or trustee.

| (A)   | (B)   |                                   |                       | •       | C)           |                                 |        | (D)                                    | (E)  | (F)  |
|---|---|-----------------------------------|-----------------------|---------|--------------|---------------------------------|--------|--|--|--|
| Name and Title  | Average<br>hours per<br>week  |                                   | ,                     |         |              | that ap<br>⊈ <u>∓</u>           |        | Reportable<br>compensation<br>from     | Reportable<br>compensation from<br>related | Estimated<br>amount of<br>other  |
|   | (describe<br>hours for<br>related<br>organizations<br>in Schedule<br>O) | Individual trustee<br>or director | Institutional trustee | Officer | Key employee | Highest compensated<br>employee | Former | the<br>organization<br>(W-2/1099-MISC) | organizations<br>(W-2/1099-MISC)           | compensation<br>from the<br>organization<br>and related<br>organizations |
| (1) Eric Dillé  | 5   |                                   |                       |         |              |                                 |        | 0                                      | 0  |  |
| Vice President Government & Public Affairs                      |   | ✓                                 |                       | ✓       |              |                                 |        |  |  |  |
| (2) Bill Lancaster<br>Vice President Membership                 | 5   | ✓                                 |                       | ✓       |              |                                 |        | 0                                      | 0  | C  |
| (3) Porter Bennett<br>Vice President Natural Gas Markets        | 5   | 1                                 |                       | ~       |              |                                 |        | 0                                      | 0  | C  |
| (4) Greg Ruben<br>Vice President Natural Gas Transportation     | 5   | ~                                 |                       | ✓       |              |                                 |        | 0                                      | 0  | C  |
| (5) Pam Roth<br>Colorado State Vice President                   | 25  | ✓                                 |                       |         |              |                                 |        | 0                                      | 0  | C  |
| (6) Bruce Bowman<br>Montana State Vice President                | 25  | ~                                 |                       |         |              |                                 |        | 0                                      | 0  | C  |
| (7) Phil Kriz<br>Nebraska State Vice President                  | 25  | ~                                 |                       |         |              |                                 |        | 0                                      | 0  | C  |
| (8) John Byrom<br>New Mexico State Vice President               | 25  | 1                                 |                       |         |              |                                 |        | 0                                      | 0  | C  |
| (9) Brent Miller<br>North and South Dakota State Vice President | 25  | ~                                 |                       |         |              |                                 |        | 0                                      | 0  | C  |
| (10) Alex Campbell<br>Utah State Vice President                 | 25  | ~                                 |                       |         |              |                                 |        | 0                                      | 0  | C  |
| (11) Dave Banko<br>Washington/Oregon Vice President             | 25  | ✓                                 |                       |         |              |                                 |        | 0                                      | 0  | C  |
| (12) Shane Schulz<br>Wyoming State Vice President               | 25  | ~                                 |                       |         |              |                                 |        | 0                                      | 0  | C  |
| (13) Daria Mahoney<br>Banking & Finance Committee Chair         | 25  | ~                                 |                       |         |              |                                 |        | 0                                      | 0  | C  |
| (14) Jack Ekstrom<br>Legislative, Legal, & Regulatory Chair     | 25  | ~                                 |                       |         |              |                                 |        | 0                                      | 0  | C  |
| (15) Jagadeesan Sethuraman<br>Air Quality Subcommittee Chair    | 25  | ~                                 |                       |         |              |                                 |        | 0                                      | 0  | C  |
| (16) Tom Crowe<br>NGV Subcommittee Chair                        | 25  | ✓                                 |                       |         |              |                                 |        | 0                                      | 0  | C  |

| Part VII Section A. Officers, Directors, Tru<br>(A) | (B)       |                               | -                     | (0      |              |                              |        | (D)  | (E)  | (F)  |
|---|-----------|-------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|--|--|
| Name and title                                      | Average   | Position (check all that appl |                       |         |              |                              | ply)   | Reportable   | Reportable   | Estimated  |
|   | hours per | Individual tr<br>or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | compensation from<br>related<br>organizations<br>(W-2/1099-MISC) | amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| 17) Pat Hanley                                      | 25        |                               |                       |         |              |                              |        | 0  | 0  | (  |
| Tax Subcommittee Chair                              | .25       | ✓                             |                       |         |              |                              |        | 0  | 0  |  |
| 18) Joe Icenogle                                    | 25        |                               |                       |         |              |                              |        | 0  | 0  | (  |
| Wildlife Subcommittee Chair                         | .25       | ✓                             |                       |         |              |                              |        | 0  | 0  |  |
| 19) Steve Bain                                      | 25        |                               |                       |         |              |                              |        | 0  | o  | (  |
| At-Large  | .23       | ✓                             |                       |         |              |                              |        | Ŭ  | Ŭ  |  |
| <b>20)</b> Kevin Bailey                             | 25        |                               |                       |         |              |                              |        | 0  | o  | (  |
| At-Large  | .20       | ✓                             |                       |         |              |                              |        | Ŭ  | Ŭ  |  |
| 21) Steve Barnes                                    | 25        |                               |                       |         |              |                              |        | 0  | 0  | (  |
| At-Large  | .20       | ✓                             |                       |         |              |                              |        | Ű  |  |  |
| 22) Rob Bayless                                     | 25        |                               |                       |         |              |                              |        | 0  | 0  | (  |
| At-Large  | .20       | ✓                             |                       |         |              |                              |        |  |  | · · · · · · · · · · · · · · · · · · ·  |
| 23) Dominic Bazile                                  | 25        |                               |                       |         |              |                              |        | 0  | 0  | (  |
| At-Large  | .20       | $\checkmark$                  |                       |         |              |                              |        |  |  | · · · · · · · · · · · · · · · · · · ·  |
| 24) Todd Berryman                                   | 25        |                               |                       |         |              |                              |        | 0  | 0  | (  |
| At-Large  |           | ✓                             |                       |         |              |                              |        | -  |  |  |
| 25) Randy Bolles                                    | 25        |                               |                       |         |              |                              |        | 0  | 0  | (  |
| At-Large  |           | ✓                             |                       |         |              |                              |        |  |  |  |
| <b>26)</b> Jonny Brumley                            | 25        |                               |                       |         |              |                              |        | 0  | 0  | (  |
| At-Large  |           | ✓                             |                       |         |              |                              |        |  |  |  |
| 27) Mike Brunstein                                  | 25        |                               |                       |         |              |                              |        | 0  | 0  | (  |
| At-Large  |           | ✓                             |                       |         |              |                              |        |  |  |  |
| 28) Jason Buehler                                   | 25        |                               |                       |         |              |                              |        | 0  | 0  | (  |
| At-Large  |           | ✓                             |                       |         |              |                              | Ļ      |  |  |  |
| 1b Sub-total  |           | • •                           | ·                     | •       |              | •                            |        | 0  | 0  | (  |
| c Total from continuation sheets to Par             |           |                               | ·                     | •       |              | •                            |        |  |  |  |
| d Total (add lines 1b and 1c)                       |           |                               |                       |         |              |                              |        |  |  |  |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►

- **3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*
- 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 . . . . . . . . .

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

|   | (A)<br>Name and business address   | <b>(B)</b><br>Description of services | <b>(C)</b><br>Compensation |
|---|--|---------------------------------------|----------------------------|
|   |  |                                       |                            |
|   |  |                                       |                            |
|   |  |                                       |                            |
|   |  |                                       |                            |
|   |  |                                       |                            |
| 2 | Total number of independent contractors (including but not limited to received more than \$100,000 in compensation from the organization ► | those listed above) who               |                            |

Yes No

3

4

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| Part VII Section A. Officers, Directors, Tru | stees, Key  | Emplo                             | yee                      | es, a   | and          | Highe                        | est    | Compensated                                    | Employees (conti                            | nued)   |
|--|---|-----------------------------------|--------------------------|---------|--------------|------------------------------|--------|--|---|---|
| (A)  | (B)   |                                   |                          | (0      | C)           |                              |        | (D)  | (E)   | (F)   |
| Name and title                               | Average<br>hours per  |                                   | Position (check all that |         |              |                              |        | Reportable compensation                        | Reportable compensation from                | Estimated<br>amount of  |
|  | week<br>(describe<br>hours for<br>related<br>organizations<br>in Schedule<br>O) | Individual trustee<br>or director | Institutional trustee    | Officer | Key employee | Highest compensated employee | Former | from<br>the<br>organization<br>(W-2/1099-MISC) | related<br>organizations<br>(W-2/1099-MISC) | other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| (17) Steve Hulse                             | 25  |                                   |                          |         |              |                              |        | 0  | 0   | 0   |
| At-Large                                     | 20  | $\checkmark$                      |                          |         |              |                              |        | 0  | U   | 0   |
| (18) Tom Jepperson                           | 25  |                                   |                          |         |              |                              |        | 0  | 0   | 0   |
| At-Large                                     | .25   |                                   |                          |         |              |                              |        | 0  | 0   | 0   |
| (19) Danny Jimenez                           | 25  |                                   |                          |         |              |                              |        | 0  | 0   | 0   |
| At-Large                                     | .25   | $\checkmark$                      |                          |         |              |                              |        | 0  | 0   | 0   |
| (20) Dana Johnson                            | 25  |                                   |                          |         |              |                              |        | 0  | 0   | 0   |
| At-Large                                     | .23   | ✓                                 |                          |         |              |                              |        | , v  | 0   | 0   |
| (21) Bill Jones                              | 25  |                                   |                          |         |              |                              |        | 0  | 0   | 0   |
| At-Large                                     | .23   | ✓                                 |                          |         |              |                              |        | , v  | 0   | 0   |
| (22) Bruce Kelso                             | 25  |                                   |                          |         |              |                              |        | 0  | 0   | 0   |
| At-Large                                     | .20   | ✓                                 |                          |         |              |                              |        | Ŭ  | 0   |   |
| (23) Mike Kennedy                            | 25  |                                   |                          |         |              |                              |        | 0  | 0   | 0   |
| At-Large                                     |   | ✓                                 |                          |         |              |                              |        |  |   |   |
| (24) E.P. "Tripp Kerr III                    | 25  |                                   |                          |         |              |                              |        | 0  | 0   | 0   |
| At-Large                                     |   | ✓                                 |                          |         |              |                              |        |  |   |   |
| (25) Art Krasny                              | 25  |                                   |                          |         |              |                              |        | 0  | 0   | 0   |
| At-Large                                     |   | ✓                                 |                          |         |              |                              |        |  |   |   |
| (26) Dale Larsen                             | 25  |                                   |                          |         |              |                              |        | 0  | 0   | 0   |
| At-Large                                     |   | ✓                                 |                          |         |              |                              |        |  |   |   |
| (27) DJ Lay                                  | 25  |                                   |                          |         |              |                              |        | 0  | 0   | 0   |
| At-Large                                     |   | ✓                                 |                          |         |              |                              |        |  |   |   |
| (28) Jim Lightner                            | 25  |                                   |                          |         |              |                              |        | 0  | 0   | 0   |
| At-Large                                     |   | ✓                                 |                          |         |              |                              |        |  |   |   |
| 1b Sub-total                                 |   |                                   | ·                        | •       |              | ·                            |        | 0  | 0   | 0   |
| c Total from continuation sheets to Parl     |   |                                   | ·                        | •       | • •          | •                            |        |  |   |   |
| d Total (add lines 1b and 1c)                |   |                                   |                          |         |              |                              |        |  |   |   |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►

| 3 | Did the organization list any former officer, director or trustee, key | / employee, | or | highest | compensated |
|---|--|-------------|----|---------|-------------|
|   | employee on line 1a? If "Yes," complete Schedule J for such individual |             |    |         |             |

- 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 . . . . . . . . . .

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

|   | (A)<br>Name and business address   | <b>(B)</b><br>Description of services | <b>(C)</b><br>Compensation |
|---|--|---------------------------------------|----------------------------|
|   |  |                                       |                            |
|   |  |                                       |                            |
|   |  |                                       |                            |
|   |  |                                       |                            |
|   |  |                                       |                            |
| 2 | Total number of independent contractors (including but not limited to received more than \$100,000 in compensation from the organization ► | those listed above) who               |                            |

Yes No

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### 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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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 related organization compensated any current officer, director, or trustee.

| Check this box if neither the organization no | -   | a orga        | anız                 |         |              | ompe                            | nsa       |  |  |   |
|---|---|---------------|----------------------|---------|--------------|---------------------------------|-----------|--|--|---|
| (A)   | (B)   |               | . ,                  | (0      |              |                                 |           | (D)  | (E)  | (F)   |
| Name and Title                                | Average<br>hours per<br>week<br>(describe<br>hours for<br>related<br>organizations<br>in Schedule<br>O) | Poor director | nstitutional trustee | Officer | Key employee | Highest compensated<br>employee | p) Former | Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | Reportable<br>compensation from<br>related<br>organizations<br>(W-2/1099-MISC) | Estimated<br>amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| (1) Chris Carter<br>At-Large                  | .25   | √             |                      |         |              |                                 |           | 0  | 0  | 0   |
| (2) Robert Clark<br>At-Large                  | .25   | √             |                      |         |              |                                 |           | 0  | 0  | 0   |
| (3) Bob Davis<br>At-Large                     | .25   | ✓             |                      |         |              |                                 |           | 0  | 0  | 0   |
| (4) Paul DeBonis<br>At-Large                  | .25   |               |                      |         |              |                                 |           | 0  | 0  | 0   |
| (5) Cornelius Dupré<br>At-Large               | .25   |               |                      |         |              |                                 |           | 0  | 0  | 0   |
| (6) Todd Ennenga<br>At-Large                  | .25   | ✓             |                      |         |              |                                 |           | 0  | 0  | 0   |
| (7) Rich Eichler<br>At-Large                  | .25   | •<br>✓        |                      |         |              |                                 |           | 0  | 0  | 0   |
| (8) Mike Decker                               | .25   | ▼<br>✓        |                      |         |              |                                 |           | 0  | 0  | 0   |
| At-Large (9) Tuss Erickson                    | .25   |               |                      |         |              |                                 |           | 0  | 0  | 0   |
| At-Large (10) Steve Fallin                    | .25   | ✓<br>✓        |                      |         |              |                                 |           | 0  | 0  | 0   |
| At-Large (11) Tom Foncannon                   | .25   | ✓<br>         |                      |         |              |                                 |           | 0  | 0  | 0   |
| At-Large (12) Rick Grisinger                  | .25   | ✓             |                      |         |              |                                 |           | 0  | 0  | 0   |
| At-Large (13) Stephen Harpham                 | .25   | √             |                      |         |              |                                 |           | 0  | 0  | 0   |
| At-Large<br>(14) Alan Harrison                |   | √             |                      |         |              |                                 |           |  |  |   |
| At-Large<br>(15) Tad Herz                     | .25   | √             |                      |         |              |                                 |           | 0  | 0  | 0   |
| At-Large<br>(16) Tim Hopkins                  | .25   | √             |                      |         |              |                                 |           | 0  | 0  | 0   |
| At-Large                                      | .25   | √             |                      |         |              |                                 |           | 0  | 0  | 0   |

| Part VII Section A. Officers, Directors, Tru | stees, Key  | Emplo                             | byee                  | es, a   | and          | Highe                        | est          | Compensated                                    | Employees (conti                            | nued)   |
|--|---|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------------|--|---|---|
| (A)  | (B)   |                                   | -                     | (0      |              |                              |              | (D)  | (E)   | (F)   |
| Name and title                               | Average<br>hours per  |                                   | ion (c                |         |              | hat ap                       | ply)         | Reportable compensation                        | Reportable compensation from                | Estimated<br>amount of  |
|  | week<br>(describe<br>hours for<br>related<br>organizations<br>in Schedule<br>O) | Individual trustee<br>or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former       | from<br>the<br>organization<br>(W-2/1099-MISC) | related<br>organizations<br>(W-2/1099-MISC) | other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| (17) Shawn Reed                              | .25   |                                   |                       |         |              |                              |              | 0  | 0   | 0   |
| At-Large                                     | .20   | ✓                                 |                       |         |              |                              |              | 0  | 0   | 0   |
| (18) Doug Rogers                             | .25   |                                   |                       |         |              |                              |              | 0  | 0   | 0   |
| At-Large                                     | .23   | ✓                                 |                       |         |              |                              |              | 0  | 0   | 0   |
| (19) Phil Schlagel                           | .25   |                                   |                       |         |              |                              |              | 0  | 0   | 0   |
| At-Large                                     | .23   | ✓                                 |                       |         |              |                              |              | 0  | 0   | 0   |
| (20) Charlie Searle                          | .25   |                                   |                       |         |              |                              |              | 0  | 0   | 0   |
| At-Large                                     | .20   | ✓                                 |                       |         |              |                              |              | 0  | 0   | 0   |
| (21) Dave Searle                             | .25   |                                   |                       |         |              |                              |              | 0  | 0   | 0   |
| At-Large                                     | .23   | ✓                                 |                       |         |              |                              |              | 0  | 0   | 0   |
| (22) Ray Singleton                           | .25   |                                   |                       |         |              |                              |              | 0  | 0   | 0   |
| At-Large                                     | .23   | ✓                                 |                       |         |              |                              |              | 0  | 0   | 0   |
| (23) Lem Smith                               | .25   |                                   |                       |         |              |                              |              | 0  | 0   | 0   |
| At-Large                                     | .23   | ✓                                 |                       |         |              |                              |              | 0  | 0   | 0   |
| (24) Michael Smith                           | .25   |                                   |                       |         |              |                              |              | 0  | 0   | 0   |
| At-Large                                     | .23   | ✓                                 |                       |         |              |                              |              | 0  | 0   | 0   |
| (25) Geoff Solich                            | .25   |                                   |                       |         |              |                              |              | 0  | 0   | 0   |
| At-Large                                     | .20   | ✓                                 |                       |         |              |                              |              | Ŭ  | Ű   |   |
| (26) Stan Sprinkle                           | .25   |                                   |                       |         |              |                              |              | 0  | 0   | 0   |
| At-Large                                     | .20   | ✓                                 |                       |         |              |                              |              | Ŭ  | Ű   |   |
| (27) Phil Stalnaker                          | .25   |                                   |                       |         |              |                              |              | 0  | 0   | 0   |
| At-Large                                     | .20   | ✓                                 |                       |         |              |                              |              | Ŭ  | Ű   |   |
| (28) Pete Stark                              | .25   |                                   |                       |         |              |                              |              | 0  | 0   | 0   |
| At-Large                                     | .20   | ✓                                 |                       |         |              |                              |              | Ŭ  | ĭ   |   |
| 1b Sub-total                                 |   |                                   |                       |         |              |                              |              | 0  | 0   | 0   |
| c Total from continuation sheets to Par      | t VII, Sectio   | n A                               |                       |         |              |                              |              |  |   |   |
| d Total (add lines 1b and 1c)                |   |                                   |                       |         |              |                              |              |  |   |   |
| 2 Total number of individuals (including bu  | it not limited  | to th                             | معما                  | list    | ed :         | ahove                        | <u>مر (د</u> | ho received m                                  | ore than \$100.00                           | 0 in  |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►

| 3 | Did the organization list any former officer, director or trustee, ke  | y emplo | oyee, | or | highest | comper | nsated |
|---|--|---------|-------|----|---------|--------|--------|
|   | employee on line 1a? If "Yes," complete Schedule J for such individual |         |       |    |         |        |        |

- 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 . . . . . . . . . .

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

|   | (A)<br>Name and business address   | <b>(B)</b><br>Description of services | <b>(C)</b><br>Compensation |
|---|--|---------------------------------------|----------------------------|
|   |  |                                       |                            |
|   |  |                                       |                            |
|   |  |                                       |                            |
|   |  |                                       |                            |
|   |  |                                       |                            |
| 2 | Total number of independent contractors (including but not limited to received more than \$100,000 in compensation from the organization ► | those listed above) who               |                            |

Yes No

3

4

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

Check if Schedule O contains a response to any question in this Part VII . . . . . . . . . . . . . . . .

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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 related organization compensated any current officer, director, or trustee.

| (A)                         | (B)  | (C)                               |                       |         |              |                              |        | (D)  | (E)  | (F)  |
|-----------------------------|--|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|--|--|
| Name and Title              | Average  | Position (check all that apply)   |                       |         |              | that ap                      |        | Reportable   | Reportable   | Estimated  |
|                             | hours per<br>week<br>(describe<br>hours for<br>related<br>organizations<br>in Schedule<br>O) | Individual trustee<br>or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | compensation from<br>related<br>organizations<br>(W-2/1099-MISC) | amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| (1) Joe Lima                | 25   |                                   |                       |         |              |                              |        | 0  | 0  | C  |
| At-Large                    |  | $\checkmark$                      |                       |         |              |                              |        |  |  |  |
| (2) Andy Logan              | 25   |                                   |                       |         |              |                              |        | 0  | 0  | C  |
| At-Large                    | .20  | $\checkmark$                      |                       |         |              |                              |        |  | Ű  |  |
| (3) Brian Macke             | 25   |                                   |                       |         |              |                              |        | 0  | 0  | C  |
| At-Large                    | .20  | $\checkmark$                      |                       |         |              |                              |        |  | Ű  |  |
| (4) Murphy Markham          | 25   |                                   |                       |         |              |                              |        | 0  | 0  | C  |
| At-Large                    | .20  | $\checkmark$                      |                       |         |              |                              |        |  | Ű  |  |
| (5) John T. McDougal        | 25   |                                   |                       |         |              |                              |        | 0  | 0  | C  |
| At-Large                    | .20  | ✓                                 |                       |         |              |                              |        | Ů  | Ű  |  |
| (6) Ed McLaughlin           | 25   |                                   |                       |         |              |                              |        | 0  | 0  | C  |
| At-Large                    | .20  | ✓                                 |                       |         |              |                              |        | Ů  | Ű  |  |
| (7) T. Greg Merrion         |  |                                   |                       |         |              |                              |        | 0  | 0  | C  |
| At-Large                    |  | ✓                                 |                       |         |              |                              |        |  |  |  |
| (8) Scott Moore<br>At-Large | .25  | 1                                 |                       |         |              |                              |        | 0  | 0  | C  |
| (9) René Morin              |  | v                                 |                       |         |              |                              |        |  |  |  |
| At-Large                    | .25  | 1                                 |                       |         |              |                              |        | 0  | 0  | C  |
| (10) Greg Morzano           |  | •                                 |                       |         |              |                              |        |  |  |  |
| At-Large                    | .25  | 1                                 |                       |         |              |                              |        | 0  | 0  | C  |
| (11) Mike O'Shaughnessy     |  | •                                 |                       |         |              |                              |        |  |  |  |
| At-Large                    | .25  | 1                                 |                       |         |              |                              |        | 0  | 0  | C  |
| (12) Larry Parnell          |  | •                                 |                       |         |              |                              |        |  |  |  |
| At-Large                    | .25  | 1                                 |                       |         |              |                              |        | 0  | 0  | C  |
| (13) Randy Pharo            |  | •                                 |                       |         |              |                              |        |  |  |  |
| At-Large                    | .25  | 1                                 |                       |         |              |                              |        | 0  | 0  | C  |
| (14) Bill Picquet           |  |                                   |                       |         |              |                              |        |  |  |  |
| At-Large                    | .25  | 1                                 |                       |         |              |                              |        | 0  | 0  | C  |
| (15) Ward Polzin            |  |                                   |                       |         |              |                              |        | _  |  |  |
| At-Large                    | .25  | 1                                 |                       |         |              |                              |        | 0  | 0  | C  |
| (16) Jay Prudhomme          | 0.5  |                                   |                       |         |              |                              |        |  |  |  |
| At-Large                    | .25  | 1                                 |                       |         |              |                              |        | 0  | 0  | C  |

| hours per<br>week<br>(describe<br>hours for<br>related<br>organizations<br>related<br>organizations<br>week<br>(describe<br>hours for<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related<br>organizations<br>related  |  |
|---|--|
| Name and title       Average hours per week (describe hours per related organizations in Schedular)       Position (check all that apply)       Reportable compensation from the organizations (W-2/1099-MISC)       Reportable compensation from the organizations (W-2/1099-MISC)         (17)  | (5)  |
| hours per<br>(describe<br>hours for<br>related<br>organizations<br>in Schedule<br>O)       nours per<br>(describe<br>hours for<br>related<br>organizations<br>in Schedule<br>O)       nours per<br>(describe<br>hours for<br>related<br>organizations<br>in Schedule<br>O)       nourset<br>(describe<br>for<br>the<br>organization<br>for<br>the<br>organization<br>(W-2/1099-MISC)       compensation<br>related<br>organizations<br>(W-2/1099-MISC)       compensation<br>related<br>organiz | <b>(F)</b><br>Estimated  |
| (17)       (18)       (18)       (19)       (19)       (19)       (19)       (19)       (19)       (11)  | amount of<br>other<br>mppensation<br>from the<br>rganization<br>and related<br>ganizations |
| (19)       I  |  |
| 20)       21)       22)       22)       22)       22)       23)       23)       24)       2   |  |
| 21)     22)     22)     23)     24)     25)     25)     210 <td></td>   |  |
| (22)  |  |
| 23)     24)     25)     23)     24)     24)     25)   |  |
|   |  |
| 25)   |  |
|   |  |
| (26)  |  |
|   |  |
| (27)  |  |
|   |  |
| 1b       Sub-total       694,807       0         c       Total from continuation sheets to Part VII, Section A       .       .       .  | 57,224   |
| d Total (add lines 1b and 1c)   |  |
| <ul> <li>2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►</li> </ul>   |  |
| 3 Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated  | Yes No<br>3  |
|   | 4  |
| 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  |
| Section B. Independent Contractors  |  |
| 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 compensation from the organization.   | of   |

|   | (A)<br>Name and business address   | <b>(B)</b><br>Description of services | <b>(C)</b><br>Compensation |
|---|--|---------------------------------------|----------------------------|
|   |  |                                       |                            |
|   |  |                                       |                            |
|   |  |                                       |                            |
|   |  |                                       |                            |
|   |  |                                       |                            |
| 2 | Total number of independent contractors (including but not limited to received more than \$100,000 in compensation from the organization ► | those listed above) who               |                            |

### 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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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 related organization compensated any current officer, director, or trustee.

| (A)                       | (B)  | ed organization compensa          |                       |         |              |                              |        | (D)  | (E)  | (F)  |
|---------------------------|--|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|--|--|
| Name and Title            | Average  | Position (check all that apply)   |                       |         |              |                              | ply)   | Reportable   | Reportable   | Estimated  |
|                           | hours per<br>week<br>(describe<br>hours for<br>related<br>organizations<br>in Schedule<br>O) | Individual trustee<br>or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | compensation from<br>related<br>organizations<br>(W-2/1099-MISC) | amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| (1) Sheridan Swords       | .25  |                                   |                       |         |              |                              |        | 0  | 0  | 0  |
| At-Large                  |  | ✓                                 |                       |         |              |                              |        |  | _  |  |
| (2) Mark Thompson         | .25  |                                   |                       |         |              |                              |        | 0  | 0  | 0  |
| At-Large                  |  | ✓                                 |                       |         |              |                              |        | -  |  | -  |
| (3) Tom Tyree             | .25  |                                   |                       |         |              |                              |        | 0  | 0  | 0  |
| At-Large                  |  | ✓                                 |                       |         |              |                              |        | -  |  |  |
| (4) Larry Van Ryan        | .25  |                                   |                       |         |              |                              |        | 0  | 0  | 0  |
| At-Large                  |  | ✓                                 |                       |         |              |                              |        |  | _  |  |
| (5) Vaughn Vennerberg     | .25  |                                   |                       |         |              |                              |        | 0  | 0  | 0  |
| At-Large                  |  | ✓                                 |                       |         |              |                              |        |  | _  |  |
| (6) John Vering           | .25  |                                   |                       |         |              |                              |        | 0  | 0  | 0  |
| At-Large                  |  | ✓                                 |                       |         |              |                              |        |  |  |  |
| (7) Dick Weber            | .25  |                                   |                       |         |              |                              |        | 0  | 0  | 0  |
| At-Large                  |  | ✓                                 |                       |         |              |                              |        |  |  |  |
| (8) Barth Whitham         | .25  |                                   |                       |         |              |                              |        | 0  | 0  | 0  |
| At-Large                  |  | ✓                                 |                       |         |              |                              |        |  |  |  |
| (9) Jack Wold             | .25  |                                   |                       |         |              |                              |        | 0  | 0  | 0  |
| At-Large                  |  | ✓                                 |                       |         |              |                              |        |  |  |  |
| (10) Mike Wozniak         | .25  |                                   |                       |         |              |                              |        | 0  | 0  | 0  |
| At-Large (11) Paul Zecchi |  | ✓                                 |                       |         |              |                              |        |  |  |  |
|                           | .25  | ~                                 |                       |         |              |                              |        | 0  | 0  | 0  |
| At-Large                  |  | •                                 |                       |         |              |                              |        |  |  |  |
| (12)                      | -  |                                   |                       |         |              |                              |        | 0  | 0  | 0  |
| (13)                      | -  |                                   |                       |         |              |                              |        | 0  | 0  | 0  |
| (14)                      | -  |                                   |                       |         |              |                              |        | 0  | 0  | 0  |
| (15)                      |  |                                   |                       |         |              |                              |        | 0  | 0  | 0  |
|                           |  |                                   |                       |         |              |                              |        | 0  | U  | 0  |
| (16)                      | -  |                                   |                       |         |              |                              |        | 0  | 0  | 0  |
|                           |  |                                   |                       |         |              |                              |        |  | 11   | Form <b>990</b> (2010  |

| SCHEDULE C           | Political Campaign and Lobbying Activities |
|----------------------|--|
| (Form 990 or 990-EZ) | · · · · · · · · · · · · · · · · · · ·      |

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

Department of the Treasury Internal Revenue Service Service

If the organization answered "Yes," to 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," to 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," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

| Name | e of organization  | Employer i | identification number |    |
|------|--|------------|-----------------------|----|
| West | tern Energy Alliance   |            | 84 0700841            |    |
| Par  | t I-A Complete if the organization is exempt under section 501(c) or is a section 501(c) or | ection 52  | 27 organization.      |    |
| 1    | Provide a description of the organization's direct and indirect political campaign activities  | in Part IV | 1.                    |    |
| 2    | Political expenditures   | 🕨          | \$                    |    |
| 3    | Volunteer hours  |            |                       |    |
| Par  | t 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 495   | 5          |                       |    |
| 3    | If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  |            | 🗌 Yes                 | No |
| 4a   | Was a correction made?   |            | 🗌 Yes                 | No |
| b    | If "Yes," describe in Part IV.   |            |                       |    |
| Par  | t I-C Complete if the organization is exempt under section 501(c), except  | section 5  | 501(c)(3).            |    |
| 1    | Enter the amount directly expended by the filing organization for section 527 exemp  | t function |                       |    |
|      | activities   | 🕨          | \$                    |    |
| 2    | Enter the amount of the filing organization's funds contributed to other organizations for   | or section |                       |    |
|      | 527 exempt function activities   | 🕨          | \$                    |    |
| 3    | Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1  | 120-POL,   |                       |    |
|      | line 17b   | 🕨          | \$                    |    |
| 4    | Did the filing organization file Form 1120-POL for this year?  |            | <b>Yes</b>            | No |

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>(a)</b> Name | (b) Address | <b>(c)</b> EIN | <b>(d)</b> Amount paid from<br>filing organization's<br>funds. If none, enter -0 | (e) Amount of political<br>contributions received and<br>promptly and directly<br>delivered to a separate<br>political organization. If<br>none, enter -0 |
|-----------------|-------------|----------------|--|---|
| (1)             |             |                |  |   |
| (2)             |             |                |  |   |
| (3)             |             |                |  |   |
| (4)             |             |                |  |   |
| (5)             |             |                |  |   |
| (6)             |             |                |  |   |

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

Schedule C (Form 990 or 990-EZ) 2010

OMB No. 1545-0047

| 2010                         |  |
|------------------------------|--|
| Open to Public<br>Inspection |  |

Yes No

| SCH | Equie C (Form 990 or 990-EZ) 2010                     |   |                       | Page           |
|-----|---|---|-----------------------|----------------|
| Pa  | rt II-A Complete if the organization section 501(h)). | is exempt under section 501(c)(3) and file        | d Form 5768 (elec     | ction under    |
| Α   | Check ► □ if the filing organization belo             | ongs to an affiliated group.                      |                       |                |
| В   | Check ► [] if the filing organization che             | apply.  |                       |                |
|     | Limits on Lobby                                       | ring Expenditures                                 | (a) Filing            | (b) Affiliated |
|     |   | ans amounts paid or incurred.)                    | organization's totals | group totals   |
| 1   | a Total lobbying expenditures to influence p          | oublic opinion (grass roots lobbying)             |                       |                |
|     | <b>b</b> Total lobbying expenditures to influence a   | a legislative body (direct lobbying)              |                       |                |
|     | c Total lobbying expenditures (add lines 1a           | and 1b)   |                       |                |
|     |   |   |                       |                |
|     |   | lines 1c and 1d)                                  |                       |                |
|     | f Lobbying nontaxable amount. Enter th columns.       | ne amount from the following table in both        |                       |                |
|     | If the amount on line 1e, column (a) or (b) is:       | The lobbying nontaxable amount is:                |                       |                |
|     | Not over \$500,000                                    | 20% of the amount on line 1e.                     |                       |                |
|     | Over \$500,000 but not over \$1,000,000               | \$100,000 plus 15% of the excess over \$500,000.  |                       |                |
|     | Over \$1,000,000 but not over \$1,500,000             |   |                       |                |
|     | Over \$1,500,000 but not over \$17,000,000            | \$225,000 plus 5% of the excess over \$1,500,000. |                       |                |
|     | Over \$17,000,000                                     | \$1,000,000.                                      |                       |                |
|     | g Grassroots nontaxable amount (enter 259             | 6 of line 1f)                                     |                       |                |
|     | h Subtract line 1g from line 1a. If zero or les       | s, enter -0                                       |                       |                |

i If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 j reporting section 4911 tax for this year?

