${\color{blue} COMMITTEE\ ON\ NATURAL\ RESOURCES} \\ {\color{blue} 113^{th}\ Congress\ Disclosure\ Form} \\ As\ required\ by\ and\ provided\ for\ in\ House\ Rule\ XI,\ clause\ 2(g)\ and}$ the Rules of the Committee on Natural Resources

Full Committee Oversight hearing on "DOI Hydraulic Fracturing Rule: A Recipe for Government Waste, Duplication and Delay." May 8, 2013

Fo	or Individuals:
1.	Name:
2.	Address:
3.	Email Address:
4.	Phone Number:
	* * * *
Fo	or Witnesses Representing Organizations:
	1. Name: John A. Byrom
	 Name of Organization(s) You are Representing at the Hearing: D.J. Simmons, Inc. Western Energy Alliance
	3. Business Address: 1009 Ridgeway Place, Farmington, NM 87401 410 17 th Street, Suite 700, Denver, CO 80202
	4. Business Email Address: jbyrom@djsimmons.com
	5. Business Phone Number:

505-326-3753 303-623-0987

For all Witnesses

Name/Organization_John A. Byrom, D.J. Simmons, Inc. and Western Energy Alliance
Title/Date of Hearing: Oversight hearing on "DOI Hydraulic Fracturing Rule: A Recipe for Government Waste, Duplication and Delay." May 8, 2013

- 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. in Mechanical Engineering, Texas A&M University, 1988
- 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.
- 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.

President and CEO of D.J. Simmons, Inc., an oil and gas exploration and development company

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.

Various Federal oil and gas leases located in NM, CO, and UT

- 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. A list of all federal lawsuits filed against you by the federal government in the current year and the previous four years, giving the name of the lawsuit, the subject matter of the lawsuit, and the federal statutes under which the lawsuits were filed.
- g. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

Witnesses Representing Organizations

Name/Organization_John A. Byrom, D.J. Simmons, Inc. and Western Energy Alliance
Title/Date of Hearing: Oversight hearing on "DOI Hydraulic Fracturing Rule: A Recipe for Government Waste, Duplication and Delay." May 8, 2013

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

President of D.J. Simmons, Inc.; Member of the Board of Advisors for Western Energy Alliance

i. 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).

Various Federal oil and gas leases located in NM, CO, and UT

j. 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 10th Circuit Court of Appeals.

American Petroleum Institute v. U.S. Environmental Protection Administration Case No. 12-1405. This petition requests review of the final rule of the EPA's regulation published in the Federal Register at 77 Fed. Reg. 49,490 (Aug. 16, 2012) entitled "Oil and Natural Gas Sector: New Source Performance Standards and National Emission Standard for Hazardous Air Pollutants Reviews."

- k. A list of all federal lawsuits filed against the organization(s) you represent at the hearing by the federal government in the current year and the previous four years, giving the name of the lawsuit, the subject matter of the lawsuit, and the federal statutes under which the lawsuits were filed.
- 1. 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)).

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Α	For the	2011 cale	ndar	year, or tax ye	ar beginn	ing		, 2	011, ar	nd endir	ng			, 20	
В	Check if	applicable:	C Na	me of organizatior	Į.							┒▫	Employ	er identification number	
	Address		Doi	ing Business As											
\Box		Ü			r P O hox i	if mail is	not delivered to str	eet addres	(2	Room/su	ıite	− 1₽	Telepho	ne number	
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Ц	Termina	ted	City	y or town, state or	country, ar	na ZIP +	4								
Ш	Amende											G	Gross re	eceipts \$	
	Applicat	ion pending	F Nar	me and address of	principal o	fficer:					H(a) Is	this a gi	roup return	for affiliates? Yes No	0
											H(b) A	re all a	ıffiliates ir	ncluded? 🗌 Yes 🗌 No	0
ī	Tax-exe	mpt status:		501(c)(3)	<u></u> 501((c) () ◀ (insert no.)	4947(a)((1) or [527		f "No,	" attach a	a list. (see instructions)	
J	Website					. ,		()			H(c) G	roup e	exemption	n number ▶	
K	Form of	organization:	ПСс	prporation Trus	t Asso	ociation	Other ▶		L Year	r of forma				of legal domicile:	
_	art I	Summ													
	1			ne the organiz	ation's m	iccion	or most signific	ant activ	vitios:						
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e															
an															
Activities & Governance	_	Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.													
<u>§</u>	2				_		-			-			1 1	its net assets.	
∞ ∞	3			-	_		g body (Part V						3		
es	4	Number	of inc	dependent vot	ing mem	bers of	f the governing	body (Pa	art VI,	line 1b)			4		
ξ	5	Total nur	nber	of individuals	employe	d in ca	lendar year 20	11 (Part \	V, line	2a) .			5		
Ċŧ	6	Total nur	nber	of volunteers	estimate)	if nec	essary)						6		
⋖	7a	Total unr	elate	d business rev	enue fro	m Part	VIII, column (C	c), line 12	2 .				7a		
	b						m Form 990-T,	•					7b		
							,					r Yea		Current Year	
	8	Contributions and grants (Part VIII, line 1h)													
Щ	9		- '												
Revenue	10	-	am service revenue (Part VIII, line 2g)												
Be	10		ment income (Part VIII, column (A), lines 3, 4, and 7d) revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)												
	11			•						-					
	12						equal Part VIII,								
	13						olumn (A), lines	-		-					
	14	Benefits	paid	to or for mem	oers (Par	t IX, co	olumn (A), line 4	l)		[
S	15	Salaries,	other	compensation	, employe	ee bene	efits (Part IX, co	lumn (A),	lines 5	5–10)					
Expenses	16a	Profession	nal f	undraising fee	s (Part IX	ر, colur	nn (A), line 11e	e)		[
be	b	Total fun	drais	ing expenses	(Part IX,	columr	n (D), line 25)	•							
ш	17						1a-11d, 11f-2								
	18						al Part IX, colu	-	ine 25)	†					
	19	-			-	-	om line 12 .			· ·					
		110101100	1000	oxponede. ea	ou dot iii i	0 10 11			• •	• •	Beginning of	f Curr	ent Year	End of Year	
Net Assets or Fund Balances	20	Total acc	ete (l	Part X, line 16)						-					
Asse	21		,	(Part X, line 2											
e t	21				,	 									
_					s. Subtrac	Ct line 2	21 from line 20								
	art II	Signa													
							n, including accomp er) is based on all i							my knowledge and belief,	it is
	ie, correc	t, and comp	ete. D	eciaration of prep	arer (Other t	ilali Ollic	er) is based on air i	Illormation	OI WITICI	пртераге	i ilas aliy ki	TOWIEC	ige.		
Sig	_	Sign	ature o	of officer								Date			
He	ere														
		Туре	or pri	nt name and title											
D-	aid	Print/Ty	pe pre	parer's name		Prep	parer's signature			D	ate		Check	if PTIN	
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Us	se Onl												EIN ►		
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IVIC	ay ule If	าง นเรียนร	ว เกเร	ı eturi With tr	e prepar	CI 2010/	wii above ((See	ะแรนเนต	.10115)					Yes N	O

Form 990 (2011) Page **2**

Part		ervice Accomplishments iins a response to any question in this I	Part III	\square
1	Briefly describe the organization's			·
2		ny significant program services during th		□ Yes □ No
3	•	ices on Schedule O. ducting, or make significant changes	, , ,	□ Yes □ No
	If "Yes," describe these changes	on Schedule O.		
4	expenses. Section 501(c)(3) and	ram service accomplishments for each of 501(c)(4) organizations and section 49-the total expenses, and revenue, if any, for	47(a)(1) trusts are required to report	
4a	(Code:) (Expenses \$	including grants of \$		
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4-	(Code: \/\(\Gamma\)	including grants of th	\ /Devenue ¢	
4c	(Code) (Expenses \$	including grants of \$) (nevenue \$,
4d	Other program services (Describe	e in Schedule ().)		
	(Expenses \$ inclu	uding grants of \$) (Reve	nue \$	
4e	Total program service expense	s >		

Checklist of Required Schedules

Part IV

			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 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 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>	2		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	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</i> "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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		
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		
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, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		
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? If "Yes," complete Schedule F, Parts II and IV	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? If "Yes," complete Schedule G, Part I (see instructions)	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? If "Yes," complete Schedule G, Part III	19		
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	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 any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	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? If "Yes," complete Schedule J	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 lines 24b through 24d and complete Schedule K. If "No," go to line 25	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 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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</i> "Yes," <i>complete Schedule L, Part I</i>	24d 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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
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):			
a b	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV </i>	28a 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 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 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? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
36	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b 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,</i>	30		
38	Part VI	37		
	19? Note. All Form 990 filers are required to complete Schedule O	38		

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Part V	Statements Regarding Other IRS Filings and Tax Compliance	

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
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			
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 (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	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 instructions for 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?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	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).			
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		
b	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?	7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	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 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, 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.			
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 . [10b]			
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.)			
10-	,	10-		
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
b				
_	100			
C		4.4-		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

Form 990 (2011) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Nο 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent . 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during 8 the year by the following: 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 14 14 Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18

available for public inspection. Indicate how you made these available. Check all that apply.