> 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five

columns below. See the instructions for lines 2a through 2f on page 4.)

|    | Lobbying Expenditures During 4-Year Averaging Period       |                 |                 |                 |                 |                  |  |  |  |  |  |
|----|--|-----------------|-----------------|-----------------|-----------------|------------------|--|--|--|--|--|
|    | Calendar year (or fiscal year beginning in)                | <b>(a)</b> 2007 | <b>(b)</b> 2008 | <b>(c)</b> 2009 | <b>(d)</b> 2010 | <b>(e)</b> Total |  |  |  |  |  |
| 2a | Lobbying nontaxable amount                                 |                 |                 |                 |                 |                  |  |  |  |  |  |
| b  | Lobbying ceiling amount<br>(150% of line 2a, column (e))   |                 |                 |                 |                 |                  |  |  |  |  |  |
| С  | Total lobbying expenditures                                |                 |                 |                 |                 |                  |  |  |  |  |  |
| d  | Grassroots nontaxable amount                               |                 |                 |                 |                 |                  |  |  |  |  |  |
| e  | Grassroots ceiling amount<br>(150% of line 2d, column (e)) |                 |                 |                 |                 |                  |  |  |  |  |  |
| f  | Grassroots lobbying expenditures                           |                 |                 |                 |                 |                  |  |  |  |  |  |

Schedule C (Form 990 or 990-EZ) 2010

### 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)).

|      |   | (a)     |        | (b)   |    |
|------|---|---------|--------|-------|----|
|      |   | Yes     | No     | Amoun | t  |
| 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?   |         |        |       |    |
| d    | Mailings to members, legislators, or the public?  |         |        |       |    |
| е    | 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? If "Yes," describe in Part IV   |         |        |       |    |
| j    | Total. Add lines 1c through 1i  |         |        |       |    |
| 2a   | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?   |         |        |       |    |
| b    | If "Yes," enter the amount of any tax incurred under section 4912   |         |        |       |    |
| С    | 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 501(c)(6).  | )(5), c | or sec | tion  |    |
|      |   |         |        | Yes   | No |
| 1    | Were substantially all (90% or more) dues received nondeductible by members?  |         |        | 1     | ~  |
| 2    | Did the organization make only in-house lobbying expenditures of \$2,000 or less?   |         |        | 2     | ~  |

| 3    | Did the | ne organization agree to carryover lobbying and political expenditures from the prior year? |         | 3    |
|------|---------|---|---------|------|
| Part | III-B   | Complete if the organization is exempt under section 501(c)(4), section 501(c)(5),          | or sect | tion |

# rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

| 1 | Dues, assessments and similar amounts from members  | 1  | 1,930,560 |
|---|---|----|-----------|
| 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).  |    |           |
| а | Current year  | 2a | 170,624   |
| b | Carryover from last year  | 2b | 0         |
| С | Total   | 2c | 170,624   |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues   | 3  | 289,584   |
| 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 political expenditure next year?  | 4  |           |
| 5 | Taxable amount of lobbying and political expenditures (see instructions)  | 5  | 0         |

### Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

V

## Part IV Supplemental Information (continued)

| <br> |
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| SCHEE | DULE D |
|-------|--------|
| (Form | 990)   |

### **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

| OMB No. 1545-0047            |
|------------------------------|
| 2010                         |
| Open to Public<br>Inspection |

Employer identification number

#### V

Department of the Treasury Internal Revenue Service

Name of the organization

| Weste      | rn Energy Alliance   |   |                  | 84 070084           | 41                  |
|------------|--|---|------------------|---------------------|---------------------|
| Par        | t I Organizations Maintaining Dono<br>organization answered "Yes" to Fe  | or Advised Funds or Other Similar Fu<br>orm 990, Part IV, line 6.                   | nds or Acco      | ounts. Co           | mplete if the       |
|            |  | (a) Donor advised funds   | <b>(b)</b> Fun   | ds and other a      | accounts            |
| 1          | Total number at end of year  |   |                  |                     |                     |
| 2          | Aggregate contributions to (during year) .   |   |                  |                     |                     |
| 3          | Aggregate 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    | advised             |                     |
|            | funds are the organization's property, subject   | -   |                  |                     | 🗌 Yes 🗌 No          |
| 6          | Did the organization inform all grantees, do<br>only for charitable purposes and not for the   | nors, and donor advisors in writing that gra  | ant funds can    | be used             |                     |
|            |  |   | •                |                     | 🗌 Yes 🗌 No          |
| Par        |  | plete if the organization answered "Yes'  | ' to Form 99     | 0 Part IV           |                     |
| 1          | Purpose(s) of conservation easements held l  |   | 101 0111 00      | <i>5</i> , i aitiv, |                     |
| •          |  | recreation or education) Preservation   | of an historia   | lly importa         | nt land area        |
|            | Protection of natural habitat  |   |                  |                     |                     |
|            |  |   | or a certified r | listoric stru       | icture              |
| 2          | Preservation of open space   | ation hold a qualified concervation contribut                                       | ion in the form  | a of a cono         | oruction            |
| 2          | Complete lines 2a through 2d if the organiza easement on the last day of the tax year.   | ation held a qualified conservation contribut                                       |                  | T OF a CONS         | ervation            |
|            | easement on the last day of the tax year.  |   |                  |                     |                     |
|            |  |   |                  | Held at the E       | End of the Tax Year |
| а          |  |   |                  |                     |                     |
| b          | Total acreage restricted by conservation eas   |   |                  |                     |                     |
| С          | Number of conservation easements on a cer  |   |                  |                     |                     |
| d          | Number of conservation easements includ  |   |                  |                     |                     |
|            | historic structure listed in the National Regis  |   |                  |                     |                     |
| 3          | Number of conservation easements modified tax year ►   | d, transferred, released, extinguished, or ter                                      | rminated by th   | ie organiza         | ation during the    |
| 4          | Number of states where property subject to   | conservation easement is located ►  |                  |                     |                     |
| 5          | Does the organization have a written pol   |   | spection, har    | ndling of           |                     |
|            | violations, and enforcement of the conservation  |   |                  |                     | 🗌 Yes 🗌 No          |
| 6          | Staff and volunteer hours devoted to monito  | pring, inspecting, and enforcing conservatio  | n easements      | durina the          |                     |
| -          | •  |   |                  |                     | <b>j</b>            |
| 7          | Amount of expenses incurred in monitoring,   | inspecting, and enforcing conservation eas  | sements durin    | g the year          |                     |
| 8          | Does each conservation easement reported   | on line 2(d) above satisfy the requirements   |                  | 0(h)(4)(B)          |                     |
| •          | () () () () () () () () () () () () () (   |   |                  | · · ·               |                     |
| 9          | In Part XIV, describe how the organization re  |   | -                |                     |                     |
|            | balance sheet, and include, if applicable, the organization's accounting for conservation e  | •   | mancial stater   | nems that           | describes the       |
| Dout       | <u> </u>   |   | w Othow Sim      | ilor Acco           |                     |
| Par        |  | ections of Art, Historical Treasures, o<br>vered "Yes" to Form 990, Part IV, line 8 |                  | llar Asse           | ts.                 |
| 10         | · · · · · · · · · · · · · · · · · · ·  |   |                  | tomont on           | d balance aboot     |
| <b>1</b> a | works of art, historical treasures, or other   |   |                  |                     |                     |
|            | public service, provide, in Part XIV, the text of  |   |                  |                     |                     |
| <b>b</b>   |  |   |                  |                     |                     |
| b          | If the organization elected, as permitted un<br>works of art, historical treasures, or other<br>public service, provide the following amount | similar assets held for public exhibition, e  |                  |                     |                     |
|            | (i) Revenues included in Form 990, Part VIII   | , line 1  | I                | ▶ \$                |                     |
|            | (ii) Assets included in Form 990, Part X   |   |                  | \$ West             | ern Energy Allian   |
| 2          | If the organization received or held works following amounts required to be reported u   |   |                  | financial g         | ain, provide the    |
| а          | Revenues included in Form 990, Part VIII, lin  | ne1   |                  | ▶ \$                | 410 17th Street     |
|            | Assets included in Form 990. Part X  |   |                  | ► \$                | 700                 |

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

| Schedul | e D (Form 990) 2010  |                   |                           |           |                                |          |                         | Page <b>2</b>           |
|---------|--|-------------------|---------------------------|-----------|--------------------------------|----------|-------------------------|-------------------------|
| Part    | III Organizations Maintaining  | Collections       | of Art, Hi                | stori     | cal Treasure                   | s, or O  | ther Similar A          | Assets (continued)      |
| 3       | Using the organization's acquisition, collection items (check all that apply): |                   | other rec                 | ords,     | check any of t                 | he follo | wing that are a         | significant use of its  |
| а       | Public exhibition  |                   | d                         |           | Loan or exch                   | ange pro | ograms                  |                         |
| b       | Scholarly research   |                   | е                         |           |                                |          |                         |                         |
| с       | Preservation for future generatio  | ns                |                           |           |                                |          |                         |                         |
| 4       | Provide a description of the organizat   | tion's collectior | ns and exp                | olain h   | low they furthe                | r the or | ganization's ex         | empt purpose in Part    |
| 5       | During the year, did the organization assets to be sold to raise funds rather  |                   |                           |           |                                |          |                         |                         |
| Part    |  | angements.        | Complete                  | if the    | e organization                 |          |                         |                         |
| 1a      | Is the organization an agent, trustee  | , custodian or    | other inte                | rmedia    | ary for contribu               |          |                         |                         |
|         | included on Form 990, Part X?  |                   |                           |           |                                | • •      |                         | · Yes No                |
| b       | If "Yes," explain the arrangement in Pa  | art XIV and com   | plete the                 | follow    | ring table:                    |          |                         | American                |
|         |  |                   |                           |           |                                |          |                         | Amount                  |
| С       | Beginning balance  |                   |                           |           |                                |          | -                       |                         |
| d       | Additions during the year  |                   |                           |           |                                |          |                         |                         |
| e       | Distributions during the year  |                   |                           |           |                                |          |                         |                         |
| f       | Ending balance   |                   |                           |           |                                |          |                         |                         |
| 2a      | Did the organization include an amoun  |                   | , Part X, III             | ne 211    |                                | • •      |                         | . 🗌 Yes 🗌 No            |
|         | If "Yes," explain the arrangement in P   |                   | nization                  |           | ared "Vee" to                  | Form 0   |                         |                         |
| Par     | V Endowment Funds. Compl   | (a) Current year  |                           | Prior yea |                                |          | (d) Three years ba      |                         |
| 4       | Designations of each share a   | (a) Current year  | (0)                       | -nor yea  | ar <b>(C)</b> rwo ye           | ars Dack | (d) Three years ba      | ack (e) Four years back |
| 1a      | Beginning of year balance  |                   |                           |           |                                |          |                         |                         |
| b       | Contributions  |                   |                           |           |                                |          |                         |                         |
| С       | Net investment earnings, gains, and losses                                     |                   |                           |           |                                |          |                         |                         |
| d       | Grants or scholarships   |                   |                           |           |                                |          |                         |                         |
| е       | Other expenditures for facilities and  |                   |                           |           |                                |          |                         |                         |
|         | programs   |                   |                           |           |                                |          |                         |                         |
| f       | Administrative expenses  |                   |                           |           |                                |          |                         |                         |
| g       | End of year balance  |                   |                           |           |                                |          |                         |                         |
| 2       | Provide the estimated percentage of t  |                   |                           | as:       |                                |          |                         |                         |
| а       | Board designated or quasi-endowment  | nt 🕨              | %                         |           |                                |          |                         |                         |
| b       | Permanent endowment  | %                 |                           |           |                                |          |                         |                         |
| С       | Term endowment ►%  |                   |                           |           |                                |          |                         |                         |
| 3a      | Are there endowment funds not in the   | e possession o    | f the orga                | nizatio   | on that are held               | and ac   | ministered for          |                         |
|         | organization by:   |                   |                           |           |                                |          |                         | Yes No                  |
|         | (i) unrelated organizations  |                   |                           |           |                                |          |                         | . 3a(i)                 |
|         | (ii) related organizations   |                   |                           |           |                                |          |                         | . 3a(ii)                |
| b       | If "Yes" to 3a(ii), are the related organ                                      |                   |                           |           |                                |          |                         | . 3b                    |
| 4       | Describe in Part XIV the intended uses   |                   |                           |           |                                |          |                         |                         |
| Part    | VI Land, Buildings, and Equip  | oment. See Fo     | orm 990,                  | Part >    | K, line 10.                    |          |                         |                         |
|         | Description of investment  |                   | or other basis<br>stment) | (b)       | Cost or other basis<br>(other) |          | Accumulated epreciation | (d) Book value          |
| 1a      | Land   |                   |                           |           |                                |          |                         |                         |
| b       | Buildings  |                   |                           |           |                                |          |                         |                         |
| С       | Leasehold improvements   |                   |                           |           |                                |          |                         |                         |
| d       | Equipment  |                   |                           |           | 74,868                         | 3        | 39,120                  | 35,748                  |
| e       | Other  |                   |                           |           | 23,474                         |          | 22,229                  | 1,245                   |
| Total.  | Add lines 1a through 1e. (Column (d) n   | nust equal Forn   | n 990, Par                | t X, cc   | olumn (B), line 1              | 10(c).)  | 🕨                       | 36,993                  |

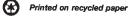
Schedule D (Form 990) 2010

| Schedule D (For   | m 990) 2010                                  |                                     |                        |   | Page <b>3</b>  |
|---|--|-------------------------------------|------------------------|---|----------------|
| Part VII  | Investments-                                 | -Other Securities                   | . See Form 990, Part X | , line 12.  |                |
| (a)   | Description of securit<br>(including name of | y or category                       | (b) Book value         | <b>(c)</b> Method of val<br>Cost or end-of-year n |                |
| (1) Financial   | derivatives .                                |                                     |                        |   |                |
|   | eld equity interes                           |                                     |                        |   |                |
|   |  |                                     |                        |   |                |
| (A)   |  |                                     |                        |   |                |
| (B)   |  |                                     |                        |   |                |
| (C)   |  |                                     |                        |   |                |
| (D)   |  |                                     |                        |   |                |
| (E)   |  |                                     |                        |   |                |
| (F)   |  |                                     |                        |   |                |
| (G)   |  |                                     |                        |   |                |
| (H)   |  |                                     |                        |   |                |
| (I)   |  |                                     |                        |   |                |
| Total. (Column (k   | o) must equal Form 990,                      | Part X, col. (B) line 12.) 🕨        |                        |   |                |
| Part VIII   | Investments-                                 | <ul> <li>Program Related</li> </ul> | I. See Form 990, Part  | X, line 13.                                       |                |
| (   | a) Description of inve                       | stment type                         | (b) Book value         | (c) Method of va                                  |                |
|   |  |                                     |                        | Cost or end-of-year n                             | harket value   |
| (1)   |  |                                     |                        |   |                |
| (2)   |  |                                     |                        |   |                |
| (3)   |  |                                     |                        |   |                |
| (4)   |  |                                     |                        |   |                |
| (5)   |  |                                     |                        |   |                |
| (6)   |  |                                     |                        |   |                |
| (7)   |  |                                     |                        |   |                |
| (8)   |  |                                     |                        |   |                |
| (9)   |  |                                     |                        |   |                |
| (10)<br>Total (Column (k  | must aqual Form 000                          | Dart V cal (D) line 12              |                        |   |                |
| Part IX   |  | Part X, col. (B) line 13.) ►        | ut Vilipo 15           |   |                |
|   | Other Assets                                 | . See Form 990, Pa                  | Description            |   | (b) Book value |
| (1)   |  | (6                                  | Description            |   | (b) Dook value |
| (1)   |  |                                     |                        |   |                |
| (2)   |  |                                     |                        |   |                |
| (3)<br>(4)  |  |                                     |                        |   |                |
|   |  |                                     |                        |   |                |
| (5)   |  |                                     |                        |   |                |
| (6)   |  |                                     |                        |   |                |
| (7)<br>(8)  |  |                                     |                        |   |                |
| (9)   |  |                                     |                        |   |                |
| (10)  |  |                                     |                        |   |                |
| Total. (Colur   | mn (b) must equa                             | l Form 990, Part X, co              | ol. (B) line 15.)      |   |                |
| Part X  |  | es. See Form 990,                   |                        |   |                |
| 1.  | (a) Description of                           |                                     | (b) Amount             |   |                |
| (1) Federal   | income taxes                                 |                                     |                        | -   |                |
| (2)   |  |                                     |                        | -   |                |
| (3)   |  |                                     |                        |   |                |
| (4)   |  |                                     |                        | -   |                |
| (5)   |  |                                     |                        | _   |                |
| (4)           (5)           (6)           (7)           (8)           (9) |  |                                     |                        |   |                |
| (7)   |  |                                     |                        |   |                |
| (8)   |  |                                     |                        |   |                |
| (9)   |  |                                     |                        |   |                |
| (10)  |  |                                     |                        |   |                |
| (11)  |  |                                     |                        |   |                |
|   | ) must equal Form 990,                       | Part X, col. (B) line 25.) 🕨        |                        |   |                |

**2.** FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

| Schedu | le D (Form 990) 2010   |         | Pag                     | <b>,e 4</b> |
|--------|--|---------|-------------------------|-------------|
| Part   | XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Sta                           | ateme   | ents                    |             |
| 1      | Total revenue (Form 990, Part VIII, column (A), line 12)   |         | 1                       |             |
| 2      | Total expenses (Form 990, Part IX, column (A), line 25)  | . 📑     | 2                       |             |
| 3      | Excess or (deficit) for the year. Subtract line 2 from line 1  |         | 3                       |             |
| 4      | Net unrealized gains (losses) on investments   |         | 4                       |             |
| 5      | Donated services and use of facilities   |         | 5                       |             |
| 6      | Investment expenses  |         | 6                       |             |
| 7      | Prior period adjustments   |         | 7                       |             |
| 8      | Other (Describe in Part XIV.)  |         | 8                       |             |
| 9      | Total adjustments (net). Add lines 4 through 8   |         | 9                       |             |
| 10     | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9                   |         | 10                      |             |
| Part   | XII Reconciliation of Revenue per Audited Financial Statements With Revenue                                |         |                         |             |
| 1      | Total revenue, gains, and other support per audited financial statements                                   |         | 1                       |             |
| 2      | Amounts included on line 1 but not on Form 990, Part VIII, line 12:  |         |                         |             |
| а      | Net unrealized gains on investments  |         |                         |             |
| b      | Donated services and use of facilities   | _       |                         |             |
| C      | Recoveries of prior year grants  |         |                         |             |
| d      | Other (Describe in Part XIV.)  |         |                         |             |
| e      | Add lines <b>2a</b> through <b>2d</b>  |         | 2e                      |             |
| 3      | Subtract line <b>2e</b> from line <b>1</b>   |         | 3                       |             |
| 4      | Amounts included on Form 990, Part VIII, line 12, but not on line 1:                                       | · · ·   |                         |             |
| a      | Investment expenses not included on Form 990, Part VIII, line 7b <b>4a</b>                                 |         |                         |             |
| b      | Other (Describe in Part XIV.)  |         |                         |             |
| c      | Add lines <b>4a</b> and <b>4b</b>  |         | 4c                      |             |
| 5      | Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 12.</i> )     |         | 5                       |             |
| Part   |  |         | r Return                |             |
| 1      | Total expenses and losses per audited financial statements   |         | 1                       |             |
| 2      | Amounts included on line 1 but not on Form 990, Part IX, line 25:  |         |                         |             |
| а      | Donated services and use of facilities   |         |                         |             |
| b      | Prior year adjustments   |         |                         |             |
| с      | Other losses   |         |                         |             |
| d      | Other (Describe in Part XIV.)  |         |                         |             |
| е      | Add lines <b>2a</b> through <b>2d</b>  | [       | 2e                      |             |
| 3      | Subtract line <b>2e</b> from line <b>1</b>   | †       | 3                       |             |
| 4      | Amounts included on Form 990, Part IX, line 25, but not on line 1:   |         |                         |             |
| а      | Investment expenses not included on Form 990, Part VIII, line 7b 4a  |         |                         |             |
| b      | Other (Describe in Part XIV.)  |         |                         |             |
| c      | Add lines <b>4a</b> and <b>4b</b>  |         | 4c                      |             |
| 5      | Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 18.</i> )    |         | 5                       |             |
| Part   |  |         |                         |             |
|        | lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an  | d 4: Pa | art IV. lines 1b and 2b |             |
|        | , line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also |         |                         |             |
|        | dditional information.   | · · · P |                         |             |
| -      |  |         |                         |             |
|        |  |         |                         |             |

| Schedule D (Form 990) 2010 Page 5 |                                       |          |  |  |
|-----------------------------------|---------------------------------------|----------|--|--|
| Part XIV                          |                                       |          |  |  |
|                                   | · · · · · · · · · · · · · · · · · · · |          |  |  |
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| SCHE  | DULE  | G       |
|-------|-------|---------|
| (Form | 990 0 | r 990-F |

## Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

| OMB | No. | 1545 | -0047 |
|-----|-----|------|-------|
|     |     |      |       |

Department of the Treasury ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Internal Revenue Service Employer identification number Name of the organization Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 Mail solicitations e Solicitation of non-government grants а Internet and email solicitations Solicitation of government grants b f С Phone solicitations g Special fundraising events d In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees 2a or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? 🗌 Yes 🗌 No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be b compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts from activity (or retained by) fundraiser listed in (ii) Activity custody or control of (or retained by) or entity (fundraiser) contributions? organization col. (i) Yes No 1 2 3 4 5 6 7 8 9 10 0 2,625,609 Total 2,921,935 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from 3 registration or licensing. viduals and businesses dedicated to more efficiently exploring, developing, and producing oil and natural gas using environ-1,288,387

1,421,693 1 117 111

| 1,357,222   |
|---|
| 1,500,242   |
| 1,930,659   |
| 137,325   |
| Western Energy Alliance is an organization of indi- |
| 163,021   |
| 0   |

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

|                        |    | group receipto groater tria                                 | (a) Event #1  | (b) Event #2 | (c) Other events | (d) Total events      |
|------------------------|----|---|---------------|--------------|------------------|-----------------------|
|                        |    |   | awards dinner |              |                  | (add col. (a) through |
|                        |    |   | (event type)  | (event type) | (total number)   | col. (c))             |
| ne                     |    | Ē   |               |              |                  |                       |
| Revenue                | 1  | Gross receipts  | 154,000       |              |                  | 154,000               |
| Be                     | 2  | Less: Charitable  |               |              |                  |                       |
|                        |    | contributions   | 0             |              |                  | 0                     |
|                        | 3  | Gross income (line 1 minus                                  |               |              |                  |                       |
|                        |    | line 2)   | 154,000       |              |                  | 154,000               |
|                        |    |   |               |              |                  |                       |
|                        | 4  | Cash prizes   |               |              |                  |                       |
|                        |    |   |               |              |                  |                       |
|                        | 5  | Noncash prizes  | 1,550         |              |                  | 1,550                 |
| Ś                      |    |   |               |              |                  |                       |
| <b>Direct Expenses</b> | 6  | Rent/facility costs   | 5,700         |              |                  | 5,700                 |
| per                    |    |   |               |              |                  |                       |
| Ĕ                      | 7  | Food and beverages  | 87,856        |              |                  | 87,855                |
| sct                    |    |   |               |              |                  |                       |
| Dire                   | 8  | Entertainment   | 2,000         |              |                  | 2,000                 |
| _                      |    |   |               |              |                  |                       |
|                        | 9  | Other direct expenses .                                     | 60,340        |              |                  | 60.340                |
|                        |    |   |               |              |                  |                       |
|                        | 10 | Direct expense summary. Add                                 |               |              |                  | ( 157,445 )           |
|                        | 11 | Net income summary. Combine line 3, column (d), and line 10 |               |              |                  | (3,445)               |

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

| Revenue  |   |   | (a) Bingo                                      | (b) Pull tabs/instant<br>bingo/progressive bingo | (c) Other gaming                               | (d) Total gaming (add<br>col. (a) through col. (c)) |  |
|--|---|---|--|--|--|---|--|
| Re   | 1   | Gross revenue   |  |  |  |   |  |
| Direct Expenses  | 2   | Cash prizes   |  | -  |  |   |  |
|  | 3   | Noncash prizes  |  |  |  |   |  |
|  | 4   | Rent/facility costs   |  |  |  |   |  |
|  | 5   | Other direct expenses .   |  |  |  |   |  |
|  | 6   | Volunteer labor   | □         Yes         %           □         No | □         Yes         %           □         No   | □         Yes         %           □         No |   |  |
|  | 7   | Direct expense summary. Ac  | ld lines 2 through 5 in c                      | olumn (d)     .     .    .                       |  | ()  |  |
|  | 8   | 3 Net gaming income summary. Combine line 1, column d, and line 7 |  |  |  |   |  |
| -  | <ul> <li>9 Enter the state(s) in which the organization operates gaming activities:</li> <li>a Is the organization licensed to operate gaming activities in each of these states?</li> <li>b If "No," explain:</li> </ul> |   |  |  |  |   |  |
| <ul> <li>10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? .</li> <li>b If "Yes," explain:</li> </ul> |   |   |  | ? . 🗌 Yes 🗌 No                                   |  |   |  |
|  |   |   |  |  |  |   |  |

| Schedu   | ule G (Form 990 or 990-EZ) 2010   |       | Page <b>3</b> |
|----------|---|-------|---------------|
| 11<br>12 | Does the organization operate gaming activities with nonmembers?  | Yes   | No            |
| 13       | Indicate the percentage of gaming activity operated in:   |       | %             |
| a<br>k   | The organization's facility   |       | <u>%</u><br>% |
| b<br>14  | An outside facility   |       | 70            |
| 14       | records:  |       |               |
|          | Name ►  |       |               |
|          | Address ►   |       |               |
| 15a      | Does the organization have a contract with a third party from whom the organization receives gaming revenue?  | ☐ Yes | □ No          |
| b<br>c   |   |       |               |
|          | Name ►  |       |               |
|          | Address ►   |       |               |
| 16       | Gaming manager information:   |       |               |
|          | Name ►  |       |               |
|          | Gaming manager compensation  \$   |       |               |
|          | Description of services provided ►  |       |               |
|          | Director/officer  |       |               |
| 17<br>а  | Mandatory distributions:<br>Is the organization required under state law to make charitable distributions from the gaming proceeds to<br>retain the state gaming license?   | Ves   | 🗌 No          |
| b        | Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year <b>&gt;</b> \$  |       |               |
| Part     | Supplemental Information. Complete this part to provide the explanations required by Part I, I columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also cor part to provide any additional information (see instructions). |       | nis           |
|          |   |       |               |
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|          |   |       |               |

Schedule G (Form 990 or 990-EZ) 2010

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

### 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 990-EZ.

| OMB No. 1545-0047            |
|------------------------------|
| 2010                         |
| Open to Public<br>Inspection |

| Name of the organization   | Employer identification number       |  |  |
|--|--------------------------------------|--|--|
| Western Energy Alliance  | 84 0700841                           |  |  |
| Part VI Section A Line 1a The Board of Directors delegates to the Executive Committee authority to                                       | act on its behalf as the defacto     |  |  |
| management committee. The Executive Committee is composed of the elected officers of the organized                                       | zation and other Board members       |  |  |
| appointed to the Committee by the President.   |                                      |  |  |
| Part VI Section A Line 2 Two Directors, George Solich and Geoff Solich have a family relationship.                                       |                                      |  |  |
| Part VI Section A Line 6 The organization's dues paying members have the right to participate in the organization's governance.          |                                      |  |  |
| Part VI Section A Line 11 and 11A The Board of Directors voted to delegate the review of the Form 990 to the Executive Committee. The    |                                      |  |  |
| Form 990 was reviewed by the Treasurer and made available to all members of the Executive Committee before it was filed.                 |                                      |  |  |
| Part VI Section B Line 12c Decisions that would be affected by conflicts of interest are only undertaken by the Executive Committee, and |                                      |  |  |
| are carefully considered for potential conflicts before action is taken.   |                                      |  |  |
| Part VI Section B Line 15b Four independent Board members including the President, A Vice Presid   | ent, the Treasurer, and a former     |  |  |
| President, comprise the compensation committee. None of these Board members have a conflict of   | of interest as defined in the        |  |  |
| Regulations. The Board members of the Committee evaluated the compensation for all employees   | of the organization. In establishing |  |  |
| the total compensation amounts, they reviewed data for similarly qualified persons in functionally                                       | comparable positions at similarly    |  |  |
| situated trade and other associations. In addition, they considered overall industry employment co                                       | nditions because of their relevance. |  |  |
| All of these factors were considered in the final determination of the compensation amounts and w  | ere contemporaneously                |  |  |

documented and retained.

Part VI Section C Line 19 the organization makes its governing documents, conflict of interest policy, and financial statements available

to the public upon request.

Employer identification number

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Schedule O (Form 990 or 990-EZ) (2010)

Name of the organization

# General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

#### Purpose of Schedule

An organization should use Schedule O (Form 990 or 990-EZ), rather than separate attachments, to provide the IRS with narrative information required for responses to specific questions on Form 990 or 990-EZ, and to explain the organization's operations or responses to various questions. It allows organizations to supplement information reported on Form 990 or 990-EZ.

Do not use Schedule O to supplement responses to questions in other schedules of the Form 990 or 990-EZ. Each of the other schedules includes a separate part for supplemental information.

## Who Must File

All organizations that file Form 990 must file Schedule O (Form 990 or 990-EZ). At a minimum, the schedule must be used to answer Form 990, Part VI, lines 11b and 19. If an organization is not required to file Form 990 or 990-EZ but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

# Specific Instructions

Use as many continuation sheets of Schedule O (Form 990 or 990-EZ) as needed.

Complete the required information on the appropriate line of Form 990 or 990-EZ prior to using Schedule O (Form 990 or 990-EZ).

Identify clearly the specific part and line(s) of Form 990 or 990-EZ to which each response relates. Follow the part and line sequence of Form 990 or 990-EZ.

Late return. If the return is not filed by the due date (including any extension granted), use a separate attachment to provide a statement giving the reasons for not filing on time. Do not use this schedule to provide the late-filing statement.

Amended return. If the organization checked the Amended return box on Form 990, Heading, item B, or Form 990-EZ, Heading, item B, use Schedule O (Form 990 or 990-EZ) to list each part or schedule and line item of the Form 990 or 990-EZ that was amended.

Group return. If the organization answered "Yes" to Form 990, line H(a) but "No" to line H(b), use a separate attachment to list the name, address, and EIN of each affiliated organization included in the group return. Do not use this schedule. See the instructions for Form 990. I. Group Return.

Form 990, Parts III, V, VI, VII, IX, XI, and XII. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions in the Form 990.

1. Part III, Statement of Program Service Accomplishments.

a. "Yes" response to line 2.

b. "Yes" response to line 3.

c. Other program services on line 4d.

Part V, Statements Regarding Other IRS Filings and Tax Compliance.

a. "No" response to line 3b.

b. "Yes" or "No" response to line 13a.

c. "No" response to line 14b.

3. Part VI, Governance, Management, and Disclosure.

a. Material differences in voting rights in line 1a.

b. Delegation of governing board's authority to executive committee.

c. "Yes" responses to lines 2 through 7b.

d. "No" responses to lines 8a, 8b, and 10b.

e. "Yes" response to line 9.

f. Description of process for review of Form 990, if any, in response to line 11b.

g. "Yes" response to line 12c.

h. Description of process for determining compensation on lines 15a and 15b.

i. If applicable, in response to line 18, an explanation as to why the organization did not make any of Forms 1023, 1024, 990, or 990-T publicly available.

j. Description of public disclosure of documents in response to line 19.

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

a. Estimate of average hours per week, if any, devoted to related organizations for which compensation was reported in columns (E) or (F).

b. Description of reasonable efforts undertaken in regard to column (E).

5. Explanation for Part IX, Statement of Functional Expenses, line 24f (all other expenses), if amount in Part IX, line 24f, exceeds 10% of amount in Part IX, line 25 (total functional expenses).

6. Part XI. Reconciliation of Net Assets.

7. Part XII, Financial Statements and Reporting.

a. Change in accounting method or description of other accounting method used on line 1.

b. Change in committee oversight review from prior year on line 2c.

c. "No" response to line 3b.

Form 990-EZ, Parts I, II, III, and V. Use Schedule O (Form 990 or 990-EZ) to provide any narrative information required for the following questions:

1. Part I, Revenue, Expenses, and Changes in Net Assets or Fund Balances.

a. Description of other revenue, in response to line 8.

 List of grants and similar amounts paid, in response to line 10.

c. Description of other expenses, in response to line 16.

d. Explanation of other changes in net assets or fund balances, in response to line 20

2. Part II, Balance Sheets.

a. Description of other assets, in response to line 24.

b. Description of total liabilities, in response to line 26.

3. Description of other program services in response to Part III, Statement of Program Service Accomplishments, line 31.

4. Part V, Other Information.

a. "Yes" response to line 33.

b. "Yes" response to line 34.

c. Explanation of why organization did not report unrelated business gross income of \$1,000 or more to the IRS on Form 990-T, in response to line 35.

Other. Use Schedule O (Form 990 or 990-EZ) to provide narrative explanations and descriptions in response to other specific questions. The narrative provided should refer and relate to a particular line and response on the form.



Do not include on Schedule O (Form 990 or 990-EZ) any social security number(s), because this schedule will be made available for public inspection.

# **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)

Department of the Treasury

g 2009 Open to Public Inspection

OMB No. 1545-0047

| Inte                    | rnal Rever  | nue Service            |                      | The organizat        | lon may have        | to use a copy o         |                       | i to satisfy st  | ale rep  | orting req   |                     | 5.        | inspectio       | <u> </u> |
|-------------------------|-------------|------------------------|----------------------|----------------------|---------------------|-------------------------|-----------------------|------------------|----------|--------------|---------------------|-----------|-----------------|----------|
| Α                       | For th      | ie 2009 ca             | alendar              | year, or tax         | year beginnir       | ng                      | ,                     | 2009, and e      | nding    |              |                     | , 20      |                 |          |
| в                       | Check if a  | applicable:            | Please               | C Name of or         | ganization Ind      | ependent Petr           | oleum As              | sociation o      | f Mou    | ntain Sta    | D Emp               | loyer id  | entification r  | umber    |
|                         |             | change                 | use IRS<br>label or  | Doing Busir          | ness As IPAM        | S                       |                       |                  |          |              | 84                  |           | 070084          | 1        |
| _                       | Name cl     | Ū.                     | print or             | Number and           | street (or P.O. box | if mail is not delivere | d to street add       | ress) Roo        | n/suite  |              | E Tele              | phone n   | umber           |          |
| _                       | Initial ref | •                      | type.<br>See         | 410 17th S           | Street              |                         |                       |                  | 70       | 00           | ( 303               | )         | 623 098         | 7        |
| _                       | Termina     |                        | Specific<br>Instruc- |                      | n, state or count   | try, and ZIP + 4        |                       |                  |          |              | -                   |           |                 |          |
|                         |             |                        | tions.               | Denver C             | O 80202-44          | 28                      |                       |                  |          |              | G Gross             | receipts  | \$              |          |
| _                       | Amende      |                        | F Nan                |                      | s of principal off  |                         | Smith                 |                  |          |              |                     | · · ·     | _               |          |
|                         | Applicatio  | on pending             |                      | as C above           |                     |                         | Jinti                 |                  |          |              |                     |           | iliates? Yes    | No       |
|                         | Tax-ov      | empt status            | ·                    |                      |                     | ] 4947(a)(1) or         | 527                   |                  |          |              |                     |           | led? <b>Yes</b> | No       |
| +                       |             | •                      |                      | 501(c) ( <b>6</b> )◀ |                     | _ 4947(a)(1) 01         |                       |                  |          | 1            |                     |           | see instructio  | ns)      |
| J                       |             | ite: 🕨 ipa             |                      |                      |                     |                         |                       |                  |          | H(c) Group   |                     |           |                 |          |
|                         |             | organization:          |                      | oration 🗌 Trust      | Association         | └ Other ►               |                       | L Year of fo     | mation:  | 1974         | M State             | ot lega   | I domicile: C   | 5        |
| Ρ                       | art I       | Summ                   | ary                  |                      |                     |                         |                       |                  |          |              |                     |           |                 |          |
|                         | 1           | Briefly de             | escribe              | the organiz          | ation's missi       | ion or most sig         | gnificant a           | ctivities:       |          |              |                     |           |                 |          |
| 6                       | _           | <b>IPAMS</b> i         | s an or              | rganization          | of individua        | Is and busine           | sses ded              | cated to pr      | omoti    | ng a pos     | itive bu            | isines    | s climate f     | or       |
| ĕ                       |             | the resp               | onsibl               | e developm           | nent and use        | of natural ga           | s and oil             | n the Interr     | nount    | ain West     |                     |           |                 |          |
| rna                     |             |                        |                      |                      |                     |                         |                       |                  |          |              |                     |           |                 |          |
| Activities & Governance | 2           | Check this             | s box ►              | if the orga          | nization disconti   | inued its operation     | s or dispose          | d of more than   | 25% of   | its net asse | ets.                |           |                 |          |
| Ğ                       | 3           |                        |                      | -                    |                     | rning body (Pa          | -                     |                  |          |              | 3                   |           |                 | 130      |
| ŝ                       | 4           |                        |                      | -                    | -                   | s of the gover          |                       | -                |          |              | . 4                 |           |                 | 129      |
| /itie                   | 5           |                        |                      | -                    | -                   | 2a)                     |                       | -                |          |              | . 5                 |           |                 | 10       |
| cti                     | 6           |                        |                      |                      | estimate if         | -                       |                       |                  |          |              | . 6                 |           |                 | 200      |
| 4                       |             |                        |                      |                      |                     | from Part VIII,         |                       |                  |          |              | · –                 |           |                 | 889      |
|                         |             |                        |                      |                      |                     | from Form 990           |                       |                  |          |              | 76                  |           |                 | 000      |
|                         |             |                        |                      | usiness taxe         |                     |                         | <i>J</i> -1, iiile 0- | •                | · · ·    | Prior Ye     |                     | <b>,</b>  | Current Yea     |          |
|                         |             |                        |                      |                      |                     |                         |                       |                  |          |              |                     | )         | ourient ret     | 0        |
| e                       | 8           |                        |                      |                      |                     | 1h)                     |                       |                  |          |              |                     | -         | 4.00            |          |
| Revenue                 | 9           | -                      |                      |                      |                     | 2g)                     |                       |                  |          | Ζ,           | 059,269             |           |                 | 0,025    |
| Rev                     | 10          |                        |                      | •                    |                     | ), lines 3, 4, ar       | ,                     |                  | ·        |              | 40,719              |           |                 | 8,069    |
| _                       | 11 (        |                        |                      |                      |                     | es 5, 6d, 8c, 9         |                       |                  | ·        |              | 59,38               | _         |                 | 2,754)   |
|                         | 12          | I otal reve            | enue-a               | add lines 8 th       | nrough 11 (mu       | ust equal Part V        | 'III, column          | (A), line 12 )   |          | 2,           | 159,374             |           | 1,88            | 85,340   |
|                         | 13          | Grants a               | nd simi              | ilar amounts         | s paid (Part II     | X, column (A),          | lines 1-3)            |                  |          |              |                     | )         |                 | 0        |
|                         | 14          | Benefits               | paid to              | or for mem           | nbers (Part I)      | K, column (A),          | line 4) .             |                  |          |              | (                   | )         |                 | 0        |
| Expenses                | 15          | Salaries,              | other co             | ompensation          | i, employee be      | enefits (Part IX,       | column (A)            | , lines 5–10)    |          | 1,           | 007,499             | )         | 1,06            | 52,361   |
| Den                     | 16a         | Professio              | onal fun             | draising fee         | s (Part IX, col     | umn (A), line 1         | 1e)                   |                  |          |              | (                   | )         |                 | 0        |
| Ă                       | b.          | Total fund             | draising             | g expenses (I        | Part IX, colum      | nn (D), line 25) 🕨      | •                     |                  |          |              |                     |           |                 |          |
|                         |             |                        | -                    |                      |                     | es 11a-11d, 1           |                       |                  |          |              | 858,664             | 1         | 68              | 85,654   |
|                         |             |                        |                      |                      |                     | equal Part IX,          |                       |                  |          | 1,           | 866,163             | 3         | 1,74            | 8,015    |
|                         | 19          | Revenue                | less ex              | penses. Sub          | tract line 18 f     | from line 12            |                       |                  |          |              | 293,21 <sup>-</sup> | 1         | 13              | 37,325   |
| or                      | s<br>cas    |                        |                      | •                    |                     |                         |                       |                  |          | inning of C  | urrent Yea          | ar        | End of Yea      | r        |
| Assets or               | 20          | Total ass              | sets (Pa             | art X, line 16       | 5)                  |                         |                       |                  |          |              | 659,48              |           | 2,62            | 25,609   |
| Š,                      | 2 21        | Total liab             | vilities (l          | Part X line          | 26)                 |                         |                       |                  |          | 1.           | 459,589             | )         | 1,28            | 8,387    |
| Net A                   | 22          | Net asse               | ets or fu            | und balance          | s. Subtract li      | ine 21 from lin         | e 20.                 |                  |          |              | 199,897             |           |                 | 37,222   |
|                         | art II      |                        | ature                |                      |                     |                         |                       |                  | -        | ,            |                     |           |                 |          |
|                         |             |                        |                      |                      | are that I have ex  | xamined this returr     | n, including a        | ccompanying s    | chedule  | s and stater | nents, an           | d to the  | best of my kr   | owledge  |
|                         |             | and belie              | ef, it is tru        | ue, correct, and     | l complete. Decl    | aration of prepare      | r (other than         | officer) is base | d on all | information  | of which            | prepare   | r has any kno   | wledge.  |
| Si                      | gn          |                        |                      |                      |                     |                         |                       |                  |          |              |                     |           |                 |          |
|                         | ere         | Sign                   | ature of o           | officer              |                     |                         |                       |                  |          | Dat          | e                   |           |                 |          |
|                         |             |                        |                      |                      |                     |                         |                       |                  |          |              |                     |           |                 |          |
|                         |             |                        | e or print           | name and title       |                     |                         |                       |                  |          |              |                     |           |                 |          |
|                         |             | , ,,                   |                      |                      |                     |                         |                       | Date             | Check    | < if         | Preparer            | e identif | /ing number     |          |
|                         |             | Preparer'<br>signature |                      |                      |                     |                         |                       | 2410             | self-    |              | (see instr          |           | ning number     |          |
| Pai                     |             |                        | <b>V</b>             |                      |                     |                         |                       |                  | emplo    | oyed ► 🗌     |                     |           |                 |          |
| Pre                     | parer's     | Firm's na              | me (cr.)             |                      |                     |                         |                       |                  |          |              | L                   |           |                 |          |
|                         | e Only      | if self-em             | nployed),            |                      |                     |                         |                       |                  |          | EIN          |                     |           |                 |          |
|                         |             | address,               | and ZIP              |                      |                     |                         |                       |                  |          | Phone n      | o. 🕨 (              | )         |                 |          |
| M۶                      | av the      | IRS disci              | uss this             | s return with        | the prepare         | er shown above          | e? (see ing           | structions)      |          |              |                     |           | Yes             | No       |

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

Cat. No. 11282Y

Form 990 (2009)

| Form | 990 (2009) Page <b>2</b>  |
|------|---|
| Par  | t III Statement of Program Service Accomplishments  |
| 1    | Briefly describe the organization's mission:<br>IPAMS is an organization of individuals and businesses dedicated to promoting a positive business climate for   |
|      | the responsible development and use of natural gas and oil in the Intermountain West.   |
| 2    | Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  |
| 3    | Did the organization cease conducting, or make significant changes in how it conducts, any program services?  |
| 4    | Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.<br>Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. |
| 4a   | (Code:) (Expenses \$including grants of \$) (Revenue \$)<br>Monitor current industry developments, issues, and legislation. Distribute weekly newsletter (to approximately 1,200)<br>and other frequent communications to keep members and press informed.  |
|      |   |
|      |   |
|      |   |
| 4b   | (Code:) (Expenses \$ including grants of \$) (Revenue \$)<br>Annual meeting - present speakers from industry to inform membership, provide a forum for members to discuss<br>issues, and conduct the Organization's business - attendance of approximately 400  |
|      |   |
|      |   |
|      |   |
| 4c   | (Code:) (Expenses \$including grants of \$) (Revenue \$)         Speakers events and educational meetings - inform and educate membership on on general and technical issues - attendance ranges from 50 - 250 per event - monthly or more frequently   |
|      |   |
|      |   |
|      |   |
|      | Other program services. (Describe in Schedule O.)<br>(Expenses \$ including grants of \$ ) (Revenue \$ )  |
| 4e   | Total program service expenses ►  |

| Par | rt 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   |     | ~                     |
| 2   | Is the organization required to complete Schedule B, Schedule of Contributors?   | 2   |     | ~                     |
| 3   | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>  | 3   | ~   |                       |
| 4   | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II  | 4   |     |                       |
| 5   | Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III  | 5   | ~   |                       |
| 6   | Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>  | 6   |     | ~                     |
| 7   | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>  | 7   |     | ~                     |
| 8   | Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .   | 8   |     | ~                     |
| 9   | Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>   | 9   |     | ~                     |
| 10  | Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.  | 10  |     | ~                     |
| 11  | Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>   | 11  | ~   |                       |
| ٠   | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>  |     |     |                       |
| •   | 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? <i>If "Yes," complete Schedule D, Part VII.</i>  |     |     |                       |
| •   | 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? <i>If "Yes," complete Schedule D, Part VIII.</i>  |     |     |                       |
| •   | 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? <i>If "Yes," complete Schedule D, Part IX.</i>   |     |     |                       |
| •   | Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i><br>Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses<br>the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i> |     |     |                       |
| 12  | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.   | 12  |     | <ul> <li>✓</li> </ul> |
| 12A | Was the organization included in consolidated, independent audited financial statements for the tax year?       Yes       No         If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.       12A       ✓   |     |     |                       |
| 13  | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | 13  |     | <u> </u>              |
|     | Did the organization maintain an office, employees, or agents outside of the United States?  | 14a |     | <ul> <li></li> </ul>  |
|     | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>   | 14b |     | <b>~</b>              |
| 15  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II.</i>  | 15  |     | ~                     |
| 16  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>   | 16  |     | ✓                     |
| 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? <i>If "Yes," complete Schedule G, Part I</i>  | 17  |     | ~                     |
| 18  | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .  | 18  | ~   |                       |
| 19  | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .  | 19  |     | ~                     |
| 20  | Did the organization operate one or more hospitals? If "Yes," complete Schedule H  | 20  |     | ~                     |

Form 990 (2009)

Form **990** (2009)

| Form | 990 (2009)  |            | Р   | age 4 |
|------|---|------------|-----|-------|
| Pa   | rt IV Checklist of Required Schedules (continued)   |            |     |       |
|      |   |            | Yes | No    |
| 21   | Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>  | 21         |     | ~     |
| 22   | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>  | 22         |     | ~     |
| 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         | ~   |       |
| 24a  | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>                                | 24a        |     | ~     |
| b    | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?   | 24b        |     | ~     |
| С    | 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? <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> | 24d<br>25a |     | ~     |
| 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        |     |       |
| 26   | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II  | 26         |     | ~     |
| 27   | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> .   | 20         |     | ~     |
| 28   | 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):   |            |     |       |
| а    | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV   | 28a        |     | ~     |
| b    | A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>   | 28b        |     | ~     |
| С    | An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>   | 28c        | >   |       |
| 29   | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  | 29         |     | ~     |
| 30   | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>   | 30         |     | ~     |
| 31   | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.   | 31         |     | ~     |
| 32   | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>   | 32         |     | ~     |
| 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? <i>If "Yes," complete Schedule R, Part I</i>   | 33         |     | ~     |
| 34   | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1   | 34         |     | ~     |
| 35   | Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2   | 35         |     | ~     |
| 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? <i>If "Yes," complete Schedule R, Part VI</i>  | 37         |     | ~     |
| 38   | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.   |            | ~   |       |
|      |   |            | -   |       |

Form 990 (2009)

Page 4

| Des    | Chatamanta Davading Other IDC Filings and Tay Compliance   |          |     |    |
|--------|--|----------|-----|----|
| Par    | rt V Statements Regarding Other IRS Filings and Tax Compliance   |          | Yes | No |
|        |  |          | res | NO |
| 1a     | Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of<br>U.S. Information Beturns, Enter -0- if not applicable                                      |          |     |    |
| b      | U.S. Information Returns. Enter -0- if not applicable       1a       21         Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1b       0 | -        |     |    |
|        | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable  |          |     |    |
| С      | gaming (gambling) winnings to prize winners?   | 1c       | ~   |    |
| 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 10  |          | V   |    |
| b      | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?   | 2b       | V   |    |
|        | <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)   |          |     |    |
| 3a     | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by  |          |     |    |
|        | this return?   | 3a       |     | ~  |
|        | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O   | 3b       |     |    |
| 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       |     | ~  |
| h      | If "Yes," enter the name of the foreign country: ►   | Ta       |     |    |
| D      | See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank  |          |     |    |
|        | and Financial Accounts.  |          |     |    |
| 5a     | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  | 5a       |     | ~  |
| b      | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?   | 5b       |     | ~  |
| с      | If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding  |          |     |    |
|        | Prohibited Tax Shelter Transaction?  | 5c       |     |    |
| 6a     | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the   | 6a       | ~   |    |
|        | organization solicit any contributions that were not tax deductible?   |          |     |    |
| b      | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?                                    | 6b       | ~   |    |
| 7      | Organizations that may receive deductible contributions under section 170(c).  |          |     |    |
| а      | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods  | _        |     |    |
|        | and services provided to the payor?  | 7a       |     |    |
|        | If "Yes," did the organization notify the donor of the value of the goods or services provided?  | 7b       |     |    |
| С      | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?   | 7c       |     |    |
| d      | If "Yes," indicate the number of Forms 8282 filed during the year  | -        |     |    |
| е      | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal  | 7.       |     |    |
|        | benefit contract?  | 7e<br>7f |     |    |
| f      | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   | 7g       |     |    |
| g<br>h | For all contributions of qualified intellectual property, did the organization file Form 8899 as required?   | 19       |     |    |
| h      | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  | 7h       |     |    |
| 8      | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting  |          |     |    |
|        | organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?      | 8        |     |    |
| 9      | Sponsoring organizations maintaining donor advised funds.  | -        |     |    |
| 9<br>a | Did the organization make any taxable distributions under section 4966?  | 9a       |     |    |
| b      | Did the organization make a distribution to a donor, donor advisor, or related person?   | 9b       |     |    |
| 10     | Section 501(c)(7) organizations. Enter:  |          |     |    |
| а      | 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  |          |     |    |
| 11     | Section 501(c)(12) organizations. Enter:   |          |     |    |
| а      | 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.)   |          |     |    |
|        | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?   | 12a      |     |    |
| b      | If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b  |          |     |    |

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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 in Schedule O. See instructions.

| Sec        | tion A. Governing Body and Management   |           |     |    |
|------------|---|-----------|-----|----|
|            |   |           | Yes | No |
| 1a         | Enter the number of voting members of the governing body  |           |     |    |
| b          | Enter the number of voting members that are independent   |           |     |    |
| 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         | ~   |    |
| 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         |     | ~  |
| 4          | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? | 4         |     | ~  |
| 5          | Did the organization become aware during the year of a material diversion of the organization's assets?               | 5         |     | ~  |
| 6          | Does the organization have members or stockholders?   | 6         | ~   |    |
| 7a         | Does the organization have members, stockholders, or other persons who may elect one or more members                  |           |     |    |
| <i>i</i> a |   | 7a        |     | ~  |
| h          | 5 5 , · · · · · · · · · · · · · · · · ·   | 7b        |     | ~  |
|            | Are any decisions of the governing body subject to approval by members, stockholders, or other persons?               | 10        |     | -  |
| 8          | Did the organization contemporaneously document the meetings held or written actions undertaken during                |           |     |    |
|            | the year by the following:  | 80        | ~   |    |
|            | The governing body?   | <u>8a</u> | ~   |    |
|            | Each committee with authority to act on behalf of the governing body?   | 8b        | •   |    |
| 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 in Schedule O                        | <u>9a</u> |     | ~  |

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

|     |  |     | Yes | No |
|-----|--|-----|-----|----|
| 10a | Does the organization have local chapters, branches, or affiliates?  | 10a |     | ~  |
|     | If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?         | 10b |     |    |
| 11  | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?   | 11  | ~   |    |
| 11A | Describe in Schedule O the process, if any, used by the organization to review this Form 990.  |     |     |    |
| 12a | Does the organization have a written conflict of interest policy? If "No," go to line 13   | 12a | ~   |    |
| b   | Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  | 12b | ~   |    |
| с   | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done   | 12c | ~   |    |
| 13  | Does the organization have a written whistleblower policy?   | 13  | ~   |    |
| 14  | Does the organization have a written document retention and destruction policy?  | 14  | ~   |    |
| 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 | ~   |    |
| b   |  | 15b | ~   |    |
|     | If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)   |     |     |    |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement   |     |     |    |
| ieu | with a taxable entity during the year?   | 16a |     | ~  |
| b   | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken 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 filed ▶ none

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

- $\Box$  Own website  $\Box$  Another's website  $\checkmark$  Upon request
- **19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Sarah S Cornwell 410 17th Street Suite 700 Denver CO 80202

#### 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

**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. Use Schedule J-2 if additional space is needed.

• 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. 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 the organization did not compensate any current officer, director, or trustee.

| (A)                                       | (B)                          |               |                         | (0      | C)             |                     |        | (D)  | (E)  | (F)   |
|---|------------------------------|---------------|-------------------------|---------|----------------|---------------------|--------|--|--|---|
| Name and Title                            | Average<br>hours per<br>week | P or director | n Institutional trustee | Officer | a Key employee | Highest compensated | Pormer | Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | Reportable<br>compensation<br>from related<br>organizations<br>(W-2/1099-MISC) | Estimated<br>amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| George Solich<br>President                | - 1                          | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |
| Chuck Stanley<br>Immediate Past President | 5                            | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |
| James Schroeder<br>First Vice President   | 5                            | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |
| Fred Barrett<br>Second Vice President     | 5                            | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |
| Jerry Barnes<br>Vice President            | 5                            | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |
| Jim Brown<br>Vice President               | 5                            | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |
| Ted Brown<br>Vice President               | 5                            | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |
| Peter Dea<br>Vice President               | 5                            | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |
| Don DeCarlo<br>Vice President             | 5                            | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |
| Rich Frommer<br>Vice President            | 5                            | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |
| Daryll Howard<br>Vice President           | 5                            | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |
| Jim Kleckner<br>Vice President            | 5                            | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |
| Logan Magruder<br>Vice President          | 5                            | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |
| Don McClure<br>Vice President             | 5                            | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |
| Frank Muscara<br>Vice President           | 5                            | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |
| Jay Neese<br>Vice President               | 5                            | ~             |                         | ~       |                |                     |        | 0  | 0  | 0   |

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|------|-----|--------|
|------|-----|--------|

| Part VII Section A. Officers, Directors, Tru              | istees, Key                  | / Emp         | loye                    | ees,    | an             | d Hig                             | hes    | t Compensate   | d Employees (col   | ntinued)  |
|---|------------------------------|---------------|-------------------------|---------|----------------|-----------------------------------|--------|--|--|---|
| (A)   | (B)                          |               |                         | (0      | C)             |                                   |        | (D)  | (E)  | (F)   |
| Name and title  | Average<br>hours per<br>week | P or director | o Institutional trustee | Officer | a Key employee | that Highest compensated employee | Former | Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | Reportable<br>compensation<br>from related<br>organizations<br>(W-2/1099-MISC) | Estimated<br>amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| Gary Packer<br>Vice President                             | .5                           | ~             |                         | ~       |                |                                   |        | 0  | 0  | C   |
| Bobby Plowman<br>Vice President                           | .5                           | ~             |                         | ~       |                |                                   |        | 0  | 0  | C   |
| Tom Sheffield<br>Vice President                           | .5                           | ~             |                         | ~       |                |                                   |        | 0  | 0  | C   |
| Neal Stanley<br>Vice President                            | .5                           | ~             |                         | ~       |                |                                   |        | 0  | 0  | C   |
| Duane Zavadil<br>Vice President                           | .5                           | ~             |                         | ~       |                |                                   |        | 0  | 0  | C   |
| Porter Bennett<br>Vice President Natural Gas Markets      | .5                           | ~             |                         | ~       |                |                                   |        | 0  | 0  | C   |
| John Benton<br>Vice President Crude Oil Markets           | .5                           | ~             |                         | ~       |                |                                   |        | 0  | 0  | C   |
| Tim Hopkins<br>Vice President Government & Public Affairs | .5                           | ~             |                         | ~       |                |                                   |        | 0  | 0  | C   |
| Bill Lancaster<br>Vice President Membership               | .5                           | ~             |                         | ~       |                |                                   |        | 0  | 0  | C   |
| Jeff Lang<br>Vice President Events                        | .5                           | ~             |                         | ~       |                |                                   |        | 0  | 0  | C   |
| Greg Ruben<br>Vice President Natural Gas Transportation   | .5                           | ~             |                         | ~       |                |                                   |        | 0  | 0  | C   |
| Rebecca Watson<br>Secretary                               | .5                           | ~             |                         | ~       |                |                                   |        | 0  | 0  | 0   |
| Phil Doty<br>Treasurer                                    | .5                           | ~             |                         | ~       |                |                                   |        | 0  | 0  | C   |
| 1b Total  | · · · ·                      |               |                         |         |                | · ·                               |        | 691,306  | 0  | 56,671  |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ► four

| 3 | Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual   |
|---|---|
| 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? <i>If "Yes," complete Schedule J for such individual</i> . |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person  |

# Yes No 3 ✓ 4 ✓ 5 ✓

#### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

|    | (A)<br>Name and business address  | (B)<br>Description of services | <b>(C)</b><br>Compensation |
|----|---|--------------------------------|----------------------------|
| En | viron International Corp P.O. Box 8500-1980 Philadelphia PA 19178-1980  | air quality contracting        | 225,785                    |
| PA | C/WEST 8600 SW St., Suite 100 Helens Dr. Wilsonville OR 97070   | wildlife research              | 163,337                    |
|    |   |                                |                            |
|    |   |                                |                            |
|    |   |                                |                            |
| 2  | Total number of independent contractors (including but not limited to those more than \$100,000 in compensation from the organization ► two | listed above) who received     |                            |

| Form 9   |        |   |               |               |   |                                  | Page <b>9</b>   |
|--|--------|---|---------------|---------------|---|----------------------------------|---|
| Par  | t VII  | Statement of Revenue  |               | (A)           | (B)   | (C)                              | (D)   |
|  |        |   |               | Total revenue | Related or<br>exempt<br>function<br>revenue | Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from tax<br>under sections<br>512, 513, or 514 |
| nts<br>nts   | 1a     | Federated campaigns 1a  |               |               |   |                                  |   |
| Contributions, gifts, grants and other similar amounts | b      | Membership dues   |               |               |   |                                  |   |
| fts,<br>ran  |        | Fundraising events  |               |               |   |                                  |   |
| i, gi<br>nilai   | d      | Related organizations 1d  |               |               |   |                                  |   |
| ons  | e      | Government grants (contributions). 1e   |               |               |   |                                  |   |
| buti   | T      | All other contributions, gifts, grants,<br>and similar amounts not included above <b>1f</b> |               |               |   |                                  |   |
| ntri<br>d of   | a      | Noncash contributions included in lines 1a-1f: \$   |               |               |   |                                  |   |
| an Co  | h      | Total. Add lines 1a–1f  | 🕨             |               |   |                                  |   |
| ne   |        |   | Business Code |               |   |                                  |   |
| ven  | 2a     | Dues and sponsorships   | 900099        | 1,791,925     | 1,791,925                                   |                                  |   |
| e Re   | b      | Registration fees   | 900099        | 108,100       | 108,100                                     |                                  |   |
| rvice  | c      |   |               |               |   |                                  |   |
| Sel  | d      |   |               |               |   |                                  |   |
| jran   | e<br>f | All other program service revenue   |               |               |   |                                  |   |
| Program Service Revenue                                | a      | Total. Add lines 2a–2f  |               | 1,900,025     |   |                                  |   |
|  | 3      | Investment income (including dividends  |               | .,,           |   |                                  |   |
|  | 3      | other similar amounts)  |               | 18,069        |   |                                  | 18,069  |
|  | 4      | Income from investment of tax-exempt bond   |               |               |   |                                  |   |
|  | 5      | Royalties   |               |               |   |                                  |   |
|  |        | (i) Real  | (ii) Personal |               |   |                                  |   |
|  | 6a     | Gross Rents   |               |               |   |                                  |   |
|  |        | Less: rental expenses   |               |               |   |                                  |   |
|  |        | Rental income or (loss)   | •             |               |   |                                  |   |
|  |        |   | (ii) Other    |               |   |                                  |   |
|  | 7a     | Gross amount from sales of assets other than inventory                                      |               |               |   |                                  |   |
|  | b      | Less: cost or other basis   |               |               |   |                                  |   |
|  |        | and sales expenses  |               |               |   |                                  |   |
|  |        | Gain or (loss)  |               |               |   |                                  |   |
| Ø  |        | 3   |               |               |   |                                  |   |
| ňu   | ва     | Gross income from fundraising events (not including \$                                      |               |               |   |                                  |   |
| eve  |        | of contributions reported on line 1c).  |               |               |   |                                  |   |
| Ĕ  |        | See Part IV, line 18  | 309,350       |               |   |                                  |   |
| Other Revenue  | b      | Less: direct expenses b   | 342,993       |               |   |                                  |   |
| ō  | С      | Net income or (loss) from fundraising e   | vents 🕨       | (33,643)      | (33,643)                                    |                                  |   |
|  | 9a     | Gross income from gaming activities.  |               |               |   |                                  |   |
|  |        | See Part IV, line 19  |               |               |   |                                  |   |
|  |        | Less: direct expenses <b>b</b>  | ties 🕨        |               |   |                                  |   |
|  |        | Net income or (loss) from gaming activ  |               |               |   |                                  |   |
|  | TUa    | Gross sales of inventory, less returns and allowances a                                     |               |               |   |                                  |   |
|  | h      | Less: cost of goods sold b  |               |               |   |                                  |   |
|  |        | Net income or (loss) from sales of invento  | ory 🕨         |               |   |                                  |   |
|  |        | Miscellaneous Revenue   | Business Code |               |   |                                  |   |
|  | 11a    | Employment advertising  | 900099        | 889           |   | 889                              |   |
|  | b      |   |               |               |   |                                  |   |
|  | c      |   |               |               |   |                                  |   |
|  |        | All other revenue   |               |               |   |                                  |   |
|  | e      | Total. Add lines 11a–11d  | 톳             | 889           | 4.000.000                                   |                                  | 40.000  |
|  | 12     | Total revenue. See instructions.  | 🕨             | 1,885,340     | 1,866,382                                   | 889                              | 18,069  |