Own website Another's website ☐ Upon request

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year.
- State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization: ▶

Form 990 (2011)	Page 7
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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 heither the organization hor	any related	a orga	anız	atio	n c	ompe	nsa	ited any curren	t officer, director	r, or trustee.
				(0	C)					
(A)	(B)	(B) Position			(D)	(E)	(F)			
Name and Title	Average	(do not check more than one			Reportable	Reportable	Estimated			
	hours per			dad		or/trust	ee)	compensation compensation from	amount of other	
	week (describe	or d	Ins	Officer	ē.	Hig em	Former	from the	related organizations	compensation
	hours for	ividi	titut	icer	/ em	hes: ploy	mer	organization	(W-2/1099-MISC)	from the
	related organizations	al t	ona		Key employee	t cor		(W-2/1099-MISC)		organization and related
	in Schedule	Individual trustee or director	Institutional trustee		/ee	npei				organizations
	O)	эе	stee			Highest compensated employee				
						ed				
(4)										
(1)										
(2)										
(3)										
(A)										
(4)										
(5)										
(6)										
(7)										
(7)										
(8)										
(9)										
(40)										
(10)										
(11)										
(11)										
(12)										
(13)										
(14)										
(14)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
	(A) Name and title	(B) Average hours per	officer and a director/trustee) compensation			(D) Reportable compensation from	(E) Reportabl compensation related		Estir	(F) Estimated amount of other				
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-M		compe fror orgar and i	ensation the nization related izations	ı
(15)		-												
(16)														
(17)		-												
(18)		-												
(19)														
(20)														
(21)														
(22)														
(23)														
(24)		-												
(25)														
1b c d	Sub-total	VII, Sectio	n A				•	> > >						
2	Total number of individuals (including but reportable compensation from the organic	not limited					above	e) w	ho received m	ore than \$10	00,000	of		
3	Did the organization list any former of employee on line 1a? <i>If</i> "Yes," complete of	ficer, direc						-	oloyee, or high			3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual											4		
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or ind		5		
Section	on B. Independent Contractors	· · · · · · · · · · · · · · · · · · ·							·			1 -		
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	ress							(B) Description of s	ervices	С	(C) compens	ation	
	Tabel country (1)	/:							1: 1: 1: 1:					
2	Total number of independent contractor received more than \$100,000 of compens							th	iose listed abo	ove) who				

Part	ΜШ	Statement of Revenue				
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ıts ıts	1a	Federated campaigns 1a				
ra l	b	Membership dues 1b				
Q, E	С	Fundraising events 1c				
ifts	d	Related organizations 1d				
n . G	e	Government grants (contributions) 1e				
Sir	f	All other contributions, gifts, grants,				
iğ je	'	and similar amounts not included above				
를						
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f: \$				
	h	Total. Add lines 1a–1f				
Program Service Revenue	_	Business Code				
eve	2a					
e œ	b					
Ş	С					
Ser	d					
а	е					
ogra	f	All other program service revenue .				
P	g	Total. Add lines 2a–2f				
	3	Investment income (including dividends, interest,				
		and other similar amounts) ▶				
	4	Income from investment of tax-exempt bond proceeds ►				
	5	Royalties				
		(i) Real (ii) Personal				
	6a	Gross rents				
	b	Less: rental expenses				
	С	Rental income or (loss)				
	d	Net rental income or (loss) ▶				
	7a	Gross amount from sales of (i) Securities (ii) Other				
		assets other than inventory				
	b	Less: cost or other basis				
		and sales expenses .				
	С	Gain or (loss)				
	d	Net gain or (loss)				
nue	8a	Gross income from fundraising				
Ş		events (not including \$				
Other Reven		of contributions reported on line 1c).				
ē		See Part IV, line 18 a				
₹	b	Less: direct expenses b				
		Net income or (loss) from fundraising events . ▶				
	9a	Gross income from gaming activities.				
		See Part IV, line 19 a				
	b	Less: direct expenses b				
		Net income or (loss) from gaming activities ▶				
	10a	Gross sales of inventory, less				
		returns and allowances a				
		Less: cost of goods sold b				
	С	Net income or (loss) from sales of inventory				
ĺ		Miscellaneous Revenue Business Code				
	11a					
	b					
	С					
	d	All other revenue				
	е	Total. Add lines 11a–11d				
	12	Total revenue. See instructions ▶				

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

_	Check if Schedule O contains a respon				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7 8	Other salaries and wages				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management				
b c	Legal				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а					
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e				
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
	<u> </u>	I .	I.	I.	

Part X Balance Sheet

		Dalailes Cilest			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key		T	
	,	employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
				3	
s	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)		6	
šet	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
•	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or		9	
	iva	other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b		10c	
	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)		16	
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
G	22	Payables to current and former officers, directors, trustees, key			
ţį	22	employees, highest compensated employees, and disqualified persons.			
Ε		Complete Part II of Schedule L		22	
Liabilities	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
	25	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		26	
		Organizations that follow SFAS 117, check here ▶ ☐ and complete			
es		lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets		27	
3ala	28	Temporarily restricted net assets		28	
d E	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.			
ts c	30	Capital stock or trust principal, or current funds		30	
se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .		32	
<u>f</u>	33	Total net assets or fund balances		33	
_	34	Total liabilities and net assets/fund balances		34	
		1 1			E 000 (2211)

Form 990 (2011) Page **12**

Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					
1 2	Total revenue (must equal Part VIII, column (A), line 12)	1 2				
3	Revenue less expenses. Subtract line 2 from line 1	3				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				
5	Other changes in net assets or fund balances (explain in Schedule O)	5				
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6				
Part	XII Financial Statements and Reporting					
	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," exp	olain i	_ 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?		t	2b		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov of the audit, review, or compilation of its financial statements and selection of an independent account			2c		
	If the organization changed either its oversight process or selection process during the tax year, exp Schedule O.	olain i	in			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year issued on a separate basis, consolidated basis, or both:	ar wer	e			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
За		forth i	n l			
o u	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 under	rgo th	ie l			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	_		3b		
				Form	990	(2011

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)

OMB No. 1545-0047 2010

Open to Public

Department of the Treasury Inspection Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements 2010, and ending For the 2010 calendar year, or tax year beginning . 20 C Name of organization Western Energy Alliance D Employer identification number Check if applicable: Doing Business As Address change 84 0700841 Number and street (or P.O. box If mail is not delivered to street address) Room/suite E Telephone number ✓ Name change 410 17th Street 700 303 623 0987 Initial return City or town, state or country, and ZIP + 4 ☐ Terminated Denver CO 80202-4428 G Gross receipts \$ Amended return F Name and address of principal officer: H(a) Is this a group return for affiliates? Yes No Application pending H(b) Are all affiliates included? Yes No. If "No," attach a list. (see instructions) 6) ◀ (insert no.) ☐ 4947(a)(1) or 501(c)(3) 501(c) (Tax-exempt status: Website: ▶ H(c) Group exemption number Form of organization: Corporation Trust Association Other 1974 M State of legal domicile: CO L Year of formation: Part I Summary Briefly describe the organization's mission or most significant activities: Western Energy Alliance is an organization of individuals and businesses dedicated to more efficiently exploring, developing, and producing oil and natural gas using environ-Activities & Governance mentally-sound methods, promoting their beneficial uses, and economic, environmental and energy security solutions, and providing representation, information, and education on issues affecting the industry at local, state and federal levels. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 123 Number of independent voting members of the governing body (Part VI, line 1b) 4 123 5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 12 Total number of volunteers (estimate if necessary) 6 150 Total unrelated business revenue from Part VIII, column (C), line 12 7a 956 Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Current Year** Contributions and grants (Part VIII, line 1h). 0 0 Revenue Program service revenue (Part VIII, line 2a) 1,900,025 2,077,560 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 18,069 18,619 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . (32,754)(2,499)12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,885,340 2,093,680 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1.062,361 1.133,179 Professional fundraising fees (Part IX, column (A), line 11e) 0 16a 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ 797,480 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 685,654 1,748,015 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,930,659 19 Revenue less expenses. Subtract line 18 from line 12 137,325 163,021 Beginning of Current Year End of Year Total assets (Part X, line 16) 2,625,609 2,921,935 21 Total liabilities (Part X, line 26) . . 1,288,387 1,421,693 22 Net assets or fund balances. Subtract line 21 from line 20 1,337,222 1,500,242 Part II Signature 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 Signature of officer Date Here Type or print name and title Print/Type preparer's name Preparer's signature Date Check | if Paid self-employed Preparer Firm's name Firm's EIN ▶ Use Only Firm's address ▶ Phone no