Form **990** (2009)

Statement of Functional Expenses

#### Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (B) (A) (C) (D) Do not include amounts reported on lines 6b, Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses 1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in 2 the U.S. See Part IV, line 22 . . . . . Grants and other assistance to governments, 3 organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 4 Benefits paid to or for members . . . . 5 Compensation of current officers, directors, 492,053 trustees, and key employees . . . . . Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . Other salaries and wages . . . . . . 431,598 7 8 Pension plan contributions (include section 401(k) 20,506 and section 403(b) employer contributions) . 64,989 Other employee benefits . . . . . 9 53,215 **10** Payroll taxes . . . . . . . . . . . . **11** Fees for services (non-employees): 35,956 a Management . . . . . . . . . . 5,054 **b** Legal . . . . . . . . . . . . . . . **c** Accounting . . . . . . . . . . . . 75,354 **d** Lobbying . . . . . . . . . . . . e Professional fundraising services. See Part IV, line 17 f Investment management fees . . . . 44,120 13,474 12 Advertising and promotion . . . . 69,737 13 Office expenses 37,557 Information technology . . . . . . . 14 15 Royalties 86,240 Occupancy . . . . . . . . . . . . 16 32.148 17 Travel . . . . . . . . . . . . . Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 226,423 19 Conferences, conventions, and meetings 20 Interest . . . . . . . . . . . . . Payments to affiliates . . . . . . . 21 29,753 22 Depreciation, depletion, and amortization. 6,835 23 Insurance . . . . . . . . . . . . 24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) Dues 6,740 а Training & Publications 14,404 b Miscellaneous 1,859 С d е All other expenses ..... f Total functional expenses. Add lines 1 through 24f 25 1,748,015 Joint costs. Check here ► [] if following SOP 98-2. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

| Part X   | Balance Sheet  |                                 |     |                           |
|--|--|---------------------------------|-----|---------------------------|
|  |  | <b>(A)</b><br>Beginning of year |     | <b>(B)</b><br>End of year |
| 1  | Cash-non-interest-bearing  | 111,850                         | 1   | 51,540                    |
| 2  | Savings and temporary cash investments   | 2,379,436                       | 2   | 2,445,451                 |
| 3  | Pledges and grants receivable, net   |                                 | 3   |                           |
| 4  | Accounts receivable, net   | 37,981                          | 4   | 29,937                    |
| 5  | Receivables from current and former officers, directors, trustees, key   |                                 |     |                           |
|  | employees, and highest compensated employees. Complete Part II of<br>Schedule L  |                                 | 5   |                           |
| 6  | Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete |                                 |     |                           |
|  | Part II of Schedule L  |                                 | 6   |                           |
| 5 St   | Notes and loans receivable, net  |                                 | 7   |                           |
| Assets   | Inventories for sale or use  |                                 | 8   |                           |
| ₹ _9   | Prepaid expenses and deferred charges  | 78,259                          | 9   | 55,228                    |
| 10a  | Land, buildings, and equipment: cost or 10a 106,357  |                                 |     |                           |
|  | other basis. Complete Part VI of Schedule D  |                                 |     |                           |
| b  | Less: accumulated depreciation 10b 62,904  | 45,310                          | 10c | 43,453                    |
| 11   | Investments-publicly traded securities   |                                 | 11  |                           |
| 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   |                                 | 15  |                           |
| 16   | Total assets. Add lines 1 through 15 (must equal line 34)  | 2,659,486                       | 16  | 2,625,609                 |
| 17   | Accounts payable and accrued expenses  | 310,883                         | 17  | 150,835                   |
| 18   | Grants payable   |                                 | 18  |                           |
| 19   | Deferred revenue   | 1,148,706                       | 19  | 1,137,553                 |
| 20   | Tax-exempt bond liabilities  |                                 | 20  |                           |
| <b>%</b> 21  | Escrow or custodial account liability. Complete Part IV of Schedule D  |                                 | 21  |                           |
| 21<br>22<br>22   | Payables to current and former officers, directors, trustees, key<br>employees, highest compensated employees, and disqualified            |                                 |     |                           |
| -  | persons. Complete Part II of Schedule 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. Complete Part X of Schedule D   |                                 | 25  |                           |
| 26   | Total liabilities. Add lines 17 through 25   | 1,459,589                       | 26  | 1,288,388                 |
| lces   | Organizations that follow SFAS 117, check here $\blacktriangleright$ and complete lines 27 through 29, and lines 33 and 34.                |                                 |     |                           |
| 27   | Unrestricted net assets  |                                 | 27  |                           |
| <b>ຫຼັ</b> 28  | Temporarily restricted net assets  |                                 | 28  |                           |
| 29   | Permanently restricted net assets  |                                 | 29  |                           |
| Net Assets or Fund Balances<br>65 82 25<br>75 10<br>82 10<br>82 25<br>83 br>83<br>83<br>83<br>83<br>83<br>83<br>83<br>83<br>83<br>83<br>83<br>83 | Organizations that do not follow SFAS 117, check here $\blacktriangleright$ and complete lines 30 through 34.                              |                                 |     |                           |
| ន្ល 30   | Capital stock or trust principal, or current funds   |                                 | 30  |                           |
| g 31   | Paid-in or capital surplus, or land, building, or equipment fund   |                                 | 31  |                           |
| Ž 32   | Retained earnings, endowment, accumulated income, or other funds   | 1,199,897                       | 32  | 1,337,221                 |
| 5 SS   | Total net assets or fund balances  |                                 | 33  |                           |
| 34   | Total liabilities and net assets/fund balances   | 2,659,486                       | 34  | 2,625,609                 |

Form **990** (2009)

| Form | 990 (2009)   |    | Pa  | ge <b>12</b> |
|------|--|----|-----|--------------|
| Pa   | rt XI Financial Statements and Reporting   |    |     |              |
|      |  |    | Yes | No           |
| 1    | Accounting method used to prepare the Form 990:  Cash  Accrual  Other  |    |     |              |
|      | If the organization changed its method of accounting from a prior year or checked "Other," explain in          |    |     |              |
|      | Schedule O.  |    |     |              |
| 2a   | Were the organization's financial statements compiled or reviewed by an independent accountant?                | 2a |     | ~            |
| b    | Were the organization's financial statements audited by an independent accountant?                             | 2b |     | ~            |
| с    | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of |    |     |              |
|      | the audit, review, or compilation of its financial statements and selection of an independent accountant?      | 2c |     |              |
|      | If the organization changed either its oversight process or selection process during the tax year, explain in  |    |     |              |
|      | Schedule O.  |    |     |              |
| d    | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were    |    |     |              |
|      | issued on a consolidated basis, separate basis, or both:   |    |     |              |
|      | □ Separate basis □ Consolidated basis □ Both consolidated and separate basis                                   |    |     |              |
| 3a   | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in    |    |     |              |
|      | the Single Audit Act and OMB Circular A-133?   | 3a |     | ~            |
| b    | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the   |    |     |              |
|      | required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.       | 3b |     |              |

Form **990** (2009)

| SCHEDULE C<br>(Form 990 or 990-EZ)     |  |  | Political Campaign an                | d Lobbying                           | Activities  |                            | OMB No. 1545-0047   |  |
|--|--|--|--------------------------------------|--------------------------------------|---|----------------------------|---|--|
| Depart                                 | Department of the Treasury<br>Internal Revenue Service       For Organizations Exempt From Income Tax Under section 501(c) and section 527         Complete if the organization is described below.         Attach to Form 990 or Form 990-EZ.         See separate instructions.  |  |                                      |                                      |   |                            | Open to Public<br>Inspection  |  |
| • :<br>• :<br>• :<br>• :<br>• :<br>• : | <ul> <li>the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then</li> <li>Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.</li> <li>Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.</li> <li>Section 527 organizations: Complete Part I-A only.</li> <li>the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then</li> <li>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.</li> <li>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. the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then</li> </ul> |  |                                      |                                      |   |                            |   |  |
|  |  |  | anizations: Complete Part III.       | , ,,                                 |   |                            |   |  |
| Nar                                    | ne of organization   |  |                                      |                                      |   | Employe                    | r identification number   |  |
|  | Independent Petroleum Association of Mountain States84Part I-AComplete if the organization is exempt under section 501(c) or is a section 527 or   |  |                                      |                                      | 0700841   |                            |   |  |
| 1<br>2<br>3                            |  | cription of th   | e organization's direct and indirect | t political campai                   | gn activities in F  |                            | <u>1,000</u>  |  |
| Par                                    | t I-B Com  | plete if the   | e organization is exempt und         | er section 501(                      | c)(3).  |                            |   |  |
| 1<br>2<br>3<br>4a<br>b                 | Enter the amo<br>If the organiza<br>Was a correct<br>If "Yes," descr   | unt of any e<br>tion incurrec<br>ion made?<br>ibe in Part l' |                                      | managers under<br>m 4720 for this ye | section 4955 .<br>ear?  | ► \$<br>· · · ·<br>· · · · | . Yes No<br>· Yes No  |  |
|  |  | -  | e organization is exempt und         |                                      |   |                            | JT(C)(3).   |  |
| 1                                      | Enter the amo activities   |  | expended by the filing organization  |                                      | exempt function   | on<br>⊾\$                  | 0   |  |
| 2                                      |  | unt of the fil   | ing organization's funds contribute  | ed to other organiz                  |   | on<br>\$                   | 0   |  |
| 3                                      | Total exempt line 17b  | function exp   | penditures. Add lines 1 and 2. Er    | ter here and on                      | Form 1120-POI   | ► \$ <u></u>               |   |  |
| 4<br>5                                 |  |  |                                      |                                      |   |                            |   |  |
|  | <b>(a)</b> Name  |  | <b>(b)</b> Address                   | <b>(c)</b> EIN                       | <b>(d)</b> Amount paic<br>filing organizati<br>funds. If none, en | on's                       | (e) Amount of political<br>contributions received and<br>promptly and directly<br>delivered to a separate<br>political organization. If<br>none, enter -0 |  |
|  |  |  |                                      |                                      |   |                            |   |  |
|  |  |  |                                      |                                      |   |                            |   |  |
|  |  |  |                                      |                                      |   |                            |   |  |

| For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ | . Cat. No. 50084S | Schedule C (Form 990 or 990-EZ) 2009 |
|---|-------------------|--------------------------------------|
|---|-------------------|--------------------------------------|

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| Sche                   | edule C (Form 990 or 990-EZ) 2009  |   |                   | Page <b>2</b> |  |  |  |  |  |
|------------------------|--|---|-------------------|---------------|--|--|--|--|--|
| Pa                     | rt II-A Complete if the organizat<br>under section 501(h)).  | ion is exempt under section 501(c)(3) and   | filed Form 5768   | (election     |  |  |  |  |  |
|                        |  | Check ► □ if the filing organization belongs to an affiliated group.<br>Check ► □ if the filing organization checked box A and "limited control" provisions apply.  |                   |               |  |  |  |  |  |
|                        | Limits on Lobbying Expenditures(a) Filing(b) Affiliated(The term "expenditures" means amounts paid or incurred.)organization's totalsgroup totals  |   |                   |               |  |  |  |  |  |
| 1a<br>b<br>c<br>c<br>f | <ul> <li>Total lobbying expenditures to influenc</li> <li>Total lobbying expenditures (add lines</li> <li>Other exempt purpose expenditures</li> <li>Total exempt purpose expenditures (add lines)</li> </ul>                    | e public opinion (grass roots lobbying)<br>e a legislative body (direct lobbying)<br>1a and 1b)   |                   |               |  |  |  |  |  |
|                        | If the amount on line 1e, column (a) or (b) is:<br>Not over \$500,000<br>Over \$500,000 but not over \$1,000,000<br>Over \$1,000,000 but not over \$1,500,000<br>Over \$1,500,000 but not over \$17,000,000<br>Over \$17,000,000 | The lobbying nontaxable amount is:           20% of the amount on line 1e.           \$100,000 plus 15% of the excess over \$500,000.           \$175,000 plus 10% of the excess over \$1,000,000.           \$225,000 plus 5% of the excess over \$1,500,000.           \$1,000,000. |                   |               |  |  |  |  |  |
| g<br>h<br>i<br>j       | Grassroots nontaxable amount (enter 2<br>Subtract line 1g from line 1a. If zero or<br>Subtract line 1f from line 1c. If zero or<br>If there is an amount other than zero on  | 5% of line 1f)  | rm 4720 reporting | □ Yes □ No    |  |  |  |  |  |

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

| Lobbying Expenditures During 4-Year Averaging Period                            |                 |                 |                  |                  |           |  |  |
|---|-----------------|-----------------|------------------|------------------|-----------|--|--|
| Calendar year (or fiscal year beginning in)                                     | <b>(a)</b> 2006 | <b>(b)</b> 2007 | ( <b>c)</b> 2008 | ( <b>d)</b> 2009 | (e) Total |  |  |
| 2a Lobbying nontaxable amount   |                 |                 |                  |                  |           |  |  |
| <ul> <li>b Lobbying ceiling amount<br/>(150% of line 2a, column (e))</li> </ul> |                 |                 |                  |                  |           |  |  |
| <b>c</b> Total lobbying expenditures  |                 |                 |                  |                  |           |  |  |
| d Grassroots nontaxable amount  |                 |                 |                  |                  |           |  |  |
| e Grassroots ceiling amount<br>(150% of line 2d, column (e))                    |                 |                 |                  |                  |           |  |  |
| f Grassroots lobbying expenditures  |                 |                 | 0                |                  |           |  |  |

Schedule C (Form 990 or 990-EZ) 2009

# 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)).

|              |   | (a     | (a) (b) |           |
|--------------|---|--------|---------|-----------|
|              |   | Yes    | No      | Amount    |
| 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: |        |         |           |
| a<br>b<br>c  | Volunteers?   |        |         |           |
| d<br>e<br>f  | Mailings to members, legislators, or the public?  |        |         |           |
| g<br>h       | Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .                                       |        |         |           |
| і<br>ј<br>2а | Other activities? If "Yes," describe in Part IV   |        |         |           |
|              | If "Yes," enter the amount of any tax incurred under section 4912   |        |         |           |
| Par          | t III-A Complete if the organization is exempt under section 501(c)(4), section 50  | )1(c)( | 5), o   | r section |

| _ |  |   |   |
|---|--|---|---|
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? | 3 | ~ |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less?                | 2 | ~ |
|   |  |   |   |

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

| 1  | Dues, assessments and similar amounts from members   | 1  | 1,791,925 |
|----|--|----|-----------|
| 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). |    |           |
|    | expenses for which the section $527(1)$ tax was paid).   |    |           |
| а  |  | 2a | 140,711   |
|    | Carryover from last year   | 2b | 0         |
|    |  | 2c | 140.711   |
| C  | Total  |    |           |
| 3  | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  | 3  | 268,789   |
| 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 political expenditure next year?   | 4  |           |
| _  |  | -  |           |
| 5  | Taxable amount of lobbying and political expenditures (see instructions)   | 5  | 0         |
| Pa | rt IV Supplemental Information   |    |           |

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

Check 07/23/09 to Friends of Gary R. Herbert, UT Governor

## Part IV Supplemental Information (continued)

| <br> |
|------|
|      |
| <br> |
|      |
|      |
|      |
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|      |
|      |
|      |
|      |
| <br> |
|      |

## **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

Department of the Treasury Internal Revenue Service 2009 Open to Public Inspection

OMB No. 1545-0047

Employer identification number

| Pa     | rt I Organizations Maintaining Dor<br>the organization answered "Yes"  | nor Advised Funds or Other Similar<br>' to Form 990, Part IV, line 6.               | Funds or Accounts. Complete if  |
|--------|--|---|---|
|        | 5  | (a) Donor advised funds   | (b) Funds and other accounts  |
| 1      | Total number at end of year  |   |   |
| 2      | Aggregate contributions to (during year)   |   |   |
| 2      | Aggregate grants from (during year)  |   |   |
| 4      | Aggregate value at end of year   |   |   |
|        |  |   | hald in denou advised   |
| 5      | Did the organization inform all donors and funds are the organization's property, subje  |   |   |
| 6      | Did the organization inform all grantees, do<br>used only for charitable purposes and not<br>purpose conferring impermissible private b  | for the benefit of the donor or donor adv   | isor, or for any other  |
| Dai    |  | enefit?   | " to Form 990 Part IV line 7  |
|        |  |   |   |
| 1<br>2 | <ul> <li>Purpose(s) of conservation easements held</li> <li>Preservation of land for public use (e.g.</li> <li>Protection of natural habitat</li> <li>Preservation of open space</li> <li>Complete lines 2a through 2d if the organiz</li> </ul> | , recreation or pleasure)  Preservati Preservati                                    | on of an historically important land area ion of a certified historic structure |
|        | easement on the last day of the tax year.  |   |   |
|        |  |   | Held at the End of the Tax Year   |
| а      | Total number of conservation easements .   |   | 2a  |
| b      | Total acreage restricted by conservation ea  |   |   |
| с      | Number of conservation easements on a c  |   |   |
| d      | Number of conservation easements include   |   |   |
| 3      | Number of conservation easements modified the tax year ►   |   |   |
| 4      | Number of states where property subject t  | o conservation easement is located ►  |   |
| 5      | Does the organization have a written policy violations, and enforcement of the conserv   | regarding the periodic monitoring, inspe  |   |
| 6      | Staff and volunteer hours devoted to monit   | toring, inspecting, and enforcing conserva  | ation easements during the year   |
| 7      | Amount of expenses incurred in monitoring  | , inspecting, and enforcing conservation  | easements during the year   |
| 8      | Does each conservation easement reported $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(i)$ ?   |   |   |
| 9      | In Part XIV, describe how the organization<br>balance sheet, and include, if applicable, the<br>the organization's accounting for conserva   | ne text of the footnote to the organization   |   |
| Pa     | t III Organizations Maintaining Colle  | ections of Art, Historical Treasures, c<br>vered "Yes" to Form 990, Part IV, line 8 |   |
|        | 1 0  | , , ,   |   |
| 1a     | If the organization elected, as permitted un<br>art, historical treasures, or other similar asse<br>provide, in Part XIV, the text of the footnot  | ts held for public exhibition, education, or  | research in furtherance of public service,                                      |
| b      | If the organization elected, as permitted un<br>historical treasures, or other similar assets<br>provide the following amounts relating to the   | held for public exhibition, education, or r<br>nese items:                          | esearch in furtherance of public service,                                       |
|        | (i) Revenues included in Form 990, Part V  | III, line 1   |   |
|        | (ii) Assets included in Form 990, Part X $$ .  |   | Sindependent Petrole  |
| 2      | If the organization received or held works following amounts required to be reported   | under SFAS 116 relating to these items:   |   |
| a<br>b | Revenues included in Form 990, Part VIII, I<br>Assets included in Form 990, Part X   |   |   |

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 52283D Schedule D (Form 990) 2009

| Schee  | dule D (Form 990) 2009   |                      |                    |                   |           |                          | Page <b>2</b>       |
|--------|--|----------------------|--------------------|-------------------|-----------|--------------------------|---------------------|
| Pa     | t III Organizations Maintain   | ing Collections      | of Art, Historie   | cal Treasure      | s, or O   | ther Similar As          | sets (continued)    |
| 3      | Using the organization's acquisition collection items (check all that appl     |                      | other records, cl  | neck any of th    | e follow  | ving that are a sig      | nificant use of its |
| а      | Public exhibition  |                      | d 🗌                | Loan or exch      | ange pi   | rograms                  |                     |
| b      | Scholarly research   |                      | e                  | Other             |           |                          |                     |
| С      | Preservation for future genera   |                      |                    |                   |           |                          |                     |
| 4      | Provide a description of the organiz Part XIV.                                 | zation's collection  | s and explain he   | ow they furthe    | r the or  | ganization's exer        | npt purpose in      |
| 5      | During the year, did the organization assets to be sold to raise funds rathe   | r than to be maint   | ained as part of   | he organizatio    | n's colle | ection?                  | Yes No              |
| Pa     | rt IV Escrow and Custodial A<br>IV, line 9, or reported an                     |                      |                    |                   | answer    | ed "Yes" to For          | m 990, Part         |
| 1a     | Is the organization an agent, truste   | e, custodian or of   | her intermediar    | / for contribut   | ions or   | other assets not         |                     |
|        | included on Form 990, Part X?  |                      |                    |                   |           |                          | 🗌 Yes 🔛 No          |
| b      | If "Yes," explain the arrangement in   | Part XIV and cor     | nplete the follov  | ving table:       |           | A                        | <b>. 1</b>          |
|        |  |                      |                    |                   | 4-        | Arr                      | iount               |
|        |  |                      |                    |                   |           |                          |                     |
| d      | Additions during the year  |                      |                    |                   |           |                          |                     |
| е      | Distributions during the year  |                      |                    |                   |           |                          |                     |
| f      | Ending balance   |                      |                    |                   |           |                          |                     |
|        | Did the organization include an am If "Yes," explain the arrangement in        |                      | ), Part X, line 21 | ?                 |           |                          | 🗌 Yes 🔛 No          |
|        | rt V Endowment Funds. Co   |                      | ganization ans     | wered "Yes"       | to For    | m 990 Part IV            | line 10             |
| T GI   |  | (a) Current year     | (b) Prior year     | (c) Two year      |           | (d) Three years back     | (e) Four years back |
| 12     | Beginning of year balance  |                      |                    |                   |           |                          |                     |
| b      | Contributions  |                      |                    |                   |           |                          |                     |
|        | Net investment earnings, gains,  |                      |                    |                   |           |                          |                     |
| U      | and losses   |                      |                    |                   |           |                          |                     |
| d      | Grants or scholarships   |                      |                    |                   |           |                          |                     |
|        | Other expenditures for facilities  |                      |                    |                   |           |                          |                     |
|        | and programs   |                      |                    |                   |           |                          |                     |
| f      | Administrative expenses  |                      |                    |                   |           |                          |                     |
| g      | End of year balance  |                      |                    |                   |           |                          |                     |
| 2      | Provide the estimated percentage of  | of the year end ba   | lance held as:     |                   |           |                          |                     |
| а      | Board designated or quasi-endown   | nent 🕨               | %                  |                   |           |                          |                     |
| b      | Permanent endowment ►  | %                    |                    |                   |           |                          |                     |
| С      | Term endowment ►%  | 6                    |                    |                   |           |                          |                     |
| 3a     | Are there endowment funds not in th  | ne possession of the | ne organization t  | hat are held a    | nd admi   | inistered for the        |                     |
|        | organization by:   |                      |                    |                   |           |                          | Yes No              |
|        |  |                      |                    |                   |           |                          | 3a(i)               |
|        |  |                      |                    |                   |           |                          | 3a(ii)              |
| р<br>4 | If "Yes" to 3a(ii), are the related org<br>Describe in Part XIV the intended u |                      |                    |                   |           |                          | 3b                  |
|        | t VI Investments—Land, Bu  |                      |                    |                   | Part X I  | ine 10                   |                     |
| I ai   | Description of investment  | (a) Cost or o        |                    | Cost or other     |           |                          |                     |
|        | Description of investment  | (investro            |                    | asis (other)      |           | ccumulated<br>preciation | (d) Book value      |
| 1a     | Land   |                      |                    |                   |           |                          |                     |
| b      | Buildings  |                      |                    |                   |           |                          |                     |
| С      | Leasehold improvements   |                      |                    |                   |           |                          |                     |
| d      | Equipment  |                      |                    | 47,841            |           |                          | <u>19,037</u>       |
|        | Other  |                      |                    | 58,516            |           |                          |                     |
| iota   | I. Add lines 1a through 1e. (Column (d)  | must equal Form 9    | 90, Part X, colun  | nn (B), line 10(c | ).)       | 🕨 📔                      |                     |

Schedule D (Form 990) 2009

| Schedule D (For    | m 990) 2009  |                         |                          |  | Page 3                |
|--------------------|--|-------------------------|--------------------------|--|-----------------------|
| Part VII           | Investments-C  | Other Securities        | . See Form 990, Part X,  | line 12.   |                       |
|                    | escription of security or c<br>(including name of securi |                         | (b) Book value           | <b>(c)</b> Method of valua<br>Cost or end-of-year ma |                       |
| Financial de       | rivatives  |                         |                          |  |                       |
|                    | equity interests .                                       |                         |                          |  |                       |
|                    |  |                         |                          |  |                       |
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|                    |  |                         |                          |  |                       |
|                    |  |                         |                          |  |                       |
| Total (Column (b)  | must equal Form 990, Part                                | X col (B) line 12)      |                          |  |                       |
| Part VIII          |  |                         | J. See Form 990, Part X, | line 13  |                       |
|                    |  |                         |                          |  | - 41                  |
| (a)                | Description of investmen                                 | it type                 | (b) Book value           | (c) Method of valu<br>Cost or end-of-year ma         | ation:<br>arket value |
|                    |  |                         |                          | -  |                       |
|                    |  |                         |                          |  |                       |
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|                    |  |                         |                          |  |                       |
| Total. (Column (b) | must equal Form 990, Part                                |                         |                          |  |                       |
| Part IX            | Other Assets. S  | ee Form 990, Par        | t X, line 15.            |  |                       |
|                    |  |                         | (a) Description          |  | (b) Book value        |
|                    |  |                         |                          |  |                       |
|                    |  |                         |                          |  |                       |
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|                    |  |                         |                          |  |                       |
|                    |  |                         |                          |  |                       |
| Total (Colum       | nn (b) must equal Fori                                   | m 990 Part X col (      | B) line 15.)             |  |                       |
| Part X             |  | . See Form 990,         |                          |  |                       |
| 1.                 | (a) Description of lia                                   |                         | (b) Amount               |  |                       |
| Federal inco       | ., .   | ,                       |                          | -  |                       |
|                    |  |                         |                          | -  |                       |
|                    |  |                         |                          |  |                       |
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|                    |  |                         |                          |  |                       |
| Total. (Column (b  | ) must equal Form 990, Part                              | X, col. (B) line 25.) 🕨 |                          |  |                       |

**2.** FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

| Scheo  | dule D (Form 990) 2009   | Page 4                 |
|--------|--|------------------------|
| Par    | t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial S   | tatements              |
| 1      | Total revenue (Form 990, Part VIII, column (A), line 12)   | 1                      |
| 2      | Total expenses (Form 990, Part IX, column (A), line 25)  | 2                      |
| 3      | Excess or (deficit) for the year. Subtract line 2 from line 1  | 3                      |
| 4      | Net unrealized gains (losses) on investments   | 4                      |
| 5      | Donated services and use of facilities   | 5                      |
| 6      | Investment expenses  | 6                      |
| 7      | Prior period adjustments   | 7                      |
| 8      | Other (Describe in Part XIV.)  | 8                      |
| 9      | Total adjustments (net). Add lines 4 through 8   | 9                      |
| 10     | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9                                 | 10                     |
| Par    | t XII Reconciliation of Revenue per Audited Financial Statements With Revenue  |                        |
| 1      | Total revenue, gains, and other support per audited financial statements   | 1                      |
| 2      | Amounts included on line 1 but not on Form 990, Part VIII, line 12:  |                        |
| а      | Net unrealized gains on investments  | _                      |
| b      | Donated services and use of facilities   | _                      |
| С      | Recoveries of prior year grants  | _                      |
| d      | Other (Describe in Part XIV.)  |                        |
| е      | Add lines 2a through 2d  | 2e                     |
| 3      | Subtract line <b>2e</b> from line <b>1</b>   | 3                      |
| 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 XIV.)  |                        |
| c      | Add lines <b>4a</b> and <b>4b</b>  |                        |
| 5      | Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 12.</i> )                   |                        |
| Par    | t XIII Reconciliation of Expenses per Audited Financial Statements With Expense  | ses per Return         |
| 1      | Total expenses and losses per audited financial statements   | 1                      |
| 2      | Amounts included on line 1 but not on Form 990, Part IX, line 25:  |                        |
| а      | Donated services and use of facilities   2a  | -                      |
| b      |  | -                      |
| С      |  | -                      |
| d      |  | 2e                     |
| е      | Add lines 2a through 2d  | 3                      |
| 3      | Subtract line <b>2e</b> from line <b>1</b>   | 3                      |
| 4      | Amounts included on Form 990, Part IX, line 25, but not on line 1:   |                        |
|        | Investment expenses not included on Form 990, Part VIII, line 7b       4a         Other (Describe in Part XIV.)       4b | -                      |
|        |  | 4c                     |
| с<br>5 | Add lines <b>4a</b> and <b>4b</b>  | 5                      |
|        | t XIV Supplemental Information   |                        |
|        | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar               | ad 4: Part IV lines 1b |
|        | 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d an               |                        |
|        | part to provide any additional information.  |                        |
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| Schedule D (Form 990) 2009           Part XIV         Supplemental Information (continued) | Page 5 |
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| SCHEDULE G |  |
|------------|--|
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Department of the Treasury

Name of the organization

Internal Revenue Service

Part I

С

d

| (Form | 990 | or | 990- | EZ) |
|-------|-----|----|------|-----|
|-------|-----|----|------|-----|

# **Supplemental Information Regarding Fundraising or Gaming Activities**

| ONB NO. | 1545-0047 |
|---------|-----------|
|         |           |

12

Inspection

Ч

To Public

No

293,211

137,325 0

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. ► See separate instructions.

| Emplover | identification | numbe |
|----------|----------------|-------|

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. е

Mail solicitations а Internet and email solicitations b

Phone solicitations

In-person solicitations

Solicitation of non-government grants

f Solicitation of government grants

Special fundraising events g

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

| (i) Name of individual or entity (fundraiser)                                   | (ii) Activity      | custody o  | draiser have<br>r control of<br>outions? | (iv) Gross receipts<br>from activity | (v) Amount paid to<br>(or retained by)<br>fundraiser listed in<br>col. (i) | (vi) Amount paid to<br>(or retained by)<br>organization |
|---|--------------------|------------|--|--------------------------------------|--|---|
|   |                    | Yes        | No                                       |                                      |  |   |
| Independent Petroleum Associatio  | 410 17th Stree     |            |  | 700                                  | Denver CO 8020   | 84  |
| 0700841   | 303                |            |  | 623 0987                             | Marc W Smith   | ipams.org   |
|   | 1974               |            |  |                                      |  | 10  |
|   | 0                  |            |  | the responsible                      |  | 200   |
| CO  |                    |            |  | 1,007,499                            | 129  | IPAMS   |
| 889   |                    |            |  | 130                                  |  |   |
|   |                    |            |  |                                      | 0  | 0   |
| 2,059,269   | 1,900,025          |            |  | 40,719                               | 18,069   | 2,159,374   |
| 1,885,340   | 0                  |            |  | 0                                    | 1,062,361  | 0   |
| 0   |                    |            |  | 858,664                              | 685,654  | 1,866,163   |
| Total   |                    |            | ►  | 0                                    | 2,659,486  | 2,625,609   |
| 3 List all states in which the organ registration or licensing. same as C above | nization is regist | ered or li | censed to                                | solicit funds or I                   | nas been notified it   | is exempt from  |
| IPAMS is an organization of individ   | uals and busine    | esses dec  | licated to                               | promoting a pos                      | itive business clim  | ate for   |
|   |                    |            |  |                                      |  | 1,459,589   |
|   |                    |            |  |                                      |  | 1,288,387   |
|   |                    |            |  |                                      |  | 1,199,897   |
|   |                    |            |  |                                      |  | 1,337,222<br>1,748,015                                  |

Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

|                 |   |  | <b>(a)</b> Event #1                               | (b) Event #2                                     | (c) Other events    | (d) Total events<br>(add col. (a) through           |
|-----------------|---|--|---|--|---------------------|---|
| 2               |   |  | (event type)                                      | (event type)                                     | (total number)      | col. <b>(c)</b> )                                   |
|                 | 1   | Gross receipts   | 150,850   | 158,500  |                     |   |
| -               | 2   | Less: Charitable   |   |  | 0                   |   |
|                 | 3   | contributions  |   |  |                     |   |
|                 |   | minus line 2)  | 150,850   | 158,500  |                     | 309,350   |
|                 | 4   | Cash prizes  |   |  |                     |   |
|                 | 5   | Noncash prizes   | 1,550   | 19,668   |                     | 21,218  |
| 202             | 6   | Rent/facility costs  | 33,220  | 26,109   |                     | 59,329  |
|                 | 7   | Food and beverages   | 73,520  | 106,698  |                     | 180,218   |
| חוובתו באמנוספס | 8   | Entertainment  | 1,700   |  |                     | 1,700   |
| נ               | 9   | Other direct expenses  | 34,761  | 45,767   |                     | 80,528  |
|                 | 0   | Direct expense summary. Ad   | d lines 4 through 9 in co                         | olumn (d)  |                     | ( 342,993   |
|                 | lí<br>t li                                  | Net income summary. Comb<br>Gaming. Complete if t  | ine line 3, column (d), a<br>be organization ansy | nd line 10                                       | 990 Part IV line 19 | or reported more                                    |
|                 |   | than \$15,000 on Form  | 990-EZ, line 6a.                                  |  | ,,,,,               |   |
| 、 I             |   |  |   |  |                     |   |
|                 |   |  | <b>(a)</b> Bingo                                  | (b) Pull tabs/instant<br>bingo/progressive bingo | (c) Other gaming    | (d) Total gaming (add<br>col. (a) through col. (c)) |
|                 | 1   | Gross revenue  | (a) Bingo   |  | (c) Other gaming    |   |
|                 | 1   | Gross revenue  | (a) Bingo   |  | (c) Other gaming    |   |
|                 |   |  | (a) Bingo<br>19,037                               |  | (c) Other gaming    |   |
|                 | 2<br>3                                      | Cash prizes  |   |  | (c) Other gaming    |   |
|                 | 2<br>3                                      | Cash prizes  | 19,037  |  |                     |   |
|                 | 2<br>3<br>4                                 | Cash prizes<br>Noncash prizes<br>Rent/facility costs   |   |  | (c) Other gaming    |   |
|                 | 2<br>3<br>4<br>5                            | Cash prizes<br>Noncash prizes<br>Rent/facility costs<br>Other direct expenses .  | 19,037<br>□ Yes%<br>□ No                          | bingo/progressive bingo                          | □ Yes%<br>□ No      |   |
|                 | 2<br>3<br>4<br>5                            | Cash prizes<br>Noncash prizes<br>Rent/facility costs<br>Other direct expenses .<br>Volunteer labor                               | 19,037  | bingo/progressive bingo                          | □ Yes%<br>□ No      |   |
|                 | 2<br>3<br>4<br>5<br>6<br>7<br>8<br>En<br>Is | Cash prizes<br>Noncash prizes<br>Rent/facility costs<br>Other direct expenses .<br>Volunteer labor<br>Direct expense summary. Ac | 19,037  | bingo/progressive bingo                          | Yes% No             | (<br>Yes No   |

11 Does the organization operate gaming activities with nonmembers?
 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

11

12

|                    |  |     | Yes | No |
|--------------------|--|-----|-----|----|
| 13<br>a<br>b<br>14 | Indicate the percentage of gaming activity operated in:       13a       %         The organization's facility  |     |     |    |
|                    | Address ►  |     |     |    |
| 15a                | Does the organization have a contract with a third party from whom the organization receives gaming revenue?   | 15a |     |    |
| b                  | If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the   |     |     |    |
|                    | amount of gaming revenue retained by the third party ► \$  |     |     |    |
| С                  | If "Yes," enter name and address of the third party:   |     |     |    |
|                    | Name ►   |     |     |    |
|                    | Address ►  |     |     |    |
| 16                 | Gaming manager information:  |     |     |    |
|                    | Name ►   |     |     |    |
|                    | Gaming manager compensation  |     |     |    |
|                    | Description of services provided   |     |     |    |
|                    | Director/officer Employee Independent contractor   |     |     |    |
| 17                 | Mandatory distributions:   |     |     |    |
| а                  | Is the organization required under state law to make charitable distributions from the gaming proceeds to  |     |     |    |
|                    | retain the state gaming license?   | 17a |     |    |
| b                  | Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ |     |     |    |

Schedule G (Form 990 or 990-EZ) 2009

# **Continuation Sheet for Form 990**

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

► See the Instructions for Form 990.

2009 Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the Organization

| Part I Continuation of Officers, D<br>Employees                          | irectors, Tru             | stee          | s, I                     | Key | Er | nplo                              | yee            | s, and Highe   | est Compensa   | ted   |
|--|---------------------------|---------------|--------------------------|-----|----|-----------------------------------|----------------|--|--|---|
| (A)  | (B)                       |               |                          | (0  | C) |                                   |                | (D)  | (E)  | (F)   |
| Name and title   | Average hours<br>per week | P or director | io Institutional trustee |     |    | that Highest compensated employee | ply)<br>Former | Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | Reportable<br>compensation<br>from related<br>organizations<br>(W-2/1099-MISC) | Estimated<br>amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| Independent Petroleum Association of Mc<br>Colorado State Vice President | 410 17th Stre             |               |                          |     |    | d                                 |                | 700  | Denver CO 8(   | 8   |
| 0700841  |                           |               |                          |     |    |                                   |                |  |  |   |
| Montana State Vice President   | 303                       |               |                          |     |    |                                   |                | 623 0987   | Marc W Smith   | ipams.org   |
| Nebraska State Vice President  | 1974                      |               |                          |     |    |                                   |                |  | the responsibl   |   |
| New Mexico State Vice President  |                           | ~             |                          |     |    |                                   |                |  |  |   |
| 130<br>North and South Dakota State Vice Presid                          | 129                       | ~             |                          |     |    |                                   |                |  | 10   | 200   |
| 0regon and Washington State Vice Presic                                  | 0                         | ~             |                          |     |    |                                   |                | IPAMS  | same as C abc  |   |
| IPAMS is an organization of individuals a                                |                           |               |                          |     |    |                                   |                |  | 0.050.000  | 4 000 000   |
| Utah State Vice President  | 0                         | ~             |                          |     |    |                                   |                | 0  | 2,059,269  | 1,900,02  |
| 40,719<br>Wyoming State Vice President                                   | 18,069                    | ~             |                          |     |    |                                   |                | 2,159,374  | 1,885,340  | (   |
| 0<br>Banking & Finance Committee Chair<br>0                              | 0                         | ~             |                          |     |    |                                   |                | 1,007,499  | 1,062,361  | (   |
| Legislative, Legal, & Regulatory Chair                                   |                           | ~             |                          |     |    |                                   |                | 858,664  | 685,654  | 1,866,163   |
| Air Quality Subcommittee Chair<br>1,199,897                              | 2,659,486                 | ~             |                          |     |    |                                   |                | 2,625,609  | 1,459,589  | 1,288,387   |
| NGV Subcommittee Chair   | 1,337,222                 | ~             |                          |     |    |                                   |                | 1,748,015  | 293,211  | CC  |
| Tax Subcommittee Chair   | 137,325                   | ~             |                          |     |    |                                   |                |  |  |   |
| Tax Subcommittee Chair   | 59,386                    | ~             |                          |     |    |                                   |                | (32,754)   | 6  |   |
| Wildlife Subcommittee Chair  |                           | ~             |                          |     |    |                                   |                |  |  |   |
| Kimberly Mazza<br>Communications Committee Chair                         | .5                        | ~             |                          |     |    |                                   |                | 0  |  | (   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                | 0  | 0  | (   |
| Terry Dobkins  |                           |               |                          |     |    |                                   |                |  |  |   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                | 0  | 0  | (   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                |  | 0  | (   |
| Tom Hendrick   |                           |               |                          |     |    |                                   |                |  |  |   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                | 0  | 0  |   |
| At-Large<br>For Privacy Act and Paperwork Reduction Act N                |                           | ~             |                          |     |    |                                   |                |  | 0  | C   |

# **Continuation Sheet for Form 990**

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

► See the Instructions for Form 990.

2009 Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the Organization

| Part I Continuation of Officers, D<br>Employees                          | irectors, Tru             | stee          | s, I                     | Key | Er | nplo                              | yee            | s, and Highe   | est Compensa   | ted   |
|--|---------------------------|---------------|--------------------------|-----|----|-----------------------------------|----------------|--|--|---|
| (A)  | (B)                       |               |                          | (0  | C) |                                   |                | (D)  | (E)  | (F)   |
| Name and title   | Average hours<br>per week | P or director | io Institutional trustee |     |    | that Highest compensated employee | ply)<br>Former | Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | Reportable<br>compensation<br>from related<br>organizations<br>(W-2/1099-MISC) | Estimated<br>amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| Independent Petroleum Association of Mc<br>Colorado State Vice President | 410 17th Stre             |               |                          |     |    | d                                 |                | 700  | Denver CO 8(   | 8   |
| 0700841  |                           |               |                          |     |    |                                   |                |  |  |   |
| Montana State Vice President   | 303                       |               |                          |     |    |                                   |                | 623 0987   | Marc W Smith   | ipams.org   |
| Nebraska State Vice President  | 1974                      |               |                          |     |    |                                   |                |  | the responsibl   |   |
| New Mexico State Vice President  |                           | ~             |                          |     |    |                                   |                |  |  |   |
| 130<br>North and South Dakota State Vice Presid                          | 129                       | ~             |                          |     |    |                                   |                |  | 10   | 200   |
| 0regon and Washington State Vice Presic                                  | 0                         | ~             |                          |     |    |                                   |                | IPAMS  | same as C abc  |   |
| IPAMS is an organization of individuals a                                |                           |               |                          |     |    |                                   |                |  | 0.050.000  | 4 000 000   |
| Utah State Vice President  | 0                         | ~             |                          |     |    |                                   |                | 0  | 2,059,269  | 1,900,02  |
| 40,719<br>Wyoming State Vice President                                   | 18,069                    | ~             |                          |     |    |                                   |                | 2,159,374  | 1,885,340  | (   |
| 0<br>Banking & Finance Committee Chair<br>0                              | 0                         | ~             |                          |     |    |                                   |                | 1,007,499  | 1,062,361  | (   |
| Legislative, Legal, & Regulatory Chair                                   |                           | ~             |                          |     |    |                                   |                | 858,664  | 685,654  | 1,866,163   |
| Air Quality Subcommittee Chair<br>1,199,897                              | 2,659,486                 | ~             |                          |     |    |                                   |                | 2,625,609  | 1,459,589  | 1,288,387   |
| NGV Subcommittee Chair   | 1,337,222                 | ~             |                          |     |    |                                   |                | 1,748,015  | 293,211  | CC  |
| Tax Subcommittee Chair   | 137,325                   | ~             |                          |     |    |                                   |                |  |  |   |
| Tax Subcommittee Chair   | 59,386                    | ~             |                          |     |    |                                   |                | (32,754)   | 6  |   |
| Wildlife Subcommittee Chair  |                           | ~             |                          |     |    |                                   |                |  |  |   |
| Kimberly Mazza<br>Communications Committee Chair                         | .5                        | ~             |                          |     |    |                                   |                | 0  |  | (   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                | 0  | 0  | (   |
| Terry Dobkins  |                           |               |                          |     |    |                                   |                |  |  |   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                | 0  | 0  | (   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                |  | 0  | (   |
| Tom Hendrick   |                           |               |                          |     |    |                                   |                |  |  |   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                | 0  | 0  |   |
| At-Large<br>For Privacy Act and Paperwork Reduction Act N                |                           | ~             |                          |     |    |                                   |                |  | 0  | C   |

# **Continuation Sheet for Form 990**

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

► See the Instructions for Form 990.

2009 Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the Organization

| Part I Continuation of Officers, D<br>Employees                          | irectors, Tru             | stee          | s, I                     | Key | Er | nplo                              | yee            | s, and Highe   | est Compensa   | ted   |
|--|---------------------------|---------------|--------------------------|-----|----|-----------------------------------|----------------|--|--|---|
| (A)  | (B)                       |               |                          | (0  | C) |                                   |                | (D)  | (E)  | (F)   |
| Name and title   | Average hours<br>per week | P or director | io Institutional trustee |     |    | that Highest compensated employee | ply)<br>Former | Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | Reportable<br>compensation<br>from related<br>organizations<br>(W-2/1099-MISC) | Estimated<br>amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| Independent Petroleum Association of Mc<br>Colorado State Vice President | 410 17th Stre             |               |                          |     |    | d                                 |                | 700  | Denver CO 8(   | 8   |
| 0700841  |                           |               |                          |     |    |                                   |                |  |  |   |
| Montana State Vice President   | 303                       |               |                          |     |    |                                   |                | 623 0987   | Marc W Smith   | ipams.org   |
| Nebraska State Vice President  | 1974                      |               |                          |     |    |                                   |                |  | the responsibl   |   |
| New Mexico State Vice President  |                           | ~             |                          |     |    |                                   |                |  |  |   |
| 130<br>North and South Dakota State Vice Presid                          | 129                       | ~             |                          |     |    |                                   |                |  | 10   | 200   |
| 0regon and Washington State Vice Presic                                  | 0                         | ~             |                          |     |    |                                   |                | IPAMS  | same as C abc  |   |
| IPAMS is an organization of individuals a                                |                           |               |                          |     |    |                                   |                |  | 0.050.000  | 4 000 000   |
| Utah State Vice President  | 0                         | ~             |                          |     |    |                                   |                | 0  | 2,059,269  | 1,900,02  |
| 40,719<br>Wyoming State Vice President                                   | 18,069                    | ~             |                          |     |    |                                   |                | 2,159,374  | 1,885,340  | (   |
| 0<br>Banking & Finance Committee Chair<br>0                              | 0                         | ~             |                          |     |    |                                   |                | 1,007,499  | 1,062,361  | (   |
| Legislative, Legal, & Regulatory Chair                                   |                           | ~             |                          |     |    |                                   |                | 858,664  | 685,654  | 1,866,163   |
| Air Quality Subcommittee Chair<br>1,199,897                              | 2,659,486                 | ~             |                          |     |    |                                   |                | 2,625,609  | 1,459,589  | 1,288,387   |
| NGV Subcommittee Chair   | 1,337,222                 | ~             |                          |     |    |                                   |                | 1,748,015  | 293,211  | CC  |
| Tax Subcommittee Chair   | 137,325                   | ~             |                          |     |    |                                   |                |  |  |   |
| Tax Subcommittee Chair   | 59,386                    | ~             |                          |     |    |                                   |                | (32,754)   | 6  |   |
| Wildlife Subcommittee Chair  |                           | ~             |                          |     |    |                                   |                |  |  |   |
| Kimberly Mazza<br>Communications Committee Chair                         | .5                        | ~             |                          |     |    |                                   |                | 0  |  | (   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                | 0  | 0  | (   |
| Terry Dobkins  |                           |               |                          |     |    |                                   |                |  |  |   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                | 0  | 0  | (   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                |  | 0  | (   |
| Tom Hendrick   |                           |               |                          |     |    |                                   |                |  |  |   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                | 0  | 0  |   |
| At-Large<br>For Privacy Act and Paperwork Reduction Act N                |                           | ~             |                          |     |    |                                   |                |  | 0  | C   |

# **Continuation Sheet for Form 990**

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

► See the Instructions for Form 990.

2009 Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the Organization

| Part I Continuation of Officers, D<br>Employees                          | irectors, Tru             | stee          | s, I                     | Key | Er | nplo                              | yee            | s, and Highe   | est Compensa   | ted   |
|--|---------------------------|---------------|--------------------------|-----|----|-----------------------------------|----------------|--|--|---|
| (A)  | (B)                       |               |                          | (0  | C) |                                   |                | (D)  | (E)  | (F)   |
| Name and title   | Average hours<br>per week | P or director | io Institutional trustee |     |    | that Highest compensated employee | ply)<br>Former | Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | Reportable<br>compensation<br>from related<br>organizations<br>(W-2/1099-MISC) | Estimated<br>amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| Independent Petroleum Association of Mc<br>Colorado State Vice President | 410 17th Stre             |               |                          |     |    | d                                 |                | 700  | Denver CO 8(   | 8   |
| 0700841  |                           |               |                          |     |    |                                   |                |  |  |   |
| Montana State Vice President   | 303                       |               |                          |     |    |                                   |                | 623 0987   | Marc W Smith   | ipams.org   |
| Nebraska State Vice President  | 1974                      |               |                          |     |    |                                   |                |  | the responsibl   |   |
| New Mexico State Vice President  |                           | ~             |                          |     |    |                                   |                |  |  |   |
| 130<br>North and South Dakota State Vice Presid                          | 129                       | ~             |                          |     |    |                                   |                |  | 10   | 200   |
| 0regon and Washington State Vice Presic                                  | 0                         | ~             |                          |     |    |                                   |                | IPAMS  | same as C abc  |   |
| IPAMS is an organization of individuals a                                |                           |               |                          |     |    |                                   |                |  | 0.050.000  | 4 000 000   |
| Utah State Vice President  | 0                         | ~             |                          |     |    |                                   |                | 0  | 2,059,269  | 1,900,02  |
| 40,719<br>Wyoming State Vice President                                   | 18,069                    | ~             |                          |     |    |                                   |                | 2,159,374  | 1,885,340  | (   |
| 0<br>Banking & Finance Committee Chair<br>0                              | 0                         | ~             |                          |     |    |                                   |                | 1,007,499  | 1,062,361  | (   |
| Legislative, Legal, & Regulatory Chair                                   |                           | ~             |                          |     |    |                                   |                | 858,664  | 685,654  | 1,866,163   |
| Air Quality Subcommittee Chair<br>1,199,897                              | 2,659,486                 | ~             |                          |     |    |                                   |                | 2,625,609  | 1,459,589  | 1,288,387   |
| NGV Subcommittee Chair   | 1,337,222                 | ~             |                          |     |    |                                   |                | 1,748,015  | 293,211  | CC  |
| Tax Subcommittee Chair   | 137,325                   | ~             |                          |     |    |                                   |                |  |  |   |
| Tax Subcommittee Chair   | 59,386                    | ~             |                          |     |    |                                   |                | (32,754)   | 6  |   |
| Wildlife Subcommittee Chair  |                           | ~             |                          |     |    |                                   |                |  |  |   |
| Kimberly Mazza<br>Communications Committee Chair                         | .5                        | ~             |                          |     |    |                                   |                | 0  |  | (   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                | 0  | 0  | (   |
| Terry Dobkins  |                           |               |                          |     |    |                                   |                |  |  |   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                | 0  | 0  | (   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                |  | 0  | (   |
| Tom Hendrick   |                           |               |                          |     |    |                                   |                |  |  |   |
| At-Large   | .25                       | ~             |                          |     |    |                                   |                | 0  | 0  |   |
| At-Large<br>For Privacy Act and Paperwork Reduction Act N                |                           | ~             |                          |     |    |                                   |                |  | 0  | C   |

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Department of the Treasury Internal Revenue Service N

| Name of the                               | organization  |         |                                 |                             |                              |                  |                                 | Employe             | er ident | ificatio     | n num                                     | ber               |                  |
|---|---|---------|---------------------------------|-----------------------------|------------------------------|------------------|---------------------------------|---------------------|----------|--------------|---|-------------------|------------------|
| Part I                                    | Excess Benefit Transactions (<br>Complete if the organization answe |         |                                 |                             |                              |                  |                                 |                     | Part V,  | , line 4     | 0b.                                       |                   |                  |
| 1   | (a) Name of disqualified person                                     |         |                                 |                             | (b) [                        | Description of   | transactio                      | n                   |          |              |   | (c) Corr          | rected?          |
|   |   |         |                                 |                             | (6)                          | Description of   |                                 |                     |          |              |   |                   | No               |
| Independ                                  | ent Petroleum Association of Me                                     | ountain | States                          |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
|   | 700   |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
|   |   |         | 889                             |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
|   |   |         | 003                             |                             |                              | 10               | 74                              |                     |          |              |   |                   |                  |
| 410 17th 9                                | Street  |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
| unde                                      | the amount of tax imposed on the section 4958                       |         |                                 |                             |                              |                  |                                 |                     |          | ► \$<br>► \$ |   |                   | 0                |
| Part II                                   | Loans to and/or From Interes  |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
|   | Complete if the organization an                                     |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
| (a) Name of interested person and purpose |   |         | to or from<br>anization?        | <b>(c)</b> Ori<br>principal |                              | <b>(d)</b> Balan | ce due                          | due (e) In default? |          |              | (f) Approved<br>by board or<br>committee? |                   | /ritten<br>ment? |
|   |   | То      | From                            |                             |                              |                  |                                 | Yes                 | No       | Yes          | No  | Yes               | No               |
|   | 303   |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
| Denver C                                  | O 80202-4428  |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
|   |   |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
|   | 0   |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
|   | 2,159,374   |         |                                 |                             |                              | Marc V           | N Smit                          | _                   |          |              |   |                   |                  |
|   |   |         |                                 | 1                           | ,900,025                     |                  | 12                              | )                   |          |              |   |                   |                  |
| Total .                                   |   |         |                                 |                             | . ► \$                       |                  |                                 |                     |          |              |   |                   |                  |
| Part III                                  | Grants or Assistance Benefiting<br>Complete if the organization and | -       |                                 |                             | 0 Part I                     | / line 27        |                                 |                     |          |              |   |                   |                  |
|   |   |         |                                 |                             |                              |                  |                                 | (-) (               |          | 4            |   |                   |                  |
|   | (a) Name of interested person                                       | (D) RE  | elationship                     | between inte<br>organizat   |                              | son and the      | (c) Amount and type of assistan |                     |          |              |   |                   |                  |
|   |   |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
|   |   |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
|   | 2,059,269   |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
|   | 0   |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
|   | 1,007,499   |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
| Daub IV/                                  |   |         |                                 |                             |                              | 40,719           |                                 |                     |          |              |   |                   |                  |
| Part IV                                   | Business Transactions Involvi<br>Complete if the organization an    | -       |                                 |                             |                              | / line 00e       | 006                             | . 000               |          |              |   |                   |                  |
|   | lame of interested person   |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
| (a) N                                     |   |         | p between<br>on and the<br>tion |                             | nount of<br>saction          | (d) [            | Descriptio                      | on of tra           | ansactio | on           | (e) Sha<br>organiz<br>reven<br>Yes        | zation's<br>nues? |                  |
| Dest D                                    |   |         |                                 |                             | Natural gas consulting proje |                  |                                 |                     |          |              | No  |                   |                  |
| Porter Be                                 |   | Board   | l memb                          | er                          |                              | 42,766           | Natura                          | u gas o             | onsu     | uting        | proje                                     |                   | ~                |
| ipams.org                                 | 200   |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
| IPAMS                                     | 200   |         |                                 |                             |                              |                  | the res                         | nonei               | hle de   | velo         | omer                                      |                   |                  |
|   | 1,885,340   | same    | as C al                         | oove                        | IPAMS                        | is an orga       |                                 |                     |          |              | 0   |                   |                  |
|   | .,,   |         |                                 |                             |                              |                  |                                 |                     |          |              |   |                   |                  |
| For Drivoov                               | Act and Paperwork Reduction Act                                     | Notico  | soo tha                         |                             | Cat No.                      | 500564           |                                 | Sahaa               | lula I ( | Earm 0       | 00  | 000 E7            | z) 2000          |

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

Cat. No. 50056A

Schedule L (Form 990 or 990-EZ) 2009

OMB No. 1545-0047

2009

Open To Public Inspection

| SCHE  | DULE | 0 |
|-------|------|---|
| (Form | 990) |   |

# **Supplemental Information to Form 990**

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

|                | Open to Public<br>Inspection |
|----------------|------------------------------|
| Employer ident | ification number             |

0700841

OMB No. 1545-0047

009

0700841

Part VI Section A Line 1a The Board of Directors delegates to the Executive Committee authority to act on its behalf as

84

Part VI Section B Line 12c Decisions that would be affected by conflicts of interest are only undertaken by the Executive

Committee, and are carefully considered for potential conflicts before action is taken.

Part VI Section B Line 15b Four independent Board members including the President, A Vice President, the Treasurer,

and a former President, comprise the compensation committee. None of these Board members have a conflict of

Independent Petroleum Association of Mountain States

employeesof the organization. In establishing the total compensation amounts, they reviewed data for similarly qualified

persons in functionally comparable positions at similarly situated trade and other associations. In addition, they

considered overall industry employment conditions because of their relevance. All of these factors were considered

the final determination of the compensation amounts and were contemporaneously documented and retained.

Part VI Section C Line 19 the organization makes its governing documents, conflict of interest policy, and financial

statements available to the public upon request.

1,000

| Schedule O (Form 990) 2009   | Page 2                            |
|--|-----------------------------------|
| Name of the organization   | Employer identification number    |
|  | IPAMS the responsible developm    |
|  |                                   |
|  |                                   |
|  |                                   |
|  |                                   |
|  |                                   |
|  |                                   |
|  |                                   |
|  |                                   |
|  |                                   |
|  |                                   |
| Monitor current industry developments, issues, and legislation. Distribute weekly ne | wsletter (to approximately 1,200) |
| and other frequent communications to keep members and proce informed                 |                                   |
| and other frequent communications to keep members and press informed.                |                                   |
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|  |                                   |
| Annual meeting - present speakers from industry to inform membership, provide a fo   | rum for members to discuss        |
|  |                                   |
| issues, and conduct the Organization's business - attendance of approximately 400    |                                   |
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# **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

## **Purpose of Schedule**

An organization should use Schedule O (Form 990), rather than separate attachments, to provide the IRS with narrative information required for responses to specific questions on Form 990, and to explain the organization's operations or responses to various questions. It allows organizations to supplement information reported on Form 990.

## Who Must File

All organizations that file Form 990 must file Schedule O (Form 990). At a minimum, the schedule must be used to answer Form 990, Part VI, lines 11A and 19. If an organization is not required to file Form 990 but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

# Specific Instructions

Use as many continuation sheets of Schedule O (Form 990) as needed.

Complete the required information on the appropriate line of Form 990 or its schedules prior to using Schedule O (Form 990).

Identify clearly the specific part and line(s) of Form 990 or its schedule(s) to which each response relates. Follow the part and line sequence of Form 990 or the part and line sequence of its schedule(s).

Late return. If the return is not filed by the due date (including any extension granted), use a separate attachment to provide a statement giving the reasons for not filing on time. Do not use this schedule to provide the late-filing statement.

Amended return. If the organization checked the Amended return box on Form 990, line B, use Schedule O (Form 990) to list each part or schedule and line item of the Form 990 that was amended.

Group return. If the organization answered "Yes" to Form 990, line H(a) but "No" to line H(b), use a separate attachment to list the name, address, and EIN of each affiliated organization included in the group return. Do not use this schedule. See the instructions for Form 990. I. Group Return.

Parts III, V, VI, VII, and XI. Use Schedule O (Form 990) to provide any narrative information required for the following questions.

1. Part III, Statement of Program Service Accomplishments.

a. "Yes" response to line 2.

b. "Yes" response to line 3.

c. Other program services on line 4d.

2. "No" response to Part V,

Statements Regarding Other IRS Filings and Tax Compliance, line 3b.

3. Part VI, Governance, Management, and Disclosure.

a. Material differences in voting rights in line 1a.

b. "Yes" responses to lines 2 through 7b.

c. "No" responses to lines 8a, 8b, and 10b.

d. "Yes" response to line 9.

e. Description of process for review of Form 990, if any, in response to line 11A.

f. "Yes" response to line 12c.

q. Description of process for determining compensation on lines 15a and 15b.

h. If applicable, in response to line 18, an explanation as to why the organization did not make any of Forms 1023, 1024, 990, or 990-T publicly available.

i. Description of public disclosure of documents in response to line 19.

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

a. Estimate of average hours per week, if any, devoted to related organizations for which compensation was reported in columns (E) or (F).

b. Description of reasonable efforts undertaken in regard to column (E).

5. Part XI, Financial Statements and Reportina.

a. Change in accounting method or description of other accounting method used on line 1.

b. Change in committee oversight review from prior year on line 2c.

c. "No" response to line 3b.

Schedule E (Form 990 or 990-EZ). If applicable, use Schedule O (Form 990) to explain a "Yes" response to lines 6a or 6b or a "No" response to line 7. If additional space is needed, use Schedule O (Form 990) to explain a "No" response to line 3, 4a, 4b, 4c, or 4d, and a "Yes" response to line 5a, 5b, 5c, 5d, 5e, 5f, 5g, or 5h.

Schedule G (Form 990 or 990-EZ). If applicable, use Schedule O (Form 990) to describe the custody or control arrangement and payments of fundraising expenses or reimbursements as required in Part 1, line 2b, columns (iii) and (v), respectively.