May the IRS discuss this return with the preparer shown above? (see instructions)

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: Western Energy Alliance is an organization of individuals and businesses dedicated to more efficiently exploring, developing, and producing oil and natural gas using environmentally-sound methods in the intermountain west, promoting the beneficial uses of oil natural gas, and the economic, environmental and energy security solutions provided, and representing, informing, and educating its members, the public, elected officials and regulatory agencies on issues affecting the industry at local, state and federal levels.
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	If "Yes," describe these new services on Schedule O. 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. 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 \$
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶

Part	IV Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		100	
	complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2		V
	candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	1	
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? If "Yes," complete Schedule D, Part I.	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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? If "Yes," complete Schedule D, Part IV	9		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.	10		
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	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	10	1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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		1
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	i	1
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E , .	13		1
14 a		14a		1
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? If "Yes," complete Schedule F, Parts I and IV	14b		1
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? If "Yes," complete Schedule F, Parts II and IV	15		1
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? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		1
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Form 9	90 (2010)		4 9	Page 4
Part	IV Checklist of Required Schedules (continued)			
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? If "Yes," complete Schedule I, Parts I and II	21	Yes	No V
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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	1	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
b	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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? If "Yes," complete Schedule L, Part I	24d 25a		1
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		1
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		1
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? If "Yes," complete Schedule L, Part III	27		1
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Ш	1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		1
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		1
35 a	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		1
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		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	

Part				
	Check if Schedule O contains a response to any question in this Part V	18 14	Yes	No No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 17			1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	1	
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 12			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
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	-		1
	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 Bank and Financial Accounts.			,
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		V
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	50		
ou	organization solicit any contributions that were not tax deductible?	6a	1	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	ou	_	
- 2	gifts were not tax deductible?	6b	1	
7	Organizations that may receive deductible contributions under section 170(c).	-	Ì	
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		
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		150	
е	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 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, 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.			
a	Did the organization make any taxable distributions under section 4966?	9a		-
10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		-
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 . 10b			
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	1		
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	-	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		-
-	IT "YOU " DOD IT THOU O HORM I'VE TO CONOR TROCK DOLUMENTE! IT "NO " DECUIDO ON OVALORATION IN CONOCULA II	17/12		1

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b b "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change			
	O. See instructions.			
	Check if Schedule O contains a response to any question in this Part VI	4 4	فالمالا	1
Secti	on A. Governing Body and Management		Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year 1a 123		163	140
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 123	1 1		
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	1	
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 governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	11	1
6	Does the organization have members or stockholders?	6	1	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	177		
	of the governing body?	7a	1	✓
ь 8	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		1
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		7 7 1	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co		
		40	Yes	No
10a b	Does the organization have local chapters, branches, or affiliates?	10a		V
	chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? .	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
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	1	
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	1	
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	1	
b	Other officers or key employees of the organization	15b	1	
160	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	with a taxable entity during the year?	16a		1
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		
Secti	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ▶ none Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 for public inspection. Indicate how you make these available. Check all that apply.)s only) ava	ilable
	☐ 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 and financial statements available to the public.	f inter	est p	olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: Sarah S Cornwell 410 17th Street Suite 700 Denver CO 80202	of the		
	~			

Part VII	Compensation of Officers, Directors, Trustee	es, 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.

(A)	(B)							(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	nstitutional trustee	Officer	Rey employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) James Schroeder	- 1							0	0	0
President	1	1	-	1						
(2) Tom Sheffield	.5							0	0	0
First Vice President	,3	1		1					0	
(3) Peter Dea	5							0	0	0
Second Vice President	, o	1		1				U	U	U
(4) Rebecca Watson Vice President Secretary	5	1		1				0	0	0
(5) Phil Doty Vice President Treasurer	- ,5	1		1				0	0	0
(6) George Solich	- 2									
Immediate Past President	5	1		1				0	0	0
(7) Fred Barrett							1	1		
Vice President	5	1		1				0	0	0
(8) Jay Ottson										
Vice President	5	1		1				0	0	0
(9) Jack Ekstrom	- C									
Vice President	5	1		1				0	0	0
(10) Ted Brown			-			-				
Vice President	5	1	L.	1				0	0	0
(11) Don DeCarlo	-						-			
Vice President	5	1		1				0	0	0
(12) Rich Frommer	-		-		1	-				
Vice President	5	1		1				0	0	0
(13) John Harpole	2									
Vice President	5	1		1				0	0	0
(14) Darryl Howard Vice President	5	1		1				0	0	0
(15) Jim Kleckner	0.00									
JVice President	5	1		1				0	0	0
(16) Don Law Vice President	5	1		,				0	0	0

week (describe hours for related organizations organizations organizations) Week (describe hours for related organizations organizations) Officer organization (w-2/1099-MISC) for organizations org	nount of other nipensation rom the nanization d related anizations
Vice President S	
Nice President	
Vice President	
(19) Rick McCullough	
Vice President S	
20) Brad Miller .5	
Vice President .5	
Vice President (22) Bobby Plowman Vice President (23) Chuck Stanley Vice President (24) Neal Stanley Vice President (25) Brian Wold Vice President (26) Duane Zavadil Vice President (27) John Benton Vice President (27) John Benton Vice President Events 15 V V 0 0 0 0 0 0 0 0 0 0 0	
Vice President (22) Bobby Plowman Vice President (23) Chuck Stanley Vice President (24) Neal Stanley Vice President (25) Brian Wold Vice President (26) Duane Zavadil Vice President (27) John Benton Vice President (28) Jeff Lang Vice President (28) Jeff Lang Vice President (28) Jeff Lang Vice President Crude Oil Markets Vice President Events Vice President Crude Oil Markets Vice President Vice Preside	
Vice President S	
Vice President (23) Chuck Stanley Vice President (24) Neal Stanley Vice President (25) Brian Wold Vice President (26) Duane Zavadil Vice President (27) John Benton Vice President Crude Oil Markets (28) Jeff Lang Vice President Events 1b Sub-total c Total from continuation sheets to Part VII, Section A 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 and related organizations greater than \$150,000? 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 3 Size President 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	
Vice President S	
(24) Neal Stanley .5	
Vice President S	
(25) Brian Wold .5	
Vice President .5 ✓ ✓ 0 0 (26) Duane Zavadil .5 ✓ ✓ 0 0 Vice President .5 ✓ ✓ 0 0 (27) John Benton .5 ✓ ✓ 0 0 Vice President Crude Oil Markets .5 ✓ ✓ 0 0 (28) Jeff Lang .5 ✓ ✓ 0 0 Vice President Events .5 ✓ ✓ 0 0 1b Sub-total .5 ✓ ✓ 0 0 c Total from continuation sheets to Part VII, Section A .5 684,807 0 0 d Total (add lines 1b and 1c) .5 684,807 0 0 0 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 list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 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	
Vice President .5 ✓ ✓ 0 0 (27) John Benton .5 ✓ ✓ 0 0 Vice President Crude Oil Markets .5 ✓ ✓ 0 0 (28) Jeff Lang .5 ✓ ✓ 0 0 Vice President Events .5 ✓ ✓ 0 0 1b Sub-total . .5 ✓ ✓ 0 0 c Total from continuation sheets to Part VII, Section A . 684,807 0 0 d Total (add lines 1b and 1c) . . 684,807 0 0 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 from 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 3 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	
Vice President V V V O O Vice President Crude Oil Markets .5 ✓ ✓ 0 0 (28) Jeff Lang .5 ✓ ✓ 0 0 Vice President Events .5 ✓ ✓ 0 0 1b Sub-total .5 ✓ ✓ 0 0 c Total from continuation sheets to Part VII, Section A .5 684,807 0 d Total (add lines 1b and 1c) .5 684,807 0 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 former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 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	
Vice President Crude Oil Markets .5 ✓ ✓ 0 0 (28) Jeff Lang .5 ✓ ✓ 0 0 Vice President Events .5 ✓ ✓ 0 0 1b Sub-total . 0 0 0 c Total from continuation sheets to Part VII, Section A . 684,807 0 d Total (add lines 1b and 1c) . 684,807 0 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 former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual . . . 3 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 3	
Vice President Crude Oil Markets ✓	
Vice President Events .5 ✓ ✓ 0 0 1b Sub-total 0 0 c Total from continuation sheets to Part VII, Section A 684,807 0 d Total (add lines 1b and 1c) 684,807 0 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 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	
1b Sub-total	
c Total from continuation sheets to Part VII, Section A	
d Total (add lines 1b and 1c)	57,22
 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 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	57,22
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	
employee on line 1a? If "Yes," complete Schedule J for such individual	
employee on line 1a? If "Yes," complete Schedule J for such individual	Yes No
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	
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such	1
	1
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	1
Section B. Independent Contractors	
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 compensation from the exemplestics.	of
compensation from the organization.	
(A) (B) (C) Name and business address Description of services Compet	
none	
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ zero	