Schedule K (Form 990). If applicable, use Schedule O (Form 990) to describe the organization's use of alternative 12-month reporting periods with respect to bond issues reported on Schedule K (Form 990).

Schedule L (Form 990 or 990-EZ). Use Schedule O (Form 990) if additional space is needed to report information required by Schedule L (Form 990 or 990-EZ).

Schedule R (Form 990). If applicable, use Schedule O (Form 990) to provide the group exemption relationships described on Schedule R (Form 990), and to describe the method used to determine the amount(s) reported on Schedule R (Form 990), Part V, line 2. Other. Use Schedule O (Form 990) to provide narrative explanations and descriptions in response to other specific questions. The narrative provided should refer and relate to a particular line and response on the form.



Do not include on Schedule O (Form 990) any social security CAUTION number(s), because this schedule will be made available for public inspection.

| Form | 990 |
|------|-----|
|------|-----|

Department of the Treasury

# 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)

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

2008 Open to Public Inspection

OMB No. 1545-0047

| Inte                    | rnal Reve    | nue Service              |   | The organiza    | ation may h             | have to u     | se a cop       | y of this retu                            | m to satis  | sfy state | report  | ing requ     | uirement              | s. I <b>ns</b>            | pectio                | n      |  |  |
|-------------------------|--------------|--------------------------|---|-----------------|-------------------------|---------------|----------------|---|-------------|-----------|---------|--------------|-----------------------|---------------------------|-----------------------|--------|--|--|
| A                       | For th       | ne 2008 ca               | alendar   | r year, or tax  |                         | <u> </u>      |                |   | , 2008, a   |           |         |              |                       | , 20                      |                       |        |  |  |
| в                       | Check if     | applicable:              | Please  |                 | organization            | Indepe        | ndent P        | etroleum A                                | ssociati    | on of N   | lount   | ain Sta      | D Emp                 | loyer identi              | lication r            | umber  |  |  |
|                         |              | s change                 | use IRS<br>label or   |                 | siness As 👖             | PAMS          |                |   |             |           |         |              | 84                    |                           | 07 <mark>0</mark> 084 | 1      |  |  |
|                         | Name c       | •                        | print or  |                 | d street (or P.0        | O. box if mai | il is not deli | vered to street ac                        | dress)      | Room/s    | uite    |              | E Telep               | phone numb                | er                    |        |  |  |
|                         | Initial re   | •                        | type.<br>See  | 410 17th        | Street                  |               |                |   |             |           | 700     |              | ( 303                 | ) 6                       | 23 098                | 7      |  |  |
| _                       | Termina      |                          | Specific<br>Instruc-  |                 | wn, state or            | country, a    | nd ZIP + 4     | 1   |             |           |         |              |                       |                           |                       |        |  |  |
|                         |              | ed return                | tions.  | Denver (        | CO 8020                 | 2-4428        |                |   |             |           |         |              | G Gross               | receipts \$               | 2.05                  | 59,269 |  |  |
| _                       |              | on pending               | F Nai   | me and addres   | ss of princip           | cal officer:  | Marc V         | V Smith                                   |             |           | н       | (a) le thie  | a aroun ret           | urn for affiliates        |                       |        |  |  |
|                         | ripplication | on penaing               |   | as C abov       |                         |               |                |   |             |           |         |              |                       | s included?               |                       | _      |  |  |
| ī                       | Tax-ex       | empt status              |   | 501(c) ( 6 )    |                         | ) 494         | 47(a)(1) or    | 527                                       |             |           |         |              |                       | a list. (see              |                       |        |  |  |
| J                       |              | ite: 🕨 ipa               |   |                 |                         |               |                |   |             |           | н       |              | roup exemption number |                           |                       |        |  |  |
| ĸ                       |              |                          |   | oration  Trust  | t 🗌 Associa             | ation 🗌 Ot    | ther 🕨         |   | L Year      | of forma  |         | 1974         |                       | of legal dor              | nicile: C             | 0      |  |  |
| Р                       | art I        | -                        |   |                 |                         |               | -              |   |             |           |         |              |                       | <b>J</b>                  |                       |        |  |  |
| Activities & Governance | 1            | Briefly de               | s an o  | rganizatior     | n <mark>of indiv</mark> | viduals a     | and busi       | significant<br>inesses dec<br>gas and oil | licated t   | o pron    |         |              |                       | siness c                  | imate f               | ior    |  |  |
| ove                     | 2            | Check this               | box ►   | if the org      | ganization c            | discontinu    | ed its ope     | erations or dis                           | posed of I  | more tha  | n 25%   | of its as    | ssets.                |                           |                       |        |  |  |
| ڻ<br>مح                 | 3            |                          |   | -               | -                       |               |                | (Part VI, line                            |             |           |         |              | - I -                 |                           |                       | 127    |  |  |
| se                      | 4            |                          |   | -               | -                       | •             | • •            | erning bod                                | ,           |           |         |              |                       |                           |                       | 127    |  |  |
| viti                    | 5            |                          |   | of employee     | -                       |               | -              |   |             |           | -       |              |                       |                           |                       | 15     |  |  |
| Act                     | 6            |                          |   |                 | •                       | · /           |                |   |             |           |         |              |                       |                           |                       | 200    |  |  |
|                         |              |                          |   |                 |                         |               |                | 'III, line 12, o                          |             |           |         |              |                       | 1                         |                       | 915    |  |  |
|                         | b            | Net unrel                | ated b  | ousiness tax    | kable inco              | ome from      | n Form 🤅       | 990-T, line 3                             | 34          |           |         |              | . 7b                  | )                         |                       | 0      |  |  |
|                         |              |                          |   |                 |                         |               |                |   |             |           |         | Prior Ye     | ear                   | Cu                        | rrent Yea             | ar     |  |  |
| ø                       | 8            | Contribut                | tions a   | and grants (    | Part VIII,              | line 1h)      |                |   |             |           |         |              |                       |                           |                       |        |  |  |
| nue                     | 9            | Program                  | servic  | e revenue (     | Part VIII,              | line 2g)      |                |   |             |           |         | 1,           | 662,836               | 5                         | 2,05                  | 59,269 |  |  |
| Revenue                 | 10           | Investme                 | nt inco   | ome (Part V     | /III, colum             | ın (A), lin   | 1es 3, 4,      | and 7d) .                                 |             |           |         |              | 64,083                | 3                         | 4                     | 10,719 |  |  |
| œ                       | 11           | Other rev                | enue (  | (Part VIII, c   | olumn (A)               | ), lines 5    | , 6d, 8c       | , 9c, 10c, a                              | nd 11e)     |           |         |              | 42,337                | 7                         | 5                     | 59,386 |  |  |
|                         | 12           | Total reve               | enue—a  | add lines 8 t   | through 1               | 1 (must e     | equal Par      | rt VIII, colum                            | n (A), line | 912)      |         | 1,           | 769,256               | 5                         | 2,15                  | 59,374 |  |  |
|                         | 13           | Grants ar                | nd sim  | nilar amount    | ts paid (P              | art IX, c     | olumn (/       | A), lines 1–3                             | )           |           |         |              | 0                     | )                         |                       | 0      |  |  |
|                         | 14           | Benefits                 | paid to   | o or for me     | mbers (Pa               | art IX, co    | olumn (A       | A), line 4) .                             |             |           |         |              | 0                     |                           |                       | 0      |  |  |
| Expenses                | 15           | Salaries, o              | ries, other compensation, employee benefits (Part IX, column (A), lines 5-10) |                 |                         |               |                |   |             |           |         |              | 013,217               | 7                         | 1,007,499             |        |  |  |
| Den                     | 16a          | Professio                | onal fur  | ndraising fee   | es (Part IX             |               |                |   | )           |           | 0       |              |                       |                           |                       |        |  |  |
| Ě                       | b            | Total fund               | draising  | g expenses      | (Part IX, c             | olumn (D      | D), line 25    | 5) ▶                                      |             |           |         |              |                       |                           |                       |        |  |  |
|                         | 17           | Other exp                | penses  | s (Part IX, c   | olumn (A                | .), lines 1   | 11a-11d        | , 11f–24f) .                              |             |           |         |              | 649,228               |                           | 85                    | 58,664 |  |  |
|                         | 18           | Total exp                | enses   | . Add lines     | 13–17 (m                | nust equ      | al Part I      | X, column (                               | A), line 2  | 25)       |         | 1,           | 662,445               | 5                         | 1,86                  | 6,163  |  |  |
|                         |              | Revenue                  | less ex   | kpenses. Su     | btract line             | + 18 from     | ı line 12      |   | ·           |           |         |              | 106,811               |                           | 29                    | 3,211  |  |  |
| Net Assets or           | lces         |                          |   |                 |                         |               |                |   |             |           | Beg     | ginning o    | of Year               | En                        | d of Yea              | .r     |  |  |
| sset                    | 20           | Total ass                | ets (Pa   | art X, line 1   | 6)                      |               |                |   |             |           |         | 1,           | 899,688               | 3                         | 2,65                  | 59,486 |  |  |
| Å,                      | 21 g         |                          |   | (Part X, line   |                         |               |                |   |             |           |         |              | 993,002               |                           | 1,45                  | 59,589 |  |  |
|                         |              |                          |   |                 | es. Subtra              | act line 2    | 21 from        | line 20                                   |             |           |         |              | 906,686               | 5                         | 1,19                  | 99,897 |  |  |
| Ρ                       | art II       |                          |   | Block           |                         | <u> </u>      |                |   |             |           |         |              |                       |                           |                       |        |  |  |
|                         |              |                          |   |                 |                         |               |                | turn, including a arer (other thar        |             |           |         |              |                       |                           |                       |        |  |  |
| <u>.</u>                |              |                          |   |                 |                         |               |                |   |             |           |         | 1            |                       |                           | -                     | -      |  |  |
|                         | gn           |                          | -+  | - 40            |                         |               |                |   |             |           |         |              |                       |                           |                       |        |  |  |
| He                      | ere          | Signature of officer Dat |   |                 |                         |               |                |   |             |           |         |              | e                     |                           |                       |        |  |  |
|                         |              |                          | or print  | t name and titl |                         |               |                |   |             |           |         |              |                       |                           |                       |        |  |  |
|                         |              | ,                        |   | r name and titl | e                       |               |                |   | Date        |           | heck if |              | Dror 1                | o identificire :          |                       |        |  |  |
|                         |              | Preparer's self-         |   |                 |                         |               |                |   |             |           |         |              | (see instr            | s identifying<br>uctions) | umper                 |        |  |  |
| Pai                     | id           |                          | <b>r</b>  |                 |                         |               |                |   |             | e         | mploye  | a ▶ 🗆        |                       |                           |                       |        |  |  |
| Pre                     | eparer's     | Firm's na                | me (or v  | VOURS N         |                         |               |                |   |             |           | 1       | <b>E</b> 111 | L                     | 1                         |                       |        |  |  |
| Us                      | e Only       | if self-em               | ployed),  |                 |                         |               |                |   |             |           |         | EIN          | ►<br>- ► /            |                           |                       |        |  |  |
| N.A.                    |              | address,                 |   |                 |                         |               |                | aug) (aca !::                             | otu oti -   | 20)       |         | Phone n      | 0. 🕨 (                | )                         |                       |        |  |  |
| IVI                     | ay ine       | INO DISCL                | iss this  | s return Wit    | .n me pre               | parer sn      | iown ab        | ove? (see ir                              | ISTUCTIO    | us).      |         |              |                       | · 🗆                       | Yes                   | No     |  |  |

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

Cat. No. 11282Y

Form 990 (2008)

| Form | 990 (2008) Page <b>2</b>  |
|------|---|
| Par  | t III Statement of Program Service Accomplishments (see instructions)   |
| 1    | Briefly describe the organization's mission:  |
|      | IPAMS is an organization of individuals and businesses dedicated to promoting a positive business climate for               |
|      | the responsible development and use of natural gas and oil in the Intermountain West.                                       |
|      |   |
|      |   |
| 2    | Did the organization undertake any significant program services during the year which were not listed on                    |
|      | the prior Form 990 or 990-EZ?   |
|      | 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?   |
|      | If "Yes," describe these changes on Schedule O.   |
| 4    | Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.         |
|      | Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and |
|      | allocations to others, the total expenses, and revenue, if any, for each program service reported.                          |
|      |   |
| 4a   | (Code:) (Expenses \$ including grants of \$) (Revenue \$)   |
|      | Monitor current industry developments, issues, and legislation. Distribute weekly newsletter (to approximately 1,200)       |
|      | and other frequent communications to keep members and press informed.   |
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| 4b   | (Code:) (Expenses \$ including grants of \$) (Revenue \$)   |
|      | Annual meeting - present speakers from industry to inform membership, provide a forum for members to discuss                |
|      | issues, and conduct the Organization's business - attendance of approximately 400   |
|      |   |
|      |   |
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|      |   |
| 40   | (Code:) (Expenses \$ including grants of \$) (Revenue \$)   |
| 10   | Speakers events and educational meetings - inform and educate membership on on general and technical issues -               |
|      | attendance reanges from 50 - 250 per event - monthly or more frequently   |
|      |   |
|      |   |
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|      |   |
|      |   |
|      |   |
| 4d   | Other program services. (Describe in Schedule O.)   |
| τu   | (Expenses \$ including grants of \$ ) (Revenue \$ )   |
| 4e   | Total program service expenses ► \$ (Must equal Part IX, Line 25, column (B).)  |
|      |   |

|          |  |            | 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          |     | ~  |
| 2        | Is the organization required to complete Schedule B, Schedule of Contributors?   | 2          |     | ~  |
| 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          |     | ~  |
| 4        | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II  | 4          |     |    |
| 5        | Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III  | 5          | ~   |    |
| 6        | Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>                   | 6          |     | ~  |
| 7        | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>                                      | 7          |     | ~  |
| 8        | Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .   | 8          |     | ~  |
| 9        | Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> | 9          |     | ~  |
| 10       | Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V  | 10         |     | ~  |
| 11       | Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable   | 11         | ~   |    |
| 12       | Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII  | 12         |     | ~  |
| 13       | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | 13         |     | ~  |
| 14a      | Did the organization maintain an office, employees, or agents outside of the U.S.?   | 14a        |     | ~  |
| b        | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>                                      | 14b        |     | ~  |
| 15       | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II.</i>                                      | 15         |     | ~  |
| 16       | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>   | 16         |     | ~  |
| 17       | Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I   | 17         |     | ~  |
| 18       | Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II   | 18         | ~   | ~  |
| 19       | Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  | 19<br>20   |     | ~  |
| 20<br>21 | Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>   | 21         |     | V  |
| 22       | Did the organization report more than \$5,000 on Part IX, column (A), line ?? If "Yes," complete Schedule I, Parts I and III   | 22         |     | ~  |
| 23       | Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>   | 23         | ~   |    |
| 24a      | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions  | 24a        |     | ~  |
| h        | 24b–24d and complete Schedule K. If "No," go to question 25.   | 24a<br>24b |     | ~  |
|          | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year  | 240        |     | -  |
| C        | 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        |     | ~  |
|          | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>   | 25a        |     |    |
| b        | Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I   | 25b        |     |    |
| 26       | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II                     | 26         |     | ~  |
| 27       | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III                                 | 27         |     | ~  |

Form 990 (2008)

Checklist of Required Schedules

Part IV

| Form | 990 (2008)   |     | Р   | age <b>4</b> |
|------|--|-----|-----|--------------|
| Ра   | rt IV Checklist of Required Schedules (continued)  |     |     |              |
|      |  |     | Yes | No           |
| 28   | During the tax year, did any person who is a current or former officer, director, trustee, or key employee:  |     |     |              |
| а    | Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L,</i> | 00- |     | ~            |
|      | Part IV  | 28a |     | -            |
| b    | Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV  | 28b |     | ~            |
| С    | Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i> .   | 28c |     | ~            |
| 29   | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M   | 29  |     | ~            |
| 30   | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>  | 30  |     | ~            |
| 31   | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I   | 31  |     | ~            |
| 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  |     | ~            |
| 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  |     | ~            |
| 34   | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  | 34  |     | ~            |
| 35   | Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R. Part V. line 2  | 35  |     | ~            |
| 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  |     | ~            |
|      |  |     | 000 |              |

Form **990** (2008)

| Form   | 990 (2008)  |     | P   | age 5 |
|--------|---|-----|-----|-------|
| Pa     | t V Statements Regarding Other IRS Filings and Tax Compliance   |     |     |       |
|        |   |     | Yes | No    |
| 1a     | Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of  |     |     |       |
|        | U.S. Information Returns. Enter -0- if not applicable   |     |     |       |
| b      | Enter the number of Forms W-2G included in 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  | ~   |       |
| 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 15                               |     |     |       |
| b      | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?                    | 2b  | ~   |       |
|        | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see                          |     |     |       |
|        | instructions)   |     |     |       |
| 3a     | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by                           |     |     |       |
|        | this return?  | 3a  |     | ~     |
| b      | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O                                  | 3b  |     |       |
| 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  |     | ~     |
| b      | 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.   | -   |     |       |
| 5a     | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?                             | 5a  |     |       |
| b      |   | 5b  |     | ~     |
| С      | If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity                            | _   |     |       |
| -      | Regarding Prohibited Tax Shelter Transaction?   | 5c  |     | ~     |
|        | Did the organization solicit any contributions that were not tax deductible?  | 6a  |     | ~     |
| b      | If "Yes," did the organization include with every solicitation an express statement that such contributions or                    | Ch  |     |       |
| _      | gifts were not tax deductible?  | 6b  |     |       |
| 7      | Organizations that may receive deductible contributions under section 170(c).   |     |     |       |
| а      | Did the organization provide goods or services in exchange for any quid pro quo contribution of more than                         | 7a  |     |       |
|        | \$75?   | 7b  |     |       |
|        | If "Yes," did the organization notify the donor of the value of the goods or services provided?                                   | 10  |     |       |
| С      | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was                          | 7c  |     |       |
| d      | required to file Form 8282?   | 10  |     |       |
|        |   |     |     |       |
| е      | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e  |     |       |
| f      | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?                      | 7f  |     |       |
| g      | For all contributions of qualified intellectual property, did the organization file Form 8899 as required?                        | 7g  |     |       |
| 9<br>h | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as                       |     |     |       |
|        | required?   | 7h  |     |       |
| 8      | Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section                                  |     |     |       |
| 0      | <b>509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring                  |     |     |       |
|        | organization, have excess business holdings at any time during the year?  | 8   |     |       |
| 9      | Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.   |     |     |       |
| а      | Did the organization make any taxable distributions under section 4966?   | 9a  |     |       |
| b      | Did the organization make a distribution to a donor, donor advisor, or related person?  | 9b  |     |       |
| 10     | Section 501(c)(7) organizations. Enter:   |     |     |       |
| а      | 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                                       |     |     |       |
| 11     | Section 501(c)(12) organizations. Enter:  |     |     |       |
| а      | 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.)   |     |     |       |
|        | <b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?                 | 12a |     |       |
| D      | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b   |     |     |       |

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not Part VI required by the Internal Revenue Code.)

| Section A. Governing | Body and | Management |
|----------------------|----------|------------|
|----------------------|----------|------------|

|        |  |          | Yes    | No |
|--------|--|----------|--------|----|
|        | For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the  |          |        |    |
|        | circumstances, processes, or changes in Schedule O. See instructions.  |          |        |    |
| 1a     |  |          |        |    |
| b      | Enter the number of voting members that are independent  |          |        |    |
| 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        | ~      |    |
| 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        |        | ~  |
| 4      | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?  | 4        |        | ~  |
| 5      | Did the organization become aware during the year of a material diversion of the organization's assets?  | 5        |        | ~  |
| 6      | Does the organization have members or stockholders?  | 6        | ~      |    |
| 7a     | Does the organization have members, stockholders, or other persons who may elect one or more members   |          |        |    |
|        | of the governing body?   | 7a       |        | ~  |
| b      | Are any decisions of the governing body subject to approval by members, stockholders, or other persons?  | 7b       |        | ~  |
| 8      | Did the organization contemporaneously document the meetings held or written actions undertaken during   |          |        |    |
|        | the year by the following:   |          |        |    |
| а      | The governing body?  | 8a       | ~      |    |
| b      | Each committee with authority to act on behalf of the governing body?  | 8b       | ~      |    |
| 9a     | Does the organization have local chapters, branches, or affiliates?  | 9a       |        | ~  |
| b      | If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? | 9b       |        |    |
| 10     | Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations  |          |        |    |
|        | must describe in Schedule O the process, if any, the organization uses to review the Form 990  | 10       | ~      |    |
| 11     | Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at   |          |        |    |
|        | the organization's mailing address? If "Yes," provide the names and addresses in Schedule O  | 11       |        | ~  |
| Sec    | tion B. Policies   |          |        |    |
|        |  |          | Yes    | No |
| 12a    | Does the organization have a written conflict of interest policy? If "No," go to line 13   | 12a      | ~      |    |
| b      | Are officers, directors or trustees, and key employees required to disclose annually interests that could give   |          |        |    |
|        | rise to conflicts?   | 12b      | ~      |    |
| С      | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"   |          |        |    |
|        | describe in Schedule O how this is done  | 12c      | く<br>く |    |
| 13     | Does the organization have a written whistleblower policy?   | 13<br>14 | ~      |    |
| 14     | Does the organization have a written document retention and destruction policy?  | 14       | ~      |    |
| 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:  | 15a      | ~      |    |
| a<br>L | The organization's CEO, Executive Director, or top management official?  | 15a      | ~      |    |
| a      | Other officers or key employees of the organization?   | 130      | •      |    |
|        |  |          |        |    |

| 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 |
| b   | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard |     |
|     | the organization's exempt status with respect to such arrangements?  | 16b |

#### Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ none

- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website
- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public.
- State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization: Sarah S Cornwell 410 17th Street Suite 700 Denver CO 80202

V

#### 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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• 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 the organization did not compensate any officer, director, trustee, or key employee.

| Check this box if the organization did not co |                              | any o                | DITIC                   |         |                 | ctor,                             | trus           |  |  | (=)   |
|---|------------------------------|----------------------|-------------------------|---------|-----------------|-----------------------------------|----------------|--|--|---|
| (A)   | (B)                          |                      |                         |         | (D)             | (E)                               | (F)            |  |  |   |
| Name and Title                                | Average<br>hours per<br>week | P or director        | o Institutional trustee | Officer | al Key employee | a Highest compensated<br>employee | ply)<br>Former | Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | Reportable<br>compensation<br>from related<br>organizations<br>(W-2/1099-MISC) | Estimated<br>amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| Chuck Stanley President                       | 1                            |                      |                         |         |                 |                                   |                | 0  | 0  | 0   |
|   |                              | <ul> <li></li> </ul> |                         |         |                 |                                   |                |  |  |   |
| Logan Magruder<br>Immediate Past President    | .5                           | ~                    |                         |         |                 |                                   |                | 0  | 0  | 0   |
| Jerry Barnes<br>Vice President                | .5                           | ~                    |                         |         |                 |                                   |                | 0  | 0  | 0   |
| Don DeCarlo<br>Vice President                 | .5                           | ~                    |                         |         |                 |                                   |                | 0  | 0  | 0   |
| Rich Frommer                                  | .5                           |                      |                         |         |                 |                                   |                | 0  | 0  | 0   |
| Vice President<br>Tim Hopkins                 |                              | <b>~</b>             |                         |         |                 |                                   |                |  |  |   |
| Vice President                                | .5                           | ~                    |                         |         |                 |                                   |                | 0  | 0  | 0   |
| Jim Kleckner<br>Vice President                | .5                           | ~                    |                         |         |                 |                                   |                | 0  | 0  | 0   |
| Don McClure<br>Vice President                 | .5                           | ~                    |                         |         |                 |                                   |                | 0  | 0  | 0   |
| Frank Muscara<br>Vice President               | .5                           | ~                    |                         |         |                 |                                   |                | 0  | 0  | 0   |
| Jay Neese<br>Vice President                   | .5                           | ~                    |                         |         |                 |                                   |                | 0  | 0  | 0   |
| Gary Packer<br>Vice President                 | .5                           | ~                    |                         |         |                 |                                   |                | 0  | 0  | 0   |
| Bobby Plowman                                 | .5                           | ~                    |                         |         |                 |                                   |                | 0  | 0  | 0   |
| Vice President Greg Ruben                     | .5                           |                      |                         |         |                 |                                   |                | 0  | 0  | 0   |
| Vice President<br>Tom Sheffield               | .5                           | ~                    |                         |         |                 |                                   |                | 0  | 0  | 0   |
| Vice President<br>George Solich               | .5                           | <ul> <li></li> </ul> |                         |         |                 |                                   |                | 0  | 0  | 0   |
| Vice President<br>Jay Still                   |                              | ~                    |                         |         |                 |                                   |                |  |  |   |
| Vice President                                | .5                           | ~                    |                         |         |                 |                                   |                | 0  | 0  | 0   |
| Duane Zavadil Vice President                  | .5                           | ~                    |                         |         |                 |                                   |                | 0  | 0  | 0   |

| Form | 990 | (2008) |
|------|-----|--------|
|------|-----|--------|

| Part VII Section A. Officers, Directors, Tr           | ustees, Key                  | / Emp         | loye                    | ees,    | an             | d Hig                           | hest     | Compensate   | d Employees (cor   | ntinued)  |
|---|------------------------------|---------------|-------------------------|---------|----------------|---------------------------------|----------|--|--|---|
| (A)   | (B)                          |               |                         | (0      | <b>)</b> )     |                                 |          | (D)  | (E)  | (F)   |
| Name and title  | Average<br>hours per<br>week | P or director | o Institutional trustee | Officer | a Key employee | at Highest compensated employee | p Former | Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | Reportable<br>compensation<br>from related<br>organizations<br>(W-2/1099-MISC) | Estimated<br>amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| Neal Stanley<br>Vice President Events                 | .5                           | ~             |                         |         |                |                                 |          | 0  | 0  | 0   |
| Shane Schulz<br>Vice President Government Affairs     | .5                           | ~             |                         |         |                |                                 |          | 0  | 0  | 0   |
| Jeff Lang<br>Vice President Membership                | .5                           | ~             |                         |         |                |                                 |          | 0  | 0  | 0   |
| Rebecca Watson<br>Secretary                           | .5                           | ~             |                         |         |                |                                 |          | 0  | 0  | 0   |
| Phil Doty<br>Treasurer                                | .5                           | ~             |                         |         |                |                                 |          | 0  | 0  | 0   |
| James Schroeder<br>Colorado State Vice President      | .5                           | ~             |                         |         |                |                                 |          | 0  | 0  | 0   |
| Bruce Bowman<br>Montana State Vice President          | .5                           | ~             |                         |         |                |                                 |          | 0  | 0  | 0   |
| Phil Kriz<br>Nebraska State Vice President            | .5                           | ~             |                         |         |                |                                 |          | 0  | 0  | 0   |
| T. Greg Merrion<br>New Mexico State Vice President    | .5                           | ~             |                         |         |                |                                 |          | 0  | 0  | 0   |
| Brent Miller<br>No and So Dakota State Vice President | .5                           | ~             |                         |         |                |                                 |          | 0  | 0  | 0   |
| Jim Felton<br>Utah State Vice President               | .5                           | ~             |                         |         |                |                                 |          | 0  | 0  | 0   |
| Brad Miller<br>Utah State Vice President              | .5                           | ~             |                         |         |                |                                 |          | 0  | 0  | 0   |
| Randy Bolles<br>Wyoming State Vice President          | .5                           | ~             |                         |         |                |                                 |          | 0  | 0  | 0   |
| 1b Total  |                              |               |                         |         |                |                                 |          | 0  | 0  | 0   |

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► three

| 3 | Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>                             |
|---|--|
| 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? <i>If "Yes," complete Schedule J for such</i> |
| 5 | <i>individual.</i> Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>       |

# Yes No 3 ✓ 4 ✓ 5 ✓

#### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

| (A)<br>Name and business address  | (B)<br>Description of services | <b>(C)</b><br>Compensation |
|---|--------------------------------|----------------------------|
| Buys & Associates 300 E Mineral Ave Suite 10 Littleton CO 80122-2655  | air quality contracting        | 105,241                    |
| Environ International Corp P.O. Box 8500-1980 Philadelphia PA 19178-1980  | air quality contracting        | 534,017                    |
|   |                                |                            |
|   |                                |                            |
|   |                                |                            |
| 2 Total number of independent contractors (including those in 1) who recei compensation from the organization ► 2 | ved more than \$100,000 in     |                            |

Page 8

| Dord  | - \////               | Statement of Devenue  |                                      |                             |   |  |  |
|---|-----------------------|---|--------------------------------------|-----------------------------|---|--|--|
| Part  |                       | Statement of Revenue  |                                      | <b>(A)</b><br>Total revenue | ( <b>B</b> )<br>Related or<br>exempt<br>function<br>revenue | <b>(C)</b><br>Unrelated<br>business<br>revenue | <b>(D)</b><br>Revenue<br>excluded from tax<br>under sections<br>512, 513, or 514 |
| Contributions, gifts, grants<br>and other similar amounts | b<br>c<br>d<br>e<br>f | Federated campaigns1aMembership dues1bFundraising events1cRelated organizations1dGovernment grants (contributions)1eAll other contributions, gifts, grants,<br>and similar amounts not included above1fNoncash contributions included in lines 1a-1f5 | 0<br>0<br>0<br>0<br>0<br>0<br>0<br>0 | 0                           |   |  |  |
| ne  |                       |   | Business Code                        |                             |   |  |  |
| Program Service Revenue                                   | 2a                    | Dues and sponsorships   | 900099                               | 1,900,418                   | 1,900,418   |  |  |
| Re  | b                     | Registration fees   | 900099                               | 158,851                     | 158,851   |  |  |
| vice  | с                     |   |                                      |                             |   |  |  |
| Ser   | d                     |   |                                      |                             |   |  |  |
| am  | е                     |   |                                      |                             |   |  |  |
| ogra  | f                     | All other program service revenue .   |                                      |                             |   |  |  |
| 7   | g                     | Total. Add lines 2a–2f  | 🕨                                    | 2,059,269                   |   |  |  |
|   | 3                     | Investment income (including dividends  | , interest, and                      |                             |   |  |  |
|   |                       | other similar amounts)  |                                      | 40,719                      |   |  | 40,719   |
|   | 4                     | Income from investment of tax-exempt bond   | d proceeds 🕨                         | 0                           |   |  |  |
|   | 5                     | Royalties   |                                      | 0                           |   |  |  |
|   |                       | (i) Real  | (ii) Personal                        |                             |   |  |  |
|   | 6a                    | Gross Rents   |                                      |                             |   |  |  |
|   | b                     | Less: rental expenses   |                                      |                             |   |  |  |
|   |                       | Rental income or (loss)   |                                      |                             |   |  |  |
|   | d                     | Net rental income or (loss)   | 🕨                                    | 0                           |   |  |  |
|   | 7a                    | Gross amount from sales of assets other than inventory  | (ii) Other                           |                             |   |  |  |
|   | b                     | Less: cost or other basis<br>and sales expenses   |                                      |                             |   |  |  |
|   |                       | Gain or (loss)  |                                      | 0                           |   |  |  |
|   | d                     | Net gain or (loss)  | 🕨                                    | 0                           |   |  |  |
| Other Revenue   | 8a                    | Gross income from fundraising<br>events (not including \$<br>of contributions reported on line 1c).<br>See Part IV, line 18   | 215,500                              |                             |   |  |  |
| the   |                       | Less: direct expenses b   | 157,029                              |                             |   |  |  |
| Ò   | С                     | Net income or (loss) from fundraising e   | vents 🕨                              | 58,471                      | 58,471  |  |  |
|   | 9a                    | Gross income from gaming activities.<br>See Part IV, line 19  |                                      |                             |   |  |  |
|   | h                     | Less: direct expenses b   |                                      |                             |   |  |  |
|   |                       | Net income or (loss) from gaming activ  | ities 🕨                              | 0                           |   |  |  |
|   |                       | Gross sales of inventory, less  |                                      |                             |   |  |  |
|   |                       | returns and allowances a  |                                      |                             |   |  |  |
|   |                       | Less: cost of goods sold b  |                                      |                             |   |  |  |
|   |                       | Net income or (loss) from sales of invento  | ory 🕨                                | 0                           |   |  |  |
|   |                       | Miscellaneous Revenue   | Business Code                        |                             |   |  |  |
|   | 11a                   | Employment advertising  | 900099                               | 915                         |   | 915  |  |
|   | b                     |   |                                      |                             |   |  |  |
|   | c                     |   |                                      |                             |   |  |  |
|   | -                     | All other revenue   |                                      |                             |   |  |  |
|   |                       | <b>Total.</b> Add lines 11a–11d   |                                      | 915                         |   |  |  |
|   |                       | Total Revenue. Add lines 1h, 2g, 3, 4,  |                                      |                             |   |  |  |
|   |                       | 9c, 10c, and 11e  |                                      | 2,159,374                   | 2,117,740   | 915  | 40,719   |