Pari	WIII	Statement of Revenue			(A)	(B)	(C)	(D)
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns	1a	0				
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b	0				
ts, g	С	Fundraising events	1c	0				
gif	d	Related organizations	1d	0				
ns,	е	Government grants (contributions)	1e	0				
utio er s	f	All other contributions, gifts, grants,						
rib	175	and similar amounts not included above		0				
hon	g	Noncash contributions included in lines 1a		0				
_	h	Total. Add lines 1a-1f		Business Code	0			
nue	00	Dues and spansorships	+	900099	1,930,560	1,930,560	0	0
Seve.	2a b	Dues and sponsorships		900099	147,000	147,000	0	0
Se	1 1 1 1 1	Registration fees	7 7 7 7 7 7 9	900099	147,000	147,000	U	U
Program Service Revenue	d							
n S	e		200					
graı	f	All other program service revenu						
Pro	g	Total. Add lines 2a–2f	_		2,077,560			
	3	Investment income (including						
		and other similar amounts) .			18,619	0	0	18,619
	4	Income from investment of tax-exer	mpt boi	nd proceeds	0	0	0	0
	5	Royalties			0	0	0	0
		(i) Real	- 1	(ii) Personal				
	6a	Gross Rents	0	0				
- 90	b	Less: rental expenses	0	0				
0	С	Rental income or (loss)	0	0				
	d				0	0	0	0
	7a	Gross amount from sales of assets other than inventory (i) Securit	ies 0	(ii) Other				
	b	Less: cost or other basis and sales expenses .						
	2		0	0	100			
	C	Gain or (loss)			0	0	0	0
o)	d		΄ Γ		0	0		
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 10 See Part IV, line 18		154,000				
th	b	Less: direct expenses	-	157,455				
0	11	Net income or (loss) from fundra			(3,455)		(3,455)	0
	9a	Gross income from gaming activi See Part IV, line 19		0				
	b	Less: direct expenses	-	0				
		Net income or (loss) from gamin		ities ▶	0	0	0	0
	10a	Gross sales of inventory, returns and allowances		0				
1	b	Less: cost of goods sold	-	0				
	С	Net income or (loss) from sales of		ntory	0	0	0	0
		Miscellaneous Revenue		Business Code				
1	11a	Employment advertising		900099	956		956	
	b							
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d		1 P P P P P	956			
	12	Total revenue. See instructions			2,093,680	2,077,560	(2,499)	18,619

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (B) Program service (A) Total expenses (C) Management and (D) Fundraising Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . . 0 Grants and other assistance to individuals in 2 the U.S. See Part IV, line 22 0 Grants and other assistance to governments. 3 organizations, and individuals outside the U.S. See Part IV. lines 15 and 16 0 Benefits paid to or for members 0 5 Compensation of current officers, directors, trustees, and key employees 487,734 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 0 7 Other salaries and wages 499,293 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . 24,164 Other employee benefits 63,600 9 58,388 10 Fees for services (non-employees): 11 a Management 6,000 20,569 C Accounting 0 Lobbying 76,725 d Professional fundraising services. See Part IV, line 17 0 е Investment management fees 0 f 41,146 g Advertising and promotion 29,618 12 Office expenses 84,251 13 14 Information technology . . . 33,242 Royalties 15 0 96,757 16 21,968 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 323,407 20 0 21 0 22 Depreciation, depletion, and amortization . 22,449 6,651 23 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.) 7,248 a 11,526 b Training & Publications C d e 15,923 f All other expenses Miscellaneous Total functional expenses. Add lines 1 through 24f 1,930,659 25 Joint costs. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

	Balance Sheet	(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	51,540	1	176,06
2	Savings and temporary cash investments	2,445,451	2	2,660,69
3	Pledges and grants receivable, net	0	3	
4	Accounts receivable, net	29,937	4	4,70
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II of		8	
	Schedule L	0	5	
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		110	
	employers and sponsoring organizations of section 501(c)(9) voluntary		200	
	employees' beneficiary organizations (see instructions)	0	6	
7	Notes and loans receivable, net	0	7	
8	Inventories for sale or use	0	8	-
9	Prepaid expenses and deferred charges	55,228	9	43,4
10a	Land, buildings, and equipment: cost or			
30.7	other basis. Complete Part VI of Schedule D 10a 98,342			
b	Less: accumulated depreciation 10b 61,349	43,453	10c	36,9
11	Investments—publicly traded securities	0	11	
12	Investments—other securities. See Part IV, line 11	0	12	
13	Investments—program-related. See Part IV, line 11	0	13	
14	Intangible assets	0	14	
15	Other assets. See Part IV, line 11	0	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	2,625,609	16	2,921,9
17	Accounts payable and accrued expenses	150,835	17	412,0
18	Grants payable	0	18	
19	Deferred revenue	1,137,553	19	1,009,6
20	Tax-exempt bond liabilities	0	20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0	21	
22	Payables to current and former officers, directors, trustees, key			
2.0	employees, highest compensated employees, and disqualified persons.		100	
	Complete Part II of Schedule L	0	22	
23	Secured mortgages and notes payable to unrelated third parties	0	_	
24	Unsecured notes and loans payable to unrelated third parties	0	24	
25	Other liabilities. Complete Part X of Schedule D	0	25	
26	Total liabilities. Add lines 17 through 25	1,288,388	26	1,421,6
	Organizations that follow SFAS 117, check here ▶ ☐ and complete			
	lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	0	27	
28	Temporarily restricted net assets	0	28	
29	Permanently restricted net assets	0	29	
	Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds	0	30	
31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	
32	Retained earnings, endowment, accumulated income, or other funds .	0	32	
33	Total net assets or fund balances	1,337,221		1,500,2
	Total liabilities and net assets/fund balances	2,625,609	_	2,921,9

Page	12	

. [ný trý	1 4 4		Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI	Part
93,680	2,09		1	Total revenue (must equal Part VIII, column (A), line 12)	1
30,659	1,93		2	Total expenses (must equal Part IX, column (A), line 25)	2
3,021	16		3	Revenue less expenses. Subtract line 2 from line 1	3
37,221	1,33		4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4
0			5	Other changes in net assets or fund balances (explain in Schedule O)	5
				Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 3	6
00,242	1,50		6	column (B))	
		11411		Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII	Part
No	Yes				
			xplain in	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 Schedule O.	1
1		2a		Were the organization's financial statements compiled or reviewed by an independent accounta	2a
1		2b		Were the organization's financial statements audited by an independent accountant?	b
		2c		If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility of the audit, review, or compilation of its financial statements and selection of an independent a	С
			explain in	If the organization changed either its oversight process or selection process during the tax year Schedule O.	
			ear were	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the issued on a separate basis, consolidated basis, or both:	d
	0.8			☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	
1		3a	t forth in	As a result of a federal award, was the organization required to undergo an audit or audits as the Single Audit Act and OMB Circular A-133?	3a
-		3b		If "Yes," did the organization undergo the required audit or audits? If the organization did not required audit or audits, explain why in Schedule O and describe any steps taken to undergo su	b