Form 990 (2008)

Statement of Functional Expenses

#### Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (B) (A) (C) (D) Do not include amounts reported on lines 6b, Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses 1 Grants and other assistance to governments and 0 organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in 2 0 the U.S. See Part IV, line 22 . . . . . Grants and other assistance to governments, 3 organizations, and individuals outside the 0 U.S. See Part IV, lines 15 and 16 0 4 Benefits paid to or for members . . . . 5 Compensation of current officers, directors, 304,010 trustees, and key employees . . . . . Compensation not included above, to disgualified 6 persons (as defined under section 4958(f)(1)) and 0 persons described in section 4958(c)(3)(B) . 560,567 Other salaries and wages . . . . . . 7 8 Pension plan contributions (include section 401(k) 24,315 and section 403(b) employer contributions) . 63,611 Other employee benefits . . . . . 9 54,996 **10** Payroll taxes . . . . . . . . . . . . Fees for services (non-employees): 11 46,170 a Management . . . . . . . . . . 18,561 **b** Legal . . . . . . . . . . . . . . . **c** Accounting . . . . . . . . . . . . 74,863 **d** Lobbying . . . . . . . . . . . . 0 e Professional fundraising services. See Part IV, line 17 0 f Investment management fees . . . . 21,285 23,436 12 Advertising and promotion . . . . 111,475 13 Office expenses 26,700 Information technology . . . . . . . 14 0 15 Royalties 82,689 Occupancy . . . . . . . . . . . . 16 56,260 17 Travel . . . . . . . . . . . . . 18 Payments of travel or entertainment expenses 0 for any federal, state, or local public officials 350,124 19 Conferences, conventions, and meetings 0 20 Interest . . . . . . . . . . . . . 0 Payments to affiliates . . . . . . . 21 21,655 22 Depreciation, depletion, and amortization. 7,562 23 Insurance . . . . . . . . . . . . 24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) Dues 5,151 а Training & Publications 12,439 b Miscellaneous 294 С d е All other expenses ..... f Total functional expenses. Add lines 1 through 24f 25 1,866,163 Joint Costs. Check here ► \_ if following 26 SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation 0

V

V

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| Pa              | irt X | Balance Sheet  |                                 |    |                           |
|-----------------|-------|--|---------------------------------|----|---------------------------|
|                 |       |  | <b>(A)</b><br>Beginning of year |    | <b>(B)</b><br>End of year |
|                 | 1     | Cash—non-interest-bearing  | 129,225                         | 1  | 111,850                   |
|                 | 2     | Savings and temporary cash investments   | 1,657,283                       | 2  | 2,379,436                 |
|                 | 3     | Pledges and grants receivable, net   | 0                               | 3  | 0                         |
|                 | 4     | Accounts receivable, net   | 43,965                          | 4  | 37,981                    |
|                 | 5     | Receivables from current and former officers, directors, trustees, key   |                                 |    |                           |
|                 |       | employees, or other related parties. Complete Part II of Schedule L .  | 0                               | 5  | 0                         |
|                 | 6     | Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete |                                 |    |                           |
|                 |       | Part II of Schedule L  | 0                               | 6  | 0                         |
| Assets          | 7     | Notes and loans receivable, net  | 0                               | 7  | 0                         |
| SS              | 8     | Inventories for sale or use  | 0                               | 8  | 0                         |
| ∢               | 9     | Prepaid expenses and deferred charges  | 46,863                          | 9  | 78,259                    |
|                 | 10a   | Land, buildings, and equipment: cost basis 10a 99,595  |                                 |    |                           |
|                 | b     | Less: accumulated depreciation. Complete   |                                 |    |                           |
|                 |       | Part VI of Schedule D         10b         54,285   | 22,352                          |    | 45,310                    |
|                 | 11    | Investments—publicly traded securities   | 0                               | 11 | 0                         |
|                 | 12    | Investments—other securities. See Part IV, line 11   | 0                               | 12 | 0                         |
|                 | 13    | Investments—program-related. See Part IV, line 11  | 0                               | 13 | 0                         |
|                 | 14    | Intangible assets  | 0                               | 14 | 0                         |
|                 | 15    | Other assets. See Part IV, line 11   | 0                               | 15 | 0                         |
|                 | 16    | Total assets. Add lines 1 through 15 (must equal line 34)  | 1,899,688                       | 16 | 2,659,486                 |
|                 | 17    | Accounts payable and accrued expenses  | 246,220                         | 17 | 310,883                   |
|                 | 18    | Grants payable   | 0                               | 18 | 0                         |
|                 | 19    | Deferred revenue   | 746,782                         | 19 | 1,148,706                 |
|                 | 20    | Tax-exempt bond liabilities  | 0                               | 20 | 0                         |
| es              | 21    | Escrow account liability. Complete Part IV of Schedule D   | 0                               | 21 | 0                         |
| Liabilities     | 22    | Payables to current and former officers, directors, trustees, key<br>employees, highest compensated employees, and disqualified            |                                 |    |                           |
| Ë               |       | persons. Complete Part II of Schedule L  | 0                               | 22 | 0                         |
|                 | 23    | Secured mortgages and notes payable to unrelated third parties   | 0                               | 23 | 0                         |
|                 | 24    | Unsecured notes and loans payable  | 0                               | 24 | 0                         |
|                 | 25    | Other liabilities. Complete Part X of Schedule D   | 0                               | 25 | 0                         |
|                 | 26    | Total liabilities. Add lines 17 through 25   | 993,002                         | 26 | 1,459,589                 |
| ces             |       | Organizations that follow SFAS 117, check here $\blacktriangleright$ and complete lines 27 through 29, and lines 33 and 34.                |                                 |    |                           |
| lan             | 27    | Unrestricted net assets  |                                 | 27 |                           |
| Ba              | 28    | Temporarily restricted net assets  |                                 | 28 |                           |
| р               | 29    | Permanently restricted net assets  |                                 | 29 |                           |
| or Fund Balance |       | Organizations that do not follow SFAS 117, check here $\blacktriangleright$ and complete lines 30 through 34.                              |                                 |    |                           |
| ts              | 30    | Capital stock or trust principal, or current funds   | 0                               | 30 | 0                         |
| Net Assets      | 31    | Paid-in or capital surplus, or land, building, or equipment fund   | 0                               | 31 | 0                         |
| As              | 32    | Retained earnings, endowment, accumulated income, or other funds   | 906,686                         | 32 | 1,199,897                 |
| let             | 33    | Total net assets or fund balances  | 906,686                         | 33 | 1,199,897                 |
| 2               | 34    | Total liabilities and net assets/fund balances   | 1,899,688                       |    | 2,659,486                 |
| Pa              | rt XI |  | , , ,                           |    |                           |
|                 |       |  |                                 |    | Yes No                    |

Accrual Other 1 Accounting method used to prepare the Form 990: 2a 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2b **b** Were the organization's financial statements audited by an independent accountant? . . . . . c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . 2c 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . . . . 3a . .  ${\boldsymbol b}\,$  If "Yes," did the organization undergo the required audit or audits? . 3b

| SCHEDULE C  |  | Political Campaign and Lobbying Activities  |  |  |                             |   |  |  |  |  |  |
|---|--|---|--|--|-----------------------------|---|--|--|--|--|--|
| (Form 990 or 990-EZ                                   | .)   |   | 2008                                     |  |                             |   |  |  |  |  |  |
|   | For Orga   | nizations Exempt From Income Tax  |  | ( )  | 527                         | Open to Public  |  |  |  |  |  |
| Department of the Treasur<br>Internal Revenue Service | У  | <ul> <li>To be completed by organ</li> <li>Attach to Form 99</li> </ul>   |  | i below.   |                             | Inspection  |  |  |  |  |  |
| <ul> <li>Section 501(c)(3)</li> </ul>                 | <ol><li>organizations:</li></ol>   | s," to Form 990, Part IV, line 3, or Fo<br>Complete Parts I-A and B. Do not co  | mplete 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. |   |  |  |                             |   |  |  |  |  |  |
|   | 0  | nplete Part I-A only.   |  |  |                             |   |  |  |  |  |  |
| •   |  | s," to Form 990, Part IV, line 4, or Fo<br>that have filed Form 5768 (election ur   | ,  |  | •                           |   |  |  |  |  |  |
|   |  | that have NOT filed Form 5768 (electio  |  | (h)): Complete Pa                                      | rt II-B. Do r               | not complete Part II-A.   |  |  |  |  |  |
| -   |  | s," to Form 990, Part IV, line 5 (Proxy   | y Tax), then                             |  |                             |   |  |  |  |  |  |
|   |  | anizations: Complete Part III.  |  |  |                             |   |  |  |  |  |  |
| Name of organization                                  |  |   |  |  |                             | identification number   |  |  |  |  |  |
|   |  | ciation of Mountain States  |  | 501(1)   | 84                          | 0700841   |  |  |  |  |  |
|   |  | ed by all organizations exemptions for Schedule C for details.  |  | 1 501(c) and s   | section 5                   | >27 organizations.  |  |  |  |  |  |
| 1 Provide a de  | escription of th   | e organization's direct and indired   | ct political campai                      | an activities in                                       | Part IV.                    |   |  |  |  |  |  |
| 2 Political expe                                      |  |   |  | •  |                             |   |  |  |  |  |  |
| 3 Volunteer ho  |  |   |  |  | •                           |   |  |  |  |  |  |
| Part I-B To   | be complete  | ed by all organizations exem  | pt under sectio                          | n 501(c)(3).   |                             |   |  |  |  |  |  |
| See   | e the instruct   | ions for Schedule C for details   | -<br>-                                   |  |                             |   |  |  |  |  |  |
| 1 Enter the am  | nount of any e   | xcise tax incurred by the organiza  | tion under sectior                       | 14955  | ▶ \$                        |   |  |  |  |  |  |
| 2 Enter the am  | nount of any e   | xcise tax incurred by organization  | managers under                           | section 4955.  | ▶ \$                        |   |  |  |  |  |  |
| •   |  | a section 4955 tax, did it file For   |  |  |                             | . 🔄 Yes 🔛 No  |  |  |  |  |  |
| 4a Was a correct                                      |  |   |  |  |                             | · 🗌 Yes 🔄 No  |  |  |  |  |  |
| b If "Yes," des                                       |  |   |  |  |                             |   |  |  |  |  |  |
|   |  | ed by all organizations exem<br>ions for Schedule C for details   |  | n 501(c), exc  |                             | 101 501(0)(3).  |  |  |  |  |  |
| 1 Enter the an activities                             | nount directly   | expended by the filing organization   | on for section 52                        | 7 exempt funct   | ion<br>▶ \$                 |   |  |  |  |  |  |
|   | nount of the fill<br>function activi   | ing organization's funds contribute<br>ties   | ed to other organi                       | zations for sect                                       | :ion<br>▶ \$                |   |  |  |  |  |  |
| on Form 112   | 20-POL, line 1   | exempt function expenditures. Ac  |  |  | and<br>▶ \$                 | ·····   |  |  |  |  |  |
| -   | -  | file Form 1120-POL for this year?   |  |  |                             | . 🗌 Yes 🔛 No  |  |  |  |  |  |
| were made.<br>contributions                           | Enter the amo received and p   | and employer identification numbe<br>unt paid and indicate if the amour<br>promptly and directly delivered to a se<br>ee (PAC). If additional space is need | nt was paid from<br>separate political o | the filing organi<br>rganization, suc                  | ization's fu<br>h as a sepa | unds or were political  |  |  |  |  |  |
| (a) Nan   |  | (b) Address   | (c) EIN                                  | (d) Amount pai<br>filing organiza<br>funds. If none, e | id from<br>tion's c         | (e) Amount of political<br>contributions received and<br>promptly and directly<br>delivered to a separate<br>political organization. If<br>none, enter -0 |  |  |  |  |  |
|   |  |   |  |  |                             |   |  |  |  |  |  |
|   |  |   |  |  |                             |   |  |  |  |  |  |
|   |  |   |  |  |                             |   |  |  |  |  |  |
|   |  |   |  |  |                             |   |  |  |  |  |  |
|   |  |   |  |  |                             |   |  |  |  |  |  |

Т

OMB No. 1545-0047

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50084S Schedule C (Form 990 or 990-EZ) 2008

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| Sche    | dule C (Form 990 or 990-EZ) 2008  |   |                                  | Page <b>2</b>                      |  |  |  |  |  |  |
|---------|---|---|----------------------------------|------------------------------------|--|--|--|--|--|--|
| Pa      |   | nizations exempt under section 501(c)(3) t<br>(1(h)). See the instructions for Schedule C for |                                  | 768                                |  |  |  |  |  |  |
| A       | Check ► □ if the filing organization belongs to an affiliated group.  |   |                                  |                                    |  |  |  |  |  |  |
| В       | Check   Check | checked box A and "limited control" provision   | ons apply.                       |                                    |  |  |  |  |  |  |
|         |   | bying Expenditures<br>eans amounts paid or incurred.)   | (a) Filing organization's totals | <b>(b)</b> Affiliated group totals |  |  |  |  |  |  |
| 1a<br>b | Total lobbying expenditures to influence<br>Total lobbying expenditures to influence  |   |                                  |                                    |  |  |  |  |  |  |
| С       |   | 1a and 1b)  |                                  |                                    |  |  |  |  |  |  |
| d       |   |   |                                  |                                    |  |  |  |  |  |  |
| е       | Total exempt purpose expenditures (ad   | ld lines 1c and 1d)   |                                  |                                    |  |  |  |  |  |  |
| f       | Lobbying nontaxable amount. Enter the columns.  | amount from the following table in both   |                                  |                                    |  |  |  |  |  |  |
|         | If the amount on line 1e, column (a) or (b) is:<br>Not over \$500,000   | The lobbying nontaxable amount is: 20% of the amount on line 1e.                              |                                  |                                    |  |  |  |  |  |  |
|         | Over \$500,000 but not over \$1,000,000   | \$100,000 plus 15% of the excess over \$500,000.  |                                  |                                    |  |  |  |  |  |  |
|         | Over \$1,000,000 but not over \$1,500,000   | \$175,000 plus 10% of the excess over \$1,000,000.  |                                  |                                    |  |  |  |  |  |  |
|         | Over \$1,500,000 but not over \$17,000,000  | \$225,000 plus 5% of the excess over \$1,500,000.   |                                  |                                    |  |  |  |  |  |  |
|         | Over \$17,000,000   | \$1,000,000.  |                                  |                                    |  |  |  |  |  |  |
| g       | Grassroots nontaxable amount (enter 2   | 5% of line 1f)  |                                  |                                    |  |  |  |  |  |  |
| h       | •   | if line g is more than line a   |                                  |                                    |  |  |  |  |  |  |
| i       | Subtract line 1f from line 1c. Enter -0-  |   |                                  |                                    |  |  |  |  |  |  |
| j       |   | either line 1h or line 1i, did the organization file Fo                                       |                                  | 🗆 Yes 🗌 No                         |  |  |  |  |  |  |

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

| Lobbying Expenditures During 4-Year Averaging Period             |                 |                 |          |                 |                  |  |  |
|--|-----------------|-----------------|----------|-----------------|------------------|--|--|
| Calendar year (or fiscal year beginning in)                      | <b>(a)</b> 2005 | <b>(b)</b> 2006 | (c) 2007 | <b>(d)</b> 2008 | <b>(e)</b> Total |  |  |
| 2a Lobbying non-taxable amount                                   |                 |                 |          |                 |                  |  |  |
| <b>b</b> Lobbying ceiling amount<br>(150% of line 2a, column(e)) |                 |                 |          |                 |                  |  |  |
| <b>c</b> Total lobbying expenditures                             |                 |                 |          |                 |                  |  |  |
| d Grassroots non-taxable amount                                  |                 |                 |          |                 |                  |  |  |
| e Grassroots ceiling amount<br>(150% of line 2d, column (e))     |                 |                 |          |                 |                  |  |  |
| f Grassroots lobbying expenditures                               |                 |                 | 0        |                 |                  |  |  |

Schedule C (Form 990 or 990-EZ) 2008

# Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

|     |   | (2   | a)    | (a)       |    |
|-----|---|------|-------|-----------|----|
|     |   | Yes  | No    | Amount    |    |
| 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?   |      |       |           |    |
| d   | Mailings to members, legislators, or the public?  |      |       |           |    |
| е   | 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 other means?   |      |       |           |    |
| i   | Other activities? If "Yes," describe in Part IV   |      |       |           |    |
| j   | Total lines 1c through 1i   |      |       |           |    |
| 2a  | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?   |      |       |           |    |
| b   | If "Yes," enter the amount of any tax incurred under section 4912   |      |       |           |    |
| С   | 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?  |      |       |           |    |
| Par | t III-A To be completed by all organizations exempt under section 501(c)(4), sec section 501(c)(6). See the instructions for Schedule C for details.  | tion | 501(0 | c)(5), or |    |
|     |   |      |       | Yes       | No |

|   |  |   | <br> |
|---|--|---|------|
| 1 | Were substantially all (90% or more) dues received nondeductible by members?                     | 1 | ~    |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less?                | 2 | ~    |
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? | 3 | ~    |

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." See Schedule C instructions for details.

| 1 | Dues, assessments and similar amounts from members  | 1  | 1,900,418 |
|---|---|----|-----------|
| 2 | Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).   |    |           |
| а | Current year  | 2a | 155,701   |
|   | Carryover from last year  | 2b |           |
|   |   | 2c | 155,701   |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues   | 3  | 285,063   |
| 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 political expenditure next year?  | 4  |           |
| 5 | Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)   | 5  | 0         |

#### Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

## Part IV Supplemental Information (continued)

| <br> |
|------|
|      |
| <br> |
|      |

| SCHE  | DULE | D |
|-------|------|---|
| (Form | 990) |   |

# **Supplemental Financial Statements**

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047

Name of the organization

Department of the Treasury

Internal Revenue Service

Employer identification number

| Pa         | Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. |   |  |  |  |  |  |  |  |
|------------|--|---|--|--|--|--|--|--|--|
|            | 5  | (a) Donor advised funds                     | (b) Funds and other accounts               |  |  |  |  |  |  |
| 1          | Total number at end of year  |   |  |  |  |  |  |  |  |
| 2          | Aggregate contributions to (during year)   |   |  |  |  |  |  |  |  |
| 3          | Aggregate 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 advised                      |  |  |  |  |  |  |
|            | funds are the organization's property, subj  |   |  |  |  |  |  |  |  |
| 6          | Did the organization inform all grantees, do   |   |  |  |  |  |  |  |  |
|            | used only for charitable purposes and not  |   |  |  |  |  |  |  |  |
| <b>D</b> : | impermissible private benefit?   |   |  |  |  |  |  |  |  |
| Pa         | · · ·  | plete if the organization answered "Yes     |  |  |  |  |  |  |  |
| 1          | Purpose(s) of conservation easements held  |   |  |  |  |  |  |  |  |
|            | Preservation of land for public use (e.g.  |   | ion of an historically important land area |  |  |  |  |  |  |
|            | Protection of natural habitat  |   | tion of certified historic structure       |  |  |  |  |  |  |
| •          | Preservation of open space   | d a qualified appearation contribution in t | as form of a concernation accoment         |  |  |  |  |  |  |
| 2          | Complete lines 2a–2d if the organization held<br>on the last day of the tax year.  | a quaimed conservation contribution in ti   | le form of a conservation easement         |  |  |  |  |  |  |
|            | on the last day of the last year   |   | Held at the End of the Year                |  |  |  |  |  |  |
| а          | Total number of conservation easements .   |   |  |  |  |  |  |  |  |
| b          | Total acreage restricted by conservation ea  |   |  |  |  |  |  |  |  |
| c          | Number of conservation easements on a c  |   |  |  |  |  |  |  |  |
| d          | Number of conservation easements include   |   |  |  |  |  |  |  |  |
| 3          | Number of conservation easements modified  |   |  |  |  |  |  |  |  |
| Ŭ          | the taxable year ►   |   |  |  |  |  |  |  |  |
| 4          | Number of states where property subject t  | o conservation easement is located >        |  |  |  |  |  |  |  |
| 5          | Does the organization have a written policy  |   |  |  |  |  |  |  |  |
|            | enforcement of the conservation easement   |   |  |  |  |  |  |  |  |
| 6          | Staff or volunteer hours devoted to monito   |   |  |  |  |  |  |  |  |
| 7          | Amount of expenses incurred in monitoring  |   |  |  |  |  |  |  |  |
| 8          | Does each conservation easement reported $170(1)(4)(D)(1)$   |   |  |  |  |  |  |  |  |
| •          | 170(h)(4)(B)(i) and section $170(h)(4)(B)(i)$ ?  |   |  |  |  |  |  |  |  |
| 9          | In Part XIV, describe how the organization balance sheet, and include, if applicable, the  |   |  |  |  |  |  |  |  |
|            | the organization's accounting for conserva-  |   |  |  |  |  |  |  |  |
| Par        |  | ections of Art, Historical Treasures,       |  |  |  |  |  |  |  |
|            | Complete if the organization answ  | vered "Yes" to Form 990, Part IV, line 8    | 3  |  |  |  |  |  |  |
| 12         | If the organization elected, as permitted un   | der SEAS 116 not to report in its reven     | is statement and balance sheet works of    |  |  |  |  |  |  |
| Ia         | art, historical treasures, or other similar asse   |   |  |  |  |  |  |  |  |
|            | provide, in Part XIV, the text of the footnot  |   |  |  |  |  |  |  |  |
| b          | If the organization elected, as permitted un   | der SFAS 116, to report in its revenue st   | atement and balance sheet works of art.    |  |  |  |  |  |  |
|            | historical treasures, or other similar assets  | held for public exhibition, education, or   |  |  |  |  |  |  |  |
|            | provide the following amounts relating to the  |   |  |  |  |  |  |  |  |
|            | (i) Revenues included in Form 990, Part V  |   |  |  |  |  |  |  |  |
|            | (ii) Assets included in Form 990, Part X .   |   |  |  |  |  |  |  |  |
| 2          | If the organization received or held works   |   |  |  |  |  |  |  |  |
| -          | following amounts required to be reported  | •   |  |  |  |  |  |  |  |
| a<br>b     | Revenues included in Form 990, Part VIII, I<br>Assets included in Form 990, Part X   |   |  |  |  |  |  |  |  |
| D          | ASSERS INCIDUED IN FUITH SSU, Fait A   |   | φ  |  |  |  |  |  |  |

| Scheo  | lule D (Form 990) 2008   |                               |                        |                          |                           |                             |                  |                         | F               | Page 2 |
|--------|--|-------------------------------|------------------------|--------------------------|---------------------------|-----------------------------|------------------|-------------------------|-----------------|--------|
| Par    | t III Organizations Maintain   | ing Colle                     | ctions o               | of Art, H                | istoric                   | al Treasures,               | or Ol            | ther Similar As         | sets (contin    | ued)   |
| 3      | Using the organization's accession items (check all that apply):             | and other                     | records                | s, check                 | any of t                  | the following th            | at are           | e a significant us      | se of its colle | ection |
| а      | Public exhibition  |                               |                        | d                        |                           | Loan or exchan              | ge pr            | ograms                  |                 |        |
| b      | Scholarly research   |                               |                        | е                        |                           |                             |                  |                         |                 |        |
| с      | Preservation for future genera   | tions                         |                        |                          |                           |                             |                  |                         |                 |        |
| 4      | Provide a description of the organi.<br>Part XIV.                            |                               | llections              | s and exp                | olain ho                  | w they further t            | he or            | ganization's exe        | mpt purpose     | in     |
| 5      | During the year, did the organization assets to be sold to raise funds rathe | solicit or re<br>er than to b | eceive do<br>e mainta  | onations o<br>ained as p | of art, his<br>part of th | storical treasures          | s, or c<br>colle | other similar<br>ction? | Yes             | No     |
| Par    | Trust, Escrow and Cust<br>Part IV, line 9, or reporte                        |                               |                        |                          |                           |                             | ansv             | vered "Yes" to          | Form 990,       |        |
|        | Is the organization an agent, truste included on Form 990, Part X?           |                               |                        |                          |                           |                             | ns or            | other assets not        | Yes             | No     |
| b      | If "Yes," explain the arrangement in   | n Part XIV                    | and con                | nplete the               | e follow                  | ing table:                  |                  |                         |                 |        |
|        |  |                               |                        |                          |                           |                             |                  | An                      | nount           |        |
|        | Beginning balance  |                               |                        |                          |                           |                             | 1c               |                         |                 |        |
|        | Additions during the year  |                               |                        |                          |                           |                             | 1d               |                         |                 |        |
| е      | Distributions during the year  |                               |                        |                          |                           |                             | 1e               |                         |                 |        |
| f      | Ending balance   |                               |                        |                          |                           |                             | 1f               |                         |                 |        |
|        | If "Yes," explain the arrangement i  | n Part XIV.                   |                        |                          |                           |                             | · · ·            |                         | ∐ Yes ∟         | No     |
| Par    | t V Endowment Funds. Co  |                               |                        |                          |                           |                             |                  |                         |                 |        |
|        |  | (a) Currei                    | nt year                | (b) Pric                 | or year                   | (c) Two years ba            | ack (            | (d) Three years back    | (e) Four years  | back   |
| 1a     | Beginning of year balance  |                               |                        |                          |                           |                             |                  |                         |                 |        |
| b      | Contributions  |                               |                        |                          |                           |                             |                  |                         |                 |        |
| С      | Investment earnings or losses .  |                               |                        |                          |                           |                             |                  |                         |                 |        |
| d      | Grants or scholarships   |                               |                        |                          |                           |                             |                  |                         |                 |        |
| е      | Other expenditures for facilities and programs                               |                               |                        |                          |                           |                             |                  |                         |                 |        |
| f<br>g | Administrative expenses<br>End of year balance                               |                               |                        |                          |                           |                             |                  |                         |                 |        |
| 2      | Provide the estimated percentage of  | of the year                   | end ba                 | lance hel                | d as:                     |                             |                  |                         |                 |        |
| а      | Board designated or quasi-endowr   | nent 🕨                        |                        | %                        |                           |                             |                  |                         |                 |        |
| b      | Permanent endowment ►  | %                             |                        |                          |                           |                             |                  |                         |                 |        |
| С      | Term endowment ►9  | 6                             |                        |                          |                           |                             |                  |                         |                 |        |
| 3a     | Are there endowment funds not in the organization by:                        | he possess                    | ion of th              | ne organiz               | ation th                  | at are held and             | admi             | nistered for the        | Yes             | No     |
|        | (i) unrelated organizations  |                               |                        |                          |                           |                             |                  |                         | 3a(i)           |        |
|        | (ii) related organizations   |                               |                        |                          |                           |                             |                  |                         | 3a(ii)          |        |
|        | (ii) related organizations<br>If "Yes" to 3a(ii), are the related org        |                               |                        |                          |                           |                             |                  |                         | 3b              |        |
| 4      | Describe in Part XIV the intended u  |                               |                        |                          |                           |                             |                  |                         |                 |        |
| Par    | t VI Investments—Land, B   |                               |                        |                          | t. See I                  | -orm 990, Par               | t X, li          | ne 10.                  |                 |        |
|        | Description of investment  | (a)                           | Cost or ot<br>(investm |                          |                           | ost or other<br>sis (other) | (c) D            | epreciation             | (d) Book value  | e      |
| 1a     | Land   |                               |                        |                          |                           |                             |                  |                         |                 |        |
| b      | Buildings  |                               |                        |                          |                           |                             |                  |                         |                 |        |
| С      | Leasehold improvements   |                               |                        |                          |                           |                             |                  |                         |                 |        |
|        | Equipment  |                               |                        |                          |                           | 7,387                       |                  |                         | 28,514          |        |
|        | Other  |                               |                        |                          |                           | 2,208                       |                  |                         |                 |        |
| l ota  | I. Add lines 1a-1e. (Column (d) should                                       | equal Form                    | 990, Pa                | rτ X, colur              | nn (B), li                | ne 10(c).)                  |                  | ►                       |                 |        |

| Part VII              | nvestments-Other Securities                                 | . See Form 990, Part X,  | line 12.  |                |
|-----------------------|---|--------------------------|---|----------------|
| (a) Desc              | ription of security or category<br>Iuding name of security) | (b) Book value           | <b>(c)</b> Method of valu<br>Cost or end-of-year ma |                |
| Financial derivati    | ves and other financial products .                          |                          |   |                |
|                       | quity interests   |                          |   |                |
| Other                 |   |                          |   |                |
|                       |   |                          |   |                |
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|                       |   |                          |   |                |
|                       |   |                          |   |                |
| Total (Column (b) shi | ould equal Form 990, Part X, col. (B) line 12.) 🕨           |                          |   |                |
|                       | nvestments – Program Relate                                 | d. See Form 990, Part X. | line 13.  |                |
|                       | scription of investment type                                | (b) Book value           | (c) Method of valu                                  | lation:        |
| (-)                   |   | (-)                      | Cost or end-of-year ma                              |                |
|                       |   |                          |   |                |
|                       |   |                          |   |                |
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|                       |   |                          |   |                |
|                       | ould equal Form 990, Part X, col. (B) line 13.)             | d V line 45              |   |                |
| Part IX               | Other Assets. See Form 990, Pa                              | (a) Description          |   | (b) Book value |
|                       |   | (a) Description          |   | (b) DOOK value |
|                       |   |                          |   |                |
|                       |   |                          |   |                |
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| Total. (Column        | (b) should equal Form 990, Part X, col                      | . (B) line 15.)          |   |                |
| Part X                | Other Liabilities. See Form 990,                            | Part X, line 25.         |   |                |
|                       | (a) Description of liability                                | (b) Amount               | _   |                |
| Federal income        | e taxes   |                          | _   |                |
|                       |   |                          | _   |                |
|                       |   |                          | -   |                |
|                       |   |                          |   |                |
|                       |   |                          | -   |                |
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|                       |   |                          |   |                |
|                       |   |                          |   |                |
| Total. (Column (b) sh | ould equal Form 990, Part X, col. (B) line 25.) 🕨           |                          |   |                |

Schedule D (Form 990) 2008

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

| Schee     | dule D (Form 990) 2008  | Page 4         |
|-----------|---|----------------|
| Par       | t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen   | nts            |
| 1         | Total revenue (Form 990, Part VIII, column (A), line 12)  | 1              |
| 2         | Total expenses (Form 990, Part IX, column (A), line 25)   | 2              |
| 3         | Excess or (deficit) for the year. Subtract line 2 from line 1   | 3              |
| 4         | Net unrealized gains (losses) on investments  | 4              |
| 5         | Donated services and use of facilities  | 5              |
| 6         | Investment expenses   | 6              |
| 7         | Prior period adjustments  | 7              |
| 8         | Other (Describe in Part XIV)  | 8              |
| 9         | Total adjustments (net). Add lines 4–8  | 9              |
| 10<br>Dou | Excess or (deficit) for the year per financial statements. Combine lines 3 and 9  |                |
|           | t XII Reconciliation of Revenue per Audited Financial Statements With Revenu  |                |
| 1         | Total revenue, gains, and other support per audited financial statements  | · · ·          |
| 2         | Amounts included on line 1 but not on Form 990, Part VIII, line 12:   |                |
| a         |   | -              |
| b         |   |                |
| c<br>d    | Becoveries of prior year grants         2c           Other (Describe in Part XIV)         2d  |                |
|           |   | 2e             |
|           |   | 3              |
| 3<br>4    | Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b> :  |                |
| a         | Investment expenses not included on Form 990, Part VIII, line 7b . 4a   |                |
| b         | Other (Describe in Part XIV)  | -              |
| c         | Add lines <b>4a</b> and <b>4b</b>   | 4c             |
| 5         | Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)   | 5              |
| Pa        | t XIII Reconciliation of Expenses per Audited Financial Statements With Expen   | ses per Return |
| 1         | Total expenses and losses per audited financial statements  | 1              |
| 2         | Amounts included on line 1 but not on Form 990, Part IX, line 25:   |                |
| а         | Donated services and use of facilities  |                |
| b         | Prior year adjustments  |                |
| С         | Losses reported on Form 990, Part IX, line 25   | _              |
| d         | Other (Describe in Part XIV)  |                |
| е         | Add lines 2a through 2d   | 2e             |
| 3         | Subtract line <b>2e</b> from line <b>1</b>  | 3              |
| 4         | Amounts included on Form 990, Part IX, line 25, but not on line 1:  |                |
| а         | Investment expenses not included on Form 990, Part VIII, line 7b . 4a   | _              |
|           | Other (Describe in Part XIV)  |                |
| _         | Add lines <b>4a</b> and <b>4b</b>   | 4c             |
| 5<br>Dar  | Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)         t XIV       Supplemental Information   | 5              |
| Corr      | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. |                |
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| Schedule D (For | m 990) 2008              | Page 5      |
|-----------------|--------------------------|-------------|
|                 | Supplemental Information |             |
|                 | ouppiemental mornation   | (continued) |
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SCHEDULE G

(Form 990 or 990-EZ)

#### Department of the Treasury Internal Revenue Service

#### Name of the organization

# **Supplemental Information Regarding Fundraising or Gaming Activities**

► Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

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OMB No. 1545-0047

Public

Inspection Employer identification number

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- Mail solicitations а b
  - Email solicitations

- Solicitation of non-government grants е Solicitation of government grants
- f
- Phone solicitations С d In-person solicitations

- Special fundraising events g
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? 🗌 Yes 🗹 No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

| (i) Name of individual or entity (fundraiser)   | (ii) Activity      | custody o  | draiser have<br>r control of<br>outions? | (iv) Gross receipts<br>from activity | (v) Amount paid to<br>(or retained by)<br>fundraiser listed in<br>col. (i) | (vi) Amount paid to<br>(or retained by)<br>organization |
|---|--------------------|------------|--|--------------------------------------|--|---|
|   |                    | Yes        | No                                       |                                      |  |   |
| Independent Petroleum Associatio  | 410 17th Stree     |            |  | 700                                  | Denver CO 8020   | 84  |
| 0700841   | 303                |            |  | 623 0987                             | Marc W Smith   | ipams.org   |
|   | 1974               |            |  |                                      |  | 15  |
| 2,059,269   | 0                  |            |  | the responsible                      |  | 200   |
| СО  |                    |            |  | 1,013,217                            | 127  | IPAMS   |
| 915   |                    |            |  | 127                                  |  |   |
| 1,662,836   | 2,059,269          |            |  | 64,083                               | 40,719   | 1,769,256   |
| 2,159,374   | 0                  |            |  | 0                                    | 1,007,499  | 0   |
| 0   |                    |            |  | 649,228                              | 858,664  | 1,662,445   |
| Total   |                    |            | ►  | 0                                    | 1,899,688  | 2,659,486   |
| <ul> <li>3 List all states in which the organ registration or licensing.</li> <li>same as C above</li> <li>IPAMS is an organization of individ</li> </ul> | nization is regist | ered or li | censed to                                |                                      |  |   |
|   |                    |            |  |                                      |  | 993,002   |
|   |                    |            |  |                                      |  | 1,459,589<br>906,686                                    |
|   |                    |            |  |                                      |  | 1,199,897<br>1,866,163                                  |

106,811

293,211 0

| Sche            | edule  | G (Form 990 or 990-EZ) 2008                        |  |   |                         |                                      |                  | Pa          | age 2       |
|-----------------|--------|--|--|---|-------------------------|--------------------------------------|------------------|-------------|-------------|
| Ра              | nrt II | Fundraising Events. Co<br>more than \$15,000 on F  |  |   |                         |                                      | repo             | rted        |             |
|                 |        |  | <b>(a)</b> Event #1                    | (b) Event #2                                  | (c) Other Events        | (Add col.                            |                  | nts<br>ough |             |
|                 |        |  | (event type)                           | (event type)                                  | (total number)          | co                                   | ol. <b>(c)</b> ) |             |             |
| Revenue         |        |  |  |   |                         |                                      |                  |             |             |
| leve            | 1      | Gross receipts                                     | 215,500                                |   |                         |                                      |                  |             |             |
| ι.              | 2      | Less: Charitable contributions                     |  |   | 0                       |                                      |                  |             |             |
|                 | 3      | Gross revenue (line 1                              |  |   |                         |                                      |                  |             |             |
|                 |        | minus line 2)                                      | 215,500                                |   |                         |                                      | ;                | 215,        | 500         |
|                 | 4      | Cash prizes  | 0                                      |   |                         |                                      |                  |             | 0           |
| sesu            | 5      | Non-cash prizes                                    | 0                                      |   |                         |                                      |                  |             | 0           |
| Direct Expenses | 6      | Rent/facility costs                                | 157,029                                |   |                         |                                      |                  | 157,        | 029         |
| Direct          | 7      | Other direct expenses                              | 0                                      |   |                         |                                      |                  |             | 0           |
|                 | 8      | Direct expense summary. Ad                         |  |   |                         | (                                    | 1                | 57,0        | <b>29</b> ) |
|                 | 9      | Net income summary. Comb                           |  | mn (d)  |                         |                                      |                  |             | 471         |
| Pa              | rt II  | Gaming. Complete if t<br>than \$15,000 on Form     | he organization answ<br>990-EZ line 6a | vered "Yes" to Form                           | 990, Part IV, line 19,  | or repo                              | rted i           | mor         | е           |
| nue             |        |  | (a) Bingo                              | (b) Pull tabs/Instant bingo/progressive bingo | (c) Other gaming        | <b>(d)</b> Tota<br>col. <b>(a)</b> t |                  |             |             |
| Revenue         |        |  |  |   |                         |                                      |                  |             |             |
| <u>ш</u>        | 1      | Gross revenue                                      |  |   |                         |                                      |                  |             |             |
| ses             | 2      | Cash prizes  |  |   |                         |                                      |                  |             |             |
| Expen           | 3      | Non-cash prizes                                    | 28,514                                 |   |                         |                                      |                  |             |             |
| Direct Expenses | 4      | Rent/facility costs                                |  |   |                         |                                      |                  |             |             |
|                 | 5      | Other direct expenses .                            |  |   |                         |                                      |                  |             |             |
|                 | -      |  | □ Yes%                                 | ☐ Yes%  | □ Yes%                  |                                      |                  |             |             |
|                 | 6      | Volunteer labor                                    | □ No                                   | □ No  | □ No                    |                                      |                  |             |             |
|                 | 7      | Direct expense summary. Ad                         | d lines 2 through 5 in co              | olumn (d)                                     |                         | (                                    |                  |             | )           |
|                 | 8      | Net gaming income summary                          | . Combine lines 1 and                  | 7 in column (d)                               |                         |                                      |                  |             |             |
|                 |        |  |  |   | ·                       |                                      | Y                | ′es         | No          |
| 9               |        | ter the state(s) in which the o                    |  | -   |                         |                                      | 0-               |             |             |
| a<br>b          |        | the organization licensed to c<br>'No," Explain:   | perate gaming activities               | s in each of these state                      | es?                     |                                      | 9a               |             |             |
| b               |        |  |  |   |                         |                                      |                  |             |             |
|                 |        |  |  |   |                         |                                      |                  |             |             |
|                 |        | ere any of the organization's o<br>'Yes," Explain: | aming licenses revoke                  | d, suspended or termin                        | ated during the tax yea | r? 1                                 | 10a              |             |             |
|                 |        |  |  |   |                         |                                      |                  |             |             |
| 11              | Do     | es the organization operate g                      | aming activities with no               | onmembers?                                    |                         | · . [                                | 11               |             |             |
| 12              | ls     | the organization a grantor, be                     | eneficiary or trustee of a             | a trust or a member of                        | a partnership or other  | -                                    |                  |             |             |
|                 | for    | med to administer charitable                       | gaming?                                | <u></u>                                       | <u> </u>                | _ · '                                | 12               |             |             |

Schedule G (Form 990 or 990-EZ) 2008

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|     |  |     | Yes | No |
|-----|--|-----|-----|----|
| 13  | Indicate the percentage of gaming activity operated in:  |     |     |    |
| а   | The organization's facility  |     |     |    |
| b   | An outside facility  | -   |     |    |
| 14  | Provide the name and address of the person who prepares the organization's gaming/special events books and records:  |     |     |    |
|     | Name ►   |     |     |    |
|     | Address ►  |     |     |    |
| 15a | Does the organization have a contract with a third party from whom the organization receives gaming revenue?   | 15a |     |    |
| b   | If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$                                   |     |     |    |
| с   | If "Yes," enter name and address:  |     |     |    |
|     | Name   |     |     |    |
|     | Address  |     |     |    |
| 16  | Gaming manager information:  |     |     |    |
|     | Name   |     |     |    |
|     | Gaming manager compensation <b>&gt;</b> \$   |     |     |    |
|     | Description of services provided   |     |     |    |
|     | Director/officer Employee Independent contractor   |     |     |    |
| 17  | Mandatory distributions:   |     |     |    |
| а   | Is the organization required under state law to make charitable distributions from the gaming proceeds to  |     |     |    |
|     | retain the state gaming license?   | 17a |     |    |
| b   | Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ |     |     |    |

Schedule G (Form 990 or 990-EZ) 2008

| SCHEDULE O<br>(Form 990)                               | Supplemental Information to Form 99   | OMB No. 1545-0047                 |
|--|---|-----------------------------------|
| (Form 990)   |   |                                   |
| Department of the Treasury<br>Internal Revenue Service | Attach to Form 990. To be completed by organizations to provide<br>additional information for responses to specific questions for the<br>Form 990 or to provide any additional information. |                                   |
| Name of the organization                               |   | Employer identification number    |
|  | 0700841   | 0700841                           |
| Part VI Section A Li                                   | ne 1a The Board of Directors delegates to the Executive Committee a   | uthority to act on its behalf as  |
|  | 84  |                                   |
|  |   |                                   |
|  |   |                                   |
|  |   |                                   |
|  |   |                                   |
|  |   |                                   |
|  |   |                                   |
| Part VI Section B Li                                   | ne 12c Decisions that would be affected by conflicts of interest are o  | nly undertaken by the Executive   |
| Committee, and are                                     | e carefully considered for potential conflicts before action is taken.  |                                   |
| Part VI Section B Li                                   | ne 15b Three independent Board members including the President, t   | he Treasurer and a former         |
| President, compris                                     | se the compensation committee. None of these Board members have   | a conflict of interest as defined |
| Independent Petrole                                    | um Association of Mountain States   |                                   |
| organization. In e                                     | stablishing the total compensation amounts, they reviewed data for s  | imilarly qualified persons        |
| in functionally con                                    | nparable positions at similarly situated trade and other associations.  | In addition, they considered      |
| overall industry en                                    | nployment conditions because of their relevancy. All of these consid  | lerations that eventually led to  |
| the final determina                                    | tion of the compensation amounts were contemporaneously docume  | ented and retained.               |
| Part VI Section C Li                                   | ne 19 the organization makes its governing documents, conflict of in  | terest policy, and financial      |
| statements availat                                     | ble to the public upon request.   |                                   |
|  |   |                                   |
|  |   |                                   |
|  |   |                                   |
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|  |   |                                   |
|  |   |                                   |

| Schedule O (Form 990) 2008  | Page                              |
|---|-----------------------------------|
| Name of the organization  | Employer identification number    |
|   | IPAM: the responsible developm    |
|   |                                   |
|   |                                   |
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|   |                                   |
|   |                                   |
| Monitor current industry developments, issues, and legislation. Distribute weekly new | wsletter (to approximately 1,200) |
| and other frequent communications to keep members and press informed.                 |                                   |
| and other frequent communications to keep members and press mormed.                   |                                   |
|   |                                   |
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|   |                                   |
| Annual meeting - present speakers from industry to inform membership, provide a for   | rum for members to discuss        |
|   |                                   |
| issues, and conduct the Organization's business - attendance of approximately 400     |                                   |
|   |                                   |
|   |                                   |
|   |                                   |
|   |                                   |
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|   |                                   |
|   |                                   |
|   |                                   |
|   |                                   |

# **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

#### **Purpose of Schedule**

Schedule O (Form 990) is used by an organization that files Form 990 to provide the IRS with narrative information required for responses to specific questions on Form 990, or to explain the organization's operations or responses to various questions. It allows organizations to supplement information reported on Form 990.

## Who Must File

All organizations that file Form 990 must file Schedule O (Form 990). At a minimum, the schedule must be used to answer Form 990, Part VI, lines 10 and 19. If an organization is not required to file Form 990 but chooses to do so, it must file a complete return and provide all of the information requested, including the required schedules.

# **Specific Instructions**

Use as many continuation sheets of Schedule O (Form 990) as needed.

Complete the required information on the appropriate line of Form 990 or its schedules prior to using Schedule O (Form 990).

Identify clearly the specific part and line(s) of Form 990 or its schedule(s) to which each response relates. Follow the part and line sequence of Form 990 or the part and line sequence of its schedule(s).

*Late return.* If the return is not filed by the due date (including any extension granted), use Schedule O (Form 990) to provide a statement giving the reasons for not filing on time. **Amended return.** If the organization checked the *Amended Return* box on Form 990, line B, use Schedule O (Form 990) to list each part or schedule and line item of the Form 990 that was amended.

**Group return.** If the organization answered "Yes" to Form 990, line H(a) but "No" to line H(b), use a separate attachment to list the name, address, and EIN of each affiliated organization included in the group return. **Do not use** this schedule. See the Instructions for Form 990, *I. Group Return.* 

**Parts III, V, VI, VII, and XI.** Use Schedule O (Form 990) to provide any narrative information required for the following questions.

1. Part III, Statement of Program Service Accomplishments.

a. "Yes" response to line 2.

b. "Yes" response to line 3.

c. Other program services on line 4d.

2. "No" response to Part V, Statements Regarding Other IRS Filings and Tax Compliance, line 3b.

3. Part VI, Governance, Management, and Disclosure.

a. Material differences in voting rights in line 1a.

b. "Yes" responses to lines 2-7.

c. "No" responses to lines 8 or 9b.

d. Description of process for review, if any, on line 10.

e. "Yes" response to line 11.

f. "Yes" response to line 12c.

g. Description of process for determining compensation on lines 15a and 15b.

h. Description for making documents public on lines 18 and 19.

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

a. Estimate of average hours per week, if any, devoted to related organizations for which compensation was reported in columns (E) or (F).

b. Description of reasonable efforts undertaken in regard to column (E).

5. Part XI, Financial Statements and Reporting.

a. Change in accounting method or description of other accounting method used on line 1.

b. Change in committee oversight review from prior year on line 2c.

c. "No" response to line 3b.

**Schedule G (Form 990 or 990-EZ).** If applicable, use Schedule O (Form 990) to describe payments of fundraising expenses or reimbursements as required in Part 1, line 2b, column (v).

Schedule K (Form 990). If applicable, use Schedule O (Form 990) to describe the organization's use of alternative 12-month reporting periods with respect to bond issues reported on Schedule K (Form 990).

Schedule L (Form 990 or 990-EZ). Use Schedule O (Form 990) if additional space is needed to report information required by Schedule L (Form 990 or 990-EZ).

**Schedule R (Form 990).** Use Schedule O (Form 990) to provide the group exemption relationships described on Schedule R (Form 990).

**Other.** Use Schedule O (Form 990) to provide narrative explanations and descriptions to other specific questions. The narrative provided should refer and relate to a particular line and response on the form.

# **Continuation Sheet for Form 990**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

2008 **Open to Public** Inspection

Name of the Organization

Employer Identification number

| Part I Continuation of Officers, D<br>Employees                              | irectors, Tru             | stee                              | es, I                 | Key | ' Er         | nplo                         | yee            | s, and Highe                              | est Compensa  | ted  |
|--|---------------------------|-----------------------------------|-----------------------|-----|--------------|------------------------------|----------------|---|---|--|
| (A)  | (B)                       |                                   |                       | (   | C)           |                              |                | (D)                                       | (E)   | (F)  |
| Name and Title   | Average hours<br>per week |                                   | · ·                   |     | k all        | that ap<br>empl              | ply)<br>Former | Reportable<br>compensation<br>from<br>the | Reportable<br>compensation<br>from related<br>organizations | Estimated<br>amount of<br>other<br>compensation          |
|  |                           | Individual trustee<br>or director | Institutional trustee | er  | Key employee | Highest compensated employee | er             | organization<br>(W-2/1099-MISC)           | (W-2/1099-MISC)   | from the<br>organization<br>and related<br>organizations |
| Independent Petroleum Association of Mo<br>Banking & Finance Committee Chair | 410 17th Stre             |                                   |                       |     |              |                              |                | 700                                       | Denver CO 8   | 84   |
| 0700841  |                           |                                   |                       |     |              |                              |                |   |   |  |
| Communications Committee Chair   | 303                       |                                   |                       |     |              |                              |                | 623 0987                                  | Marc W Smith  | ipams.org  |
| Crude Oil Committee Chair  | 1974                      |                                   |                       |     |              |                              |                |   | the responsibl  |  |
| Natural Gas Committee Chair  |                           | ~                                 |                       |     |              |                              |                |   |   |  |
| Natural Gas Committee Chair  | 127                       | ~                                 |                       |     |              |                              |                |   | 15  | 200  |
| 915<br>Service and Supply Committee Chair                                    | 0                         | ~                                 |                       |     |              |                              |                | IPAMS                                     | same as C abc   | 2,059,269  |
| IPAMS is an organization of individuals an<br>Tax Committee Chair            |                           | ~                                 |                       |     |              |                              |                |   | 1,662,836   | 2,059,269  |
| 64,083<br>Transportation & Markets Committee Cha                             | 40,719                    | ~                                 |                       |     |              |                              |                | 1,769,256                                 | 2,159,374   |  |
| 0  |                           |                                   |                       |     |              |                              |                | .,,                                       |   |  |
| At-Large   | 0                         | ~                                 |                       |     |              |                              |                | 1,013,217                                 | 1,007,499   | (  |
| At-Large   |                           | ~                                 |                       |     |              |                              |                | 649,228                                   | 858,664   | 1,662,44   |
| At-Large   | 1,899,688                 | ~                                 |                       |     |              |                              |                | 2,659,486                                 | 993,002   | 1,459,58   |
| 906,686  |                           |                                   |                       |     |              |                              |                |   |   |  |
| At-Large   | 1,199,897                 | <b>v</b>                          |                       |     |              |                              |                | 1,866,163                                 | 106,811   | CC   |
| At-Large   | 293,211                   | ~                                 |                       |     |              |                              |                |   |   |  |
| At-Large   | 42,337                    | ~                                 |                       |     |              |                              |                | 59,386                                    | 6   |  |
| At-Large   |                           | ~                                 |                       |     |              |                              |                |   |   |  |
| Todd Berryman  |                           |                                   |                       |     |              |                              |                |   |   |  |
| At-Large   | .25                       | ~                                 |                       |     |              |                              |                | 0   |   | (  |
| At-Large   | .25                       | ~                                 |                       |     |              |                              |                | 0   | 0   |  |
| Rob Bilger   | 05                        |                                   |                       |     |              |                              |                |   |   |  |
| At-Large   | .25                       | ~                                 |                       |     |              |                              |                | 0   | 0   |  |
| At-Large   | .25                       | ~                                 |                       |     |              |                              |                |   | 0   |  |
| Jim Brown  |                           |                                   |                       |     |              |                              |                |   |   |  |
| At-Large   | .25                       | ~                                 | <u> </u>              |     |              |                              |                | 0   | 0   |  |
| At-Large<br>For Privacy Act and Paperwork Reduction Act I                    |                           | V                                 |                       |     |              |                              |                |   | 0   |  |

# **Continuation Sheet for Form 990**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

2008 Open to Public Inspection

Name of the Organization

Employer Identification number

| Part I Continuation of Officers, D<br>Employees                                 | irectors, Tru             | stee                                | s, I                     | Key | ' Er | nplo                              | yee    | es, and Highe  | est Compensa   | ted   |
|---|---------------------------|-------------------------------------|--------------------------|-----|------|-----------------------------------|--------|--|--|---|
| (A)   | (B)                       |                                     |                          | ((  | C)   |                                   |        | (D)  | (E)  | (F)   |
| Name and Title  | Average hours<br>per week | Poindividual trustee<br>or director | io Institutional trustee |     |      | that Highest compensated employee | Former | Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | Reportable<br>compensation<br>from related<br>organizations<br>(W-2/1099-MISC) | Estimated<br>amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| Independent Petroleum Association of Mc<br>Banking & Finance Committee Chair    | 410 17th Stre             |                                     |                          |     |      |                                   |        | 700  | Denver CO 8  | 8   |
| 0700841<br>Communications Committee Chair                                       | 303                       |                                     |                          |     |      |                                   |        | 623 0987   | Marc W Smith   | ipams.or  |
| Crude Oil Committee Chair   | 1974                      |                                     |                          |     |      |                                   |        |  | the responsibl   |   |
| Natural Gas Committee Chair<br>127  |                           | ~                                   |                          |     |      |                                   |        |  |  |   |
| Natural Gas Committee Chair<br>915  | 127                       | ~                                   |                          |     |      |                                   |        |  | 15   | 20  |
| Service and Supply Committee Chair<br>IPAMS is an organization of individuals a | 0                         | ~                                   |                          |     |      |                                   |        | IPAMS  | same as C abc  | 2,059,26  |
| Tax Committee Chair<br>64,083   |                           | ~                                   |                          |     |      |                                   |        |  | 1,662,836  | 2,059,26  |
| Transportation & Markets Committee Cha<br>0                                     | 40,719                    | ~                                   |                          |     |      |                                   |        | 1,769,256  | 2,159,374  |   |
| At-Large<br>0   | 0                         | ~                                   |                          |     |      |                                   |        | 1,013,217  | 1,007,499  |   |
| At-Large<br>0   |                           | ~                                   |                          |     |      |                                   |        | 649,228  | 858,664  | 1,662,44  |
| At-Large 906,686  | 1,899,688                 | ~                                   |                          |     |      |                                   |        | 2,659,486  | 993,002  | 1,459,58  |
| At-Large  | 1,199,897                 | <b>v</b>                            |                          |     |      |                                   |        | 1,866,163  | 106,811  | C   |
| At-Large<br>At-Large  | 293,211<br>42,337         | ~                                   |                          |     |      |                                   |        | 59,386   | 6  |   |
| At-Large  | 42,001                    | ~                                   |                          |     |      |                                   |        |  |  |   |
| Todd Berryman<br>At-Large   | .25                       | >                                   |                          |     |      |                                   |        | 0  |  |   |
| At-Large  | .25                       | ~                                   |                          |     |      |                                   |        | 0  | 0  |   |
| Rob Bilger<br>At-Large  | .25                       | ~                                   |                          |     |      |                                   |        | 0  | 0  |   |
| At-Large  | .25                       | ~                                   |                          |     |      |                                   |        |  | 0  |   |
| Jim Brown<br>At-Large   | .25                       | ~                                   |                          |     |      |                                   |        | 0  | 0  |   |
| At-Large  |                           | ~                                   |                          |     |      |                                   |        |  | 0  |   |

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

# **Continuation Sheet for Form 990**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

2008 Open to Public Inspection

Name of the Organization

Employer Identification number

| Part I Continuation of Officers, D<br>Employees                                 | irectors, Tru             | stee                                | s, I                     | Key | ' Er | nplo                              | yee    | es, and Highe  | est Compensa   | ted   |
|---|---------------------------|-------------------------------------|--------------------------|-----|------|-----------------------------------|--------|--|--|---|
| (A)   | (B)                       |                                     |                          | ((  | C)   |                                   |        | (D)  | (E)  | (F)   |
| Name and Title  | Average hours<br>per week | Poindividual trustee<br>or director | io Institutional trustee |     |      | that Highest compensated employee | Former | Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | Reportable<br>compensation<br>from related<br>organizations<br>(W-2/1099-MISC) | Estimated<br>amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| Independent Petroleum Association of Mc<br>Banking & Finance Committee Chair    | 410 17th Stre             |                                     |                          |     |      |                                   |        | 700  | Denver CO 8  | 8   |
| 0700841<br>Communications Committee Chair                                       | 303                       |                                     |                          |     |      |                                   |        | 623 0987   | Marc W Smith   | ipams.or  |
| Crude Oil Committee Chair   | 1974                      |                                     |                          |     |      |                                   |        |  | the responsibl   |   |
| Natural Gas Committee Chair<br>127  |                           | ~                                   |                          |     |      |                                   |        |  |  |   |
| Natural Gas Committee Chair<br>915  | 127                       | ~                                   |                          |     |      |                                   |        |  | 15   | 20  |
| Service and Supply Committee Chair<br>IPAMS is an organization of individuals a | 0                         | ~                                   |                          |     |      |                                   |        | IPAMS  | same as C abc  | 2,059,26  |
| Tax Committee Chair<br>64,083   |                           | ~                                   |                          |     |      |                                   |        |  | 1,662,836  | 2,059,26  |
| Transportation & Markets Committee Cha<br>0                                     | 40,719                    | ~                                   |                          |     |      |                                   |        | 1,769,256  | 2,159,374  |   |
| At-Large<br>0   | 0                         | ~                                   |                          |     |      |                                   |        | 1,013,217  | 1,007,499  |   |
| At-Large<br>0   |                           | ~                                   |                          |     |      |                                   |        | 649,228  | 858,664  | 1,662,44  |
| At-Large 906,686  | 1,899,688                 | ~                                   |                          |     |      |                                   |        | 2,659,486  | 993,002  | 1,459,58  |
| At-Large  | 1,199,897                 | <b>v</b>                            |                          |     |      |                                   |        | 1,866,163  | 106,811  | C   |
| At-Large<br>At-Large  | 293,211<br>42,337         | ~                                   |                          |     |      |                                   |        | 59,386   | 6  |   |
| At-Large  | 42,001                    | ~                                   |                          |     |      |                                   |        |  |  |   |
| Todd Berryman<br>At-Large   | .25                       | >                                   |                          |     |      |                                   |        | 0  |  |   |
| At-Large  | .25                       | ~                                   |                          |     |      |                                   |        | 0  | 0  |   |
| Rob Bilger<br>At-Large  | .25                       | ~                                   |                          |     |      |                                   |        | 0  | 0  |   |
| At-Large  | .25                       | ~                                   |                          |     |      |                                   |        |  | 0  |   |
| Jim Brown<br>At-Large   | .25                       | ~                                   |                          |     |      |                                   |        | 0  | 0  |   |
| At-Large  |                           | ~                                   |                          |     |      |                                   |        |  | 0  |   |

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

# **Continuation Sheet for Form 990**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

2008 Open to Public Inspection

Name of the Organization

Employer Identification number

| Part I Continuation of Officers, D<br>Employees                                 | irectors, Tru             | stee                                | s, I                     | Key | ' Er | nplo                              | yee    | es, and Highe  | est Compensa   | ted   |
|---|---------------------------|-------------------------------------|--------------------------|-----|------|-----------------------------------|--------|--|--|---|
| (A)   | (B)                       |                                     |                          | ((  | C)   |                                   |        | (D)  | (E)  | (F)   |
| Name and Title  | Average hours<br>per week | Poindividual trustee<br>or director | io Institutional trustee |     |      | that Highest compensated employee | Former | Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | Reportable<br>compensation<br>from related<br>organizations<br>(W-2/1099-MISC) | Estimated<br>amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| Independent Petroleum Association of Mc<br>Banking & Finance Committee Chair    | 410 17th Stre             |                                     |                          |     |      |                                   |        | 700  | Denver CO 8  | 8   |
| 0700841<br>Communications Committee Chair                                       | 303                       |                                     |                          |     |      |                                   |        | 623 0987   | Marc W Smith   | ipams.or  |
| Crude Oil Committee Chair   | 1974                      |                                     |                          |     |      |                                   |        |  | the responsibl   |   |
| Natural Gas Committee Chair<br>127  |                           | ~                                   |                          |     |      |                                   |        |  |  |   |
| Natural Gas Committee Chair<br>915  | 127                       | ~                                   |                          |     |      |                                   |        |  | 15   | 20  |
| Service and Supply Committee Chair<br>IPAMS is an organization of individuals a | 0                         | ~                                   |                          |     |      |                                   |        | IPAMS  | same as C abc  | 2,059,26  |
| Tax Committee Chair<br>64,083   |                           | ~                                   |                          |     |      |                                   |        |  | 1,662,836  | 2,059,26  |
| Transportation & Markets Committee Cha<br>0                                     | 40,719                    | ~                                   |                          |     |      |                                   |        | 1,769,256  | 2,159,374  |   |
| At-Large<br>0   | 0                         | ~                                   |                          |     |      |                                   |        | 1,013,217  | 1,007,499  |   |
| At-Large<br>0   |                           | ~                                   |                          |     |      |                                   |        | 649,228  | 858,664  | 1,662,44  |
| At-Large 906,686  | 1,899,688                 | ~                                   |                          |     |      |                                   |        | 2,659,486  | 993,002  | 1,459,58  |
| At-Large  | 1,199,897                 | <b>v</b>                            |                          |     |      |                                   |        | 1,866,163  | 106,811  | C   |
| At-Large<br>At-Large  | 293,211<br>42,337         | ~                                   |                          |     |      |                                   |        | 59,386   | 6  |   |
| At-Large  | 42,001                    | ~                                   |                          |     |      |                                   |        |  |  |   |
| Todd Berryman<br>At-Large   | .25                       | >                                   |                          |     |      |                                   |        | 0  |  |   |
| At-Large  | .25                       | ~                                   |                          |     |      |                                   |        | 0  | 0  |   |
| Rob Bilger<br>At-Large  | .25                       | ~                                   |                          |     |      |                                   |        | 0  | 0  |   |
| At-Large  | .25                       | ~                                   |                          |     |      |                                   |        |  | 0  |   |
| Jim Brown<br>At-Large   | .25                       | ~                                   |                          |     |      |                                   |        | 0  | 0  |   |
| At-Large  |                           | ~                                   |                          |     |      |                                   |        |  | 0  |   |

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