Part	VII Section A. Officers, Directors, Tru (A) Name and title	(B) Average			(0	C)	Higher that ap		(D) Reportable	Employees (cor (E) Reportable		(F) Estimated
		hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	cor or ar	amount of other mpensation from the ganization nd related ganizations
(17)												
(18)												
(19)												
(20)												
(21)												
(22)												
(23)												
(24)												
(25)				P								
(26)												
(27)												
(28)												
c d	Sub-total	VII, Sectio						A A A	694,807		0	57,224
2	Total number of individuals (including bu reportable compensation from the organ		to th	ose	list	ted	above	e) w	ho received m	ore than \$100,0	000 in	
3	Did the organization list any former o employee on line 1a? If "Yes," complete	Schedule J	for st	ıch	ind	ivid	ual				. 3	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$	150,	000)? /	f "Ye	s,"	complete Sch	nedule J for su	ıch	
5	Did any person listed on line 1a receive of for services rendered to the organization											5
_	on B. Independent Contractors											
1	Complete this table for your five highest compensation from the organization.	compensat	ed ind	depe	end	ent	contr	act	ors that receive	ed more than \$	100,000	of
	(A) Name and business add	iress							(B) Description of s	ervices		C) ensation
-												
-						_						
2	Total number of independent contractor received more than \$100,000 in compens							o th	nose listed ab	ove) 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.

(A) Name and Title	(B) Average	Posit	ion (c			hat an	nha	(D)	(E) Reportable	(F) Estimated
Name and Thie	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	(check all that apply) Reportable	compensation from	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations			
(1) Sheridan Swords	.25							0	0	0
At-Large	.23	1						U	U	0
(2) Mark Thompson At-Large	.25	1						0	0	0
(3) Tom Tyree At-Large	.25	1		K				0	0	0
(4) Larry Van Ryan								- A	3,17	
At-Large	.25	1						0	0	0
(5) Vaughn Vennerberg At-Large	.25	1						0	0	0
(6) John Vering At-Large	.25	1						0	0	0
(7) Dick Weber At-Large	.25	1						0	0	0
(8) Barth Whitham At-Large	.25	1	F					0	.0	0
(9) Jack Wold At-Large	.25	1						0	0	0
(10) Mike Wozniak	.25		Ħ					0	0	0
At-Large (11) Paul Zecchi	.25	1	a					0	0	0
At-Large (12)		/						0	0	0
(13)								0	0	0
(14)					Ä			0	0	0
(15)								0		0
(16)										

0

0

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury 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.

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(a)(3) propriet that have NOT filed Form 5769 (election under section 501(b)): Complete Part II. P. De not complete Part III. A.

Name of organiza	ation			Employer ide	entification number
Western Energy	Alliance				84 0700841
Part I-A	Complete if the org	anization is exempt u	under section 501	(c) or is a section 527	organization.
		ganization's direct and in			
					\$
3 Voluntee	er hours				
Part I-B	Complete if the org	anization is exempt ι	under section 501	(c)(3).	
				on 4955 ▶	\$
				r section 4955 ▶	
				/ear?	
			6868888	etie ja se se se se se se	Yes No
	describe in Part IV.	and one of the same		(-)	47-1/01
		anization is exempt to ended by the filing orga		(c), except section 50	1(c)(3).
					s
		organization's funds con			~
	영영 기업 이 사람이 있다면 하는데 그렇게 되었다. 국제 기업	to the state of the second	the contract of the contract o		\$
3 Total exe	mpt function expendi	tures. Add lines 1 and	2. Enter here and	on Form 1120-POL.	\-25000000000000000000000000000000000000
line 17b					\$
4 Did the fill	ng organization file Fo	rm 1120-POL for this ye	ar?		Yes No
5 Enter the	names, addresses and	employer identification	number (EIN) of all se	ection 527 political organ	nizations to which the filing
					nization's funds. Also enter
					political organization, such
as a sepai	rate segregated fund o	r a political action comm	T addition	nai space is needed, prov	vide information in Part IV.
(a)	Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
	1				delivered to a separate political organization. If
					none, enter -0
(1)					
(2)	h				
(3)					
(4)					
(5)					
4.5					
(6)					

-				-
۲	а	а	e	1

Part	II-A Complete if the organization section 501(h)).	on is exempt ι	ınder section 50	01(c)(3) and file	d Form 5768 (ele	ction under
	heck ▶ ☐ if the filing organization be				e e e la c	
ВС	heck ▶ ☐ if the filing organization ch Limits on Lob (The term "expenditures" m	bying Expendit	ures		(a) Filing organization's totals	(b) Affiliated group totals
1a b	Total lobbying expenditures to influence Total lobbying expenditures to influence	e a legislative bo	dy (direct lobbying			
C	Total lobbying expenditures (add lines					
d	Other exempt purpose expenditures .					
e f	Total exempt purpose expenditures (ad Lobbying nontaxable amount. Enter columns.		A CONTRACTOR OF THE PROPERTY O			
	If the amount on line 1e, column (a) or (b) is	: The lobbying	nontaxable amoun	t is:		
	Not over \$500,000	20% of the an	nount 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 of	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.			/	
	(Some organizations that m	ear Averaging I ade a section 5	Period Under Sec 01(h) election do ctions for lines 2a	tion 501(h) not have to com	plete all of the five	Yes No
	Lobbyin	g Expenditures	During 4-Year Av	veraging Period	r r	
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))					
b						
	(150% of line 2a, column (e)) Total lobbying expenditures					
c	(150% of line 2a, column (e)) Total lobbying expenditures					

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)).

legisla referer a Volunt b Paid si c Media d Mailing e Publica f Grants g Direct	the year, did the filing organization attempt to influence foreign, national, state or local tion, including any attempt to influence public opinion on a legislative matter or idum, through the use of: eers?	Yes	No	Amou	int
legisla referer a Volunt b Paid si c Media d Mailing e Publica f Grants g Direct	tion, including any attempt to influence public opinion on a legislative matter or indum, through the use of: eers?				
b Paid si c Media d Mailing e Publica f Grants g Direct	aff or management (include compensation in expenses reported on lines 1c through 1i)? advertisements?				
c Media d Mailing e Publica f Grants g Direct	advertisements?				
c Media d Mailing e Publica f Grants g Direct	advertisements?				
d Mailing e Publice f Grants g Direct	s to members, legislators, or the public?				
e Publica f Grants g Direct					
f Grants g Direct					
g Direct	to other organizations for lobbying purposes?	===			
	contact with legislators, their staffs, government officials, or a legislative body?				
	demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	activities? If "Yes," describe in Part IV				
	Add lines 1c through 1i				
	e activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	" enter the amount of any tax incurred under section 4912				
	" enter the amount of any tax incurred by organization managers under section 4912				
	ling organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A	Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), (or se	ction	
	501(c)(6).	0.0	1 11	Ye	s No
4 10/202	the testicity all (000) as seems due a seed and stible by seems of			_	7.1
	substantially all (90% or more) dues received nondeductible by members?			1	1
	e organization make only in-house lobbying expenditures of \$2,000 or less?			2	1
	e organization agree to carryover lobbying and political expenditures from the prior year?			3	1
Part III-B	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, li "Yes."				
1 Dues,	assessments and similar amounts from members	. 1	1	1,5	930,560
2 Section	n 162(e) nondeductible lobbying and political expenditures (do not include amounts al expenses for which the section 527(f) tax was paid).	of			
a Curren	tyear		2a		170,624
	ver from last year		2b		0
			2c		170,624
	pate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3		289,584
4 If notice	es were sent and the amount on line 2c exceeds the amount on line 3, what portion of does the organization agree to carryover to the reasonable estimate of nondeductible lobby	the			
	litical expenditure next year?	ring			
5 Taxabl	e amount of lobbying and political expenditures (see instructions)		4		-
Part IV	Supplemental Information	1	5		0
Complete this	part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; a part for any additional information.	and P	art II-	B, line 1i. A	Also,

Schedule C (For	m 990 or 990-EZ) 2010	Page 4
Part IV	Supplemental Information (continued)	

	-	

SCHEDULE D (Form 990)

Name of the organization

Supplemental Financial Statements

OMB No. 1545-0047

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

Open to Public Inspection

Employer identification number

Western Energy Alliance 84 0700841 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year 1 2 Aggregate contributions to (during year) . 3 Aggregate grants from (during year) . . Aggregate value at end of year 4 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 to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes No Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b h Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

-			2
- 12	aa	е	~

Part	Organizations Maintaining (Collections of	Art, His	torica	al Treasures,	or Ot	her Similar A	ssets (con	tinued)
3	Using the organization's acquisition, a collection items (check all that apply):								
а	☐ Public exhibition		d		Loan or exchan	nge pro	grams		
b	☐ Scholarly research		е		Other		<u> </u>		
C	☐ Preservation for future generation								
4	Provide a description of the organization XIV.	on's collections	and expla	ain ho	w they further t	the org	janization's exe	mpt purpos	e in Part
5	During the year, did the organization sassets to be sold to raise funds rather t								□No
Part	IV Escrow and Custodial Arrar line 9, or reported an amount					answe	red "Yes" to F	orm 990, F	art IV,
1a	Is the organization an agent, trustee, included on Form 990, Part X?								□No
b	If "Yes," explain the arrangement in Par	t XIV and compl	ete the fo	llowir	ig table:		I A	Amount	
C	Beginning balance	WWW William	2 12 12 1		a un mate	10			
d	Additions during the year					1d			
е	Distributions during the year		4 4 4		4 4 1 4 4	1e	1		
f	Ending balance					1f			
2a	Did the organization include an amount						ina yaa	☐ Yes	☐ No
b	If "Yes," explain the arrangement in Par	t XIV.							
Par	Endowment Funds. Complet	te if the organiz	zation ar	swer	ed "Yes" to F	orm 9	90, Part IV, lin		
		(a) Current year	(b) Pri	or year	(c) Two years	s back	(d) Three years bac	k (e) Four ye	ears 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					- 1			
2	Provide the estimated percentage of th	e year end balar	ce held a	s:					
а	Board designated or quasi-endowment	>	%						
b	Permanent endowment ▶	%							
C	Term endowment ▶ %								
3a	Are there endowment funds not in the	possession of the	ne organiz	zation	that are held a	and ad	ministered for t	he	
	organization by:							Y	es No
	(i) unrelated organizations				4-1.0.000	9.19.1		3a(i)	
	(ii) related organizations							3a(ii)	1111
b	If "Yes" to 3a(ii), are the related organiz						والعالم أوالوال	3b	
4	Describe in Part XIV the intended uses								
Pari	VI Land, Buildings, and Equipr	nent. See Forn	n 990, P	art X,	line 10.				
	Description of investment	(a) Cost or of (investment)	mer warmer	(b) C	ost or other basis (other)		Accumulated epreciation	(d) Book	alue
1a	Land				1				
b	Buildings								
C	Leasehold improvements								
d	Equipment				74,868		39,120		35,748
е	Other				23,474		22,229		1,245
Total.	Add lines 1a through 1e. (Column (d) mu	ist equal Form 9	90, Part)	, colu	ımn (B), line 10	(c).)			36,993

Part VII	Investments—Other Securities.	See Form 990, Part X, line	e 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financia	al derivatives		
	held equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)		3 4	
(E)			
(F) (G)			
(H)			
(l)			
	(b) must equal Form 990, Part X, col. (B) line 12.) ▶		
Part VIII	Investments - Program Related	Coo Form 000 Dort V Jir	20.10
Part VIII			
	(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)	#1 15 000 B 1V 1 BU 1 101 1		
	(b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets. See Form 990, Par		438.4
100	(a _j	Description	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(10)			
	umn (b) must equal Form 990, Part X, co	I. (B) line 15.)	.
Part X	Other Liabilities. See Form 990,		
1.	(a) Description of liability	(b) Amount	
(1) Federa	l income taxes		
(2)			
(3)			
(4)			
(5)		V	
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25.) ▶		
e EIL 10 //	100 710 5		

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited F 1 Total revenue (Form 990, Part VIII, column (A), line 12) 2 Total expenses (Form 990, Part IX, column (A), line 25) 3 Excess or (deficit) for the year. Subtract line 2 from line 1		ents	
Total revenue (Form 990, Part VIII, column (A), line 12)		1	
3 Excess or (deficit) for the year. Subtract line 2 from line 1		2	
3 Excess or (deficit) for the year. Subtract line 2 from line 1		4	
		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 ar		10	
Part XII Reconciliation of Revenue per Audited Financial Statements Wit	th Revenue per	Return	
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:			
a Net unrealized gains on investments 2a			
b Donated services and use of facilities			
c Recoveries of prior year grants			
d Other (Describe in Part XIV.)			
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b Other (Describe in Part XIV.)		100	
c Add lines 4a and 4b		4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Part XIII Reconciliation of Expenses per Audited Financial Statements W	ith Expenses pe	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:			
a Donated services and use of facilities			
b Prior year adjustments			
c Other losses			
d Other (Describe in Part XIV.)			
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		11.0	
b Other (Describe in Part XIV.)			
c Add lines 4a and 4b	9 (8 (8 (8 (8 (8)	4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).		5	
Part XIV Supplemental Information			
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d any additional information.			
			111111111

Schedule D (Fo		Page 5
Part XIV	Supplemental Information (continued)	

************		**************************************

SCHEDULE G (Form 990 or 990-EZ)

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.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 84 0700841 Western Energy Alliance 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. ☐ Mail solicitations e Solicitation of non-government grants ☐ Internet and email solicitations ☐ Solicitation of government grants ☐ Phone solicitations ☐ Special fundraising events ☐ In-person solicitations 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. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (or retained by) fundraiser listed in (iv) Gross receipts (ii) Activity custody or control of (or retained by) or entity (fundraiser) from activity contributions? organization col. (i) Yes No 1 2 3 4 5 6 8 9 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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.

		grood roodipio groutor the	11 3 3 3 3 3 3 3 3			
			(a) Event #1 awards dinner	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
nue						
Revenue	1	Gross receipts	154,000			154,000
ď	2	Less: Charitable contributions	0			0
	3	Gross income (line 1 minus line 2)	154,000		P	154,000
	4	Cash prizes				
Direct Expenses	5	Noncash prizes	1,550			1,550
	6	Rent/facility costs	5,700			5,700
	7	Food and beverages	87,856			87,855
	8	Entertainment	2,000			2,000
	9	Other direct expenses .	60,340			60.340
	10	Direct expense summary. Ac	dd lines 4 through 9 in c	olumn (d)		(157,445)
	11	Net income summary. Comb	oine line 3, column (d), a	nd line 10		(3,445)
Pa	rt III	Gaming. Complete if the than \$15,000 on Form 9	e organization answer	red "Yes" to Form 99	00, Part IV, line 19, or	reported more
0)		than \$15,000 on Form 9	*	(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Rev						
=	1_	Gross revenue				
sesu	2	Cash prizes				
Direct Expenses	3	Noncash prizes		4		
Direct	4	Rent/facility costs				
	5	Other direct expenses .				
	6	Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7	Direct expense summary. Ac	dd lines 2 through 5 in c	olumn (d)		()
	8	Net gaming income summar	y. Combine line 1, colur	nn d, and line 7		
	a Is	nter the state(s) in which the or the organization licensed to o "No," explain:	perate gaming activities	in each of these states	5?	🗌 Yes 🗌 No
10		ere any of the organization's g	aming licenses revoked	l, suspended or termina	ated during the tax year	? . ☐ Yes ☐ No

Schedu	ule G (Form 990 or 990-EZ) 2010		Page 3							
11 12	Does the organization operate gaming activities with nonmembers?	Yes	□No							
13	formed to administer charitable gaming?	Yes	∐ No							
а	The organization's facility		%							
b	An outside facility		%							
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:									
	Name ►									
	Address►									
15a	revenue?	☐ Yes	☐ No							
	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:									
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		п.,							
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or	Yes	∐ No							
Part	spent in the organization's own exempt activities during the tax year ▶ \$ Supplemental Information. Complete this part to provide the explanations required by Part I, licolumns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also compart to provide any additional information (see instructions).		nis							

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 Inspection

Name of the organization
Western Energy Alliance

Employer identification number 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 organization 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 President, the Treasurer, and a former
President, comprise the compensation committee. None of these Board members have a conflict 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 conditions because of their relevance.
All of these factors were considered in 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.

Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization	Employer identification number
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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 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-FZ.

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.

- 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.
- b. 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.

# 990 Form

**Return of Organization Exempt From Income Tax** 

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements.

Α	For th	he 2009 c	alendar	r year,	or tax ye	ar begin	ining			, 20	009, and	ending				, 20			
В	Check if	applicable:	Please		me of organ	nization In	ndeper	ndent F	etroleu	ım Asso	ciation	of Mou	untain	St. D	Employe	r ider	ntification	number	
		s change	use IRS label or		ing Busines	s As IPA	AMS								84	:	070084	11	
		change	print or		mber and stre	et (or P.O. b	box if mail	is not del	livered to st	treet addres	s) Ro	om/suite	· ·	E	Telephon	ne nur	mber		
	Initial re		type. See	410	17th Str	eet						7	00	1	303)		623 098	37	
			Specific	Cit	y or town, s		untry ar	nd ZIP +	4			- 4	00	1	000 /		020 000		
_	Termina		Instruc- tions.	-	iver CO			10 2						٦	Gross rece	ciata é			
		ed return	E Nar		address of			64000	W Consid	i.			15.5					[7]	
Ц,	Applicati	on pending	100			principal	Officer.	warc	W Smit	ın			100				tes? Yes		
-	÷30.50				above			7/ 1/41	П	207							d? ∐Yes		
_		empt status			( 6 ) <b>◄</b> (ins	ert no.)	494	7(a)(1) or	5	27							ee instruction	ons)	
_		ite: ▶ ipa				1			-						ption numb				
				poration	☐ Trust ☐	J Associatio	on LI Ot	ther >		L	. Year of f	ormation	: 197	74 M	State of I	egal c	domicile: C	0	
Pa	art I	Summ	ary																
Activities & Governance		the resp	s an oi onsibl	rgani le de	organizati zation of velopmer	individunt and u	luals ar	nd bus natural	inesse: I gas an	s dedica	the Inte	romot	ing a p tain W	oositiv /est.	e busin			for	
9					the organiza										1 6 1			1.11	
∞					embers o										3			130	
ties					ent voting				verning	body (F	art VI, li	ne 1b)		8.8	4			129	
tivi	5	Total nur	mber o	of emp	oloyees (F	art V, lin	ne 2a)								5			10	
Ac	6	Total nur	mber o	of volu	inteers (e	stimate i	if nece	essary)				2.2			6			200	
					busines									3- 3-	7a			889	
_	b	Net unre	lated b	ousine	ss taxabl	e incom	e from	Form	990-T,	line 34.				0.00	7b			0	
	127												Pric	or Year		(	Current Ye	ar	
Revenue	8	Contribu	tions a	and gr	ants (Par	t VIII, lin	ne 1h)	N 2 2			4 5 5				0				
		9 Program service revenue (Part VIII, line 2g)							2,059	059,269 1,900			00,025						
	100								40	40,719 1			18,069						
ď		[기계 N. 프랑스 아이스 아이스 아니프 (2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.								59	386		(3	2,754)					
					nes 8 thro							()		2,159	2,159,374			85,340	
	13	Grants a	nd sim	nilar a	mounts p	aid (Par	t IX co	olumn (	(A) lines	s 1-3)					0			0	
					or membe										0			0	
es	100				nsation, e									1.007	1,007,499 1,0				
ens					ing fees (F			A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							0			0	
Expenses					enses (Par											-		0.00	
-					t IX, colu									858	3,664		6	85,654	
					lines 13-									1,866	*****	-		48,015	
					es. Subtra										3,211			37,325	
or	10	Hevenue	icoo cx	period	Jo. Oublid	or mic it	O IIOIII	IIIIO IZ					ainnina	of Curre			End of Yea		
anc		+			" 40							100	giiiiiig					10000	
Asse	20				line 16) .									2,659 1,459				25,609	
Net Assets Fund Balanc	21			1	X, line 26									10000		-		88,387	
21	ri II				alances.	Subtract	t line Z	. 1 110111	i iiile 20		· · ·		_	1,199	9,091	-	1,3,	37,222	
Sig		Under pe	ature enalties of f, it is tru	of perjui	y, I declare rect, and co	that I have mplete. Do	e examine eclaration	ed this re	eturn, incle parer (othe	uding acco	ompanying cer) is bas	schedule ed on all	es and s informa	tatemen tion of v	ts, and to which prep	the be	est of my k has any kn	nowledge owledge.	
He		Sign	ature of	officer				_						Date					
-	3.5	K.																	
		Type	or print	t name	and title														
Paic		Preparer' signature	s							Da	ate	Chec self- emple	k if oyed ▶	r (se	parer's ide e instructio		ig number		
	parer's	Firm's na											EIN	•					
use	Only	if self-em address,											_	ne no. >		)			
Ma	v the				rn with th	ne prepa	arer shr	own ah	ove? (s	ee instri	uctions)	1-1-	1			Г	Yes	No	
	,	01000	11110			- P. Spu							• •				100		

Par	t III Statement of Program Service Accomplishments
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
2	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? Yes V 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. 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.
46	(Code:) (Expenses \$including grants of \$) (Revenue \$)
40	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
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.) (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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		1
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	1	
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	1	
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? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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? If "Yes," complete Schedule D, Part IV	9		1
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		1
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	/	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 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? If "Yes," complete Schedule D, Part X.			
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		1
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
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? If "Yes," complete Schedule F, Part I	14b		1
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? If "Yes," complete Schedule F, Part II	15		1
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? If "Yes," complete Schedule F, Part III	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		1
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H , , ,	20		1

-	990 (2009)  ** W Charlist of Paguired Schodules (configured)		P	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? If "Yes," complete Schedule I, Parts I and II.	21	100	1
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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	1	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	1.11	1
	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	***	1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	24d 25a		<b>✓</b>
b	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25b		Ī
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		1
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? If "Yes," complete Schedule L, Part III.	27		1
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):			H
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
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? If "Yes," complete Schedule L, Part IV	28c	1	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
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		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		1
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		1
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		1
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		1
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,	27		

38

Par	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			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	1	
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			
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	20		1
h	this return?	3a 3b		V
	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	4a		1
h	account)?	та		•
	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		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	5c		
6a	Prohibited Tax Shelter Transaction?	6a	1	
	organization solicit any contributions that were not tax deductible?		1	
U	gifts were not tax deductible?	6b	1	
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	70		
	and services provided to the payor?	7a 7b		
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10		
	required to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year	7c		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	-		
	benefit contract?	7e 7f		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	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.			
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:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
	Cross mostle from mornitorio of characteristics , , , , , , , , , , , , , , , , ,			
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	1 9	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b		i i	

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.

			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	V	
3	Did the organization delegate control over management duties customarily performed by or under the direct	_		1
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		V
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	5		1
5	Did the organization become aware during the year of a material diversion of the organization's assets?	6	1	
6	Does the organization have members or stockholders?	0		
/a	Does the organization have members, stockholders, or other persons who may elect one or more members of the gaugesian hadra.	7a		1
Ь	of the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	10		
0	the year by the following:			
а	The governing body?	8a	1	
	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	2 4		
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		1
	tion B. Policies (This Section B requests information about policies not required by the Inter-	ernal		
Rev	enue Code.)			
		22.0	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		/
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			11
	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	22	,	
	form?	11	✓	-
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40-	1	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	٧	-
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	12b	1	
	rise to conflicts?	120	Y	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	1	
13		13	1	
14	Does the organization have a written whistleblower policy?  Does the organization have a written document retention and destruction policy?	14	1	
15	Did the process for determining compensation of the following persons include a review and approval by			
10	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	1	
	Other officers or key employees of the organization	15b	1	
~	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		1
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(cr	(3)s	only)	
	available for public inspection. Indicate how you make these available. Check all that apply.			
	☐ 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 inte	erest	
	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 recoordanization: > Sarah S Cornwell 410 17th Street Suite 700 Denver CO 80202	rds of	f the	

# 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.

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

Part VII Section A. Officers, Directors, Tru	istees, Ke	y Emp	loye	ees,	an	d Hig	hest	Compensated	Employees (co	ntinue	ed)	
(A)	(B)			(0				(D)	(E)		(F)	
Name and title	Average hours per week	P or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	con	estimate mount of other npensate from the ganization of relate ganization	of tion e tion ed
Gary Packer	.5							0	0			0
Vice President	.5	1		1				U	U			U
Bobby Plowman Vice President	.5	1		1	1			0	0			0
Tom Sheffield Vice President	.5	1		/				0	0			0
Neal Stanley Vice President	.5	1		1				0	0			0
Duane Zavadil Vice President	.5	1		1	i			0	0			0
Porter Bennett Vice President Natural Gas Markets	.5	1		1				0	0			0
John Benton Vice President Crude Oil Markets	.5	1		1				0	0			0
Tim Hopkins Vice President Government & Public Affairs	.5	1		/				0	0			0
Bill Lancaster Vice President Membership	.5	1		1				0	0			0
Jeff Lang Vice President Events	.5	1		1				0	0			0
Greg Ruben Vice President Natural Gas Transportation	.5	1		/				0	0	ī		0
Rebecca Watson Secretary	.5	1		/				0	0	II		0
Phil Doty Treasurer	.5	1		1				0	0			0
1b Total							<b>&gt;</b>	691,306	0		56	,671
Total number of individuals (including but reportable compensation from the organization)			ose	liste	ed a	above	e) wh	no received mo	ore than \$100,00	00 in		
3 Did the organization list any former office employee on line 1a? If "Yes," complete S								e, or highest c		3	Yes	NO ✓
4 For any individual listed on line 1a, is the s the organization and related organizations	sum of rep	ortab an \$1	le co	omp 00?	ens	sation 'Yes,'	and	d other compe mplete Schedu	nsation from le J for such			
<ul> <li>individual.</li> <li>Did any person listed on line 1a receive services rendered to the organization? If "</li> </ul>	or accrue	com	pens	satio	on t	from	anv	unrelated ora	anization for	5	1	1

# Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Environ International Corp P.O. Box 8500-1980 Philadelphia PA 19178-1980	air quality contracting	225,785
PAC/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		

Page 9

Pari	VIII	Statement of Revenue						
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Program Service Revenue and other similar amounts	b c d e f g h	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1 Total. Add lines 1a–1f  Dues and sponsorships Registration fees	1b 1c 1d 1e 1f a-1f: \$	Business Code 900099 900099	1,791,925 108,100	1,791,925 108,100		312, 313, 01 314
Program	e f g	All other program service reven Total. Add lines 2a-2f	ue .	•	1,900,025			
	4	Investment income (including diother similar amounts) Income from investment of tax-exer Royalties	npt bon	▶ d proceeds ▶	18,069			18,069
	6a b c d	Gross Rents Less: rental expenses Rental income or (loss)	4 .	(ii) Personal				
		assets other than inventory Less: cost or other basis						
		and sales expenses . Gain or (loss)						
Revenue	8a	Gross income from fundral events (not including \$	1c).	309,350				
Other Re		Less: direct expenses Net income or (loss) from fundr			(33,643)	(33,643)		
	b	Gross income from gaming activ See Part IV, line 19 Less: direct expenses Net income or (loss) from gamin	. a					
	b	Gross sales of inventory, returns and allowances Less: cost of goods sold Net income or (loss) from sales o	. a					
	11a	Employment advertising		900099	889		889	
	b c							
	е	All other revenue Total. Add lines 11a–11d Total revenue. See instructions			889 1,885,340	1,866,382	889	18,069

Part IX Statement of Functional Expenses

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

	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, 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, trustees, and key employees	492,053			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	431,598			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	20,506			
9	Other employee benefits	64,989			
10	Payroll taxes	53,215			
11	Fees for services (non-employees):				
0.0	Management	35,956			
	Legal	5,054			
	Accounting				
	Lobbying	75,354			
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other	44,120			
12	Advertising and promotion	13,474			
13	Office expenses	69,737			
14	Information technology	37,557			
15	Royalties				
16		86,240			
17	Occupancy	32,148			
	Payments of travel or entertainment expenses				
18	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	226,423			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization.	29,753			
23	Insurance	6,835			
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.)				
а	Dues	6,740			
b	Training & Publications	14,404			
c	Miscellaneous	1,859			
d					
е					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	1,748,015			
26	Joint costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X **Balance Sheet** (B) End of year (A) Beginning of year 51,540 111.850 1 2.379.436 2 2.445.451 3 3 37,981 4 29,937 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 7 Assets 8 78,259 9 55,228 Prepaid expenses and deferred charges . . . Land, buildings, and equipment: cost or 10a 10a other basis. Complete Part VI of Schedule D b Less: accumulated depreciation . . . . 10b 45.310 10c 43,453 11 11 12 12 Investments-other securities. See Part IV, line 11 13 Investments-program-related, See Part IV, line 11 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . 2,659,486 2,625,609 16 310,883 17 Accounts payable and accrued expenses . . . . . . . . . 150,835 17 18 18 1,148,706 19 1,137,553 19 20 20 21 Liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . . . 24 24 Other liabilities. Complete Part X of Schedule D . . . . . . . . 25 25 Total liabilities. Add lines 17 through 25 . . . . . . . 26 1,459,589 26 1,288,388 Organizations that follow SFAS 117, check here ▶ 
☐ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 29 Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . . . . . . . . 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 1,199,897 1,337,221 32 32 Retained earnings, endowment, accumulated income, or other funds 33 33 Total liabilities and net assets/fund balances . . . 2,659,486 2,625,609 34

<ul> <li>1 Accounting method used to prepare the Form 990:</li></ul>		Yes	No
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?  b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  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			
<ul> <li>b Were the organization's financial statements audited by an independent accountant?</li> <li>c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</li> <li>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</li> <li>d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were</li> </ul>	1,000		
<ul> <li>c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</li> <li>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</li> <li>d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were</li> </ul>	2a		V
the audit, review, or compilation of its financial statements and selection of an independent accountant? 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	2b		1
"" (1) : 그렇게 되었다면서 가장 가장 가장 가장 되었다면서 가장 가장 하는데 되었다면서 하는데 하는데 하는데 하는데 하는데 보다면서 하는데	2c		
☐ 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?	За		1
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 (Form 990 or 990-EZ)

# Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury 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.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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), then

• S	ection 501(c)(4), (5), or (6) o	rganizations: Complete Part III.				
	e of organization				Employ	er identification number
AT THE PARTY		sociation of Mountain States			84	0700841
Part	I-A Complete if t	he organization is exempt under	r section 501	(c) or is a sect	on 52	7 organization.
2	Provide a description of Political expenditures Volunteer hours	the organization's direct and indirect		262000000000000000000000000000000000000	Part IV.  \$	1,000
Part	Complete if t	the organization is exempt unde	er section 50	1(c)(3).		
2 3 4a	Enter the amount of any If the organization incur Was a correction made' If "Yes," describe in Par		managers unden 4720 for this	er section 4955 . year?	\$	Yes No
_						00 1(C)(O).
3 4 1 5 1	activities	tly expended by the filing organization	d to other orgater here and of the control of all sectoms the filing organic as separate po	nizations for sect	\$ \$  ion  \$ \$  L,  \$ \$  rganizat  Also ente , such a	er the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount pai filing organizat funds. If none, el	ion's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

Schedule O (FORM 330 OF 330 EZ) 2003					1 dgc
Part II-A Complete if the organ under section 501(h)).	ization is exem	pt under sectio	n 501(c)(3) and	d filed Form 5768	(election
A Check ► ☐ if the filing organiza  Check ► ☐ if the filing organiza				sions apply.	
	Lobbying Expend	litures		(a) Filing organization's totals	(b) Affiliated group totals
<ul> <li>Total lobbying expenditures to infl</li> <li>Total lobbying expenditures to infl</li> <li>Total lobbying expenditures (add li</li> <li>Other exempt purpose expenditure</li> <li>Total exempt purpose expenditure</li> <li>Lobbying nontaxable amount. Enterolumns.</li> </ul>					
If the amount on line 1e, column (a) or (b) Not over \$500,000		nontaxable amour	nt is:		
Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,0		s 15% of the excess			
Over \$1,500,000 but not over \$17,000, Over \$17,000,000	000 \$225,000 plus \$1,000,000.	5 5% of the excess	over \$1,500,000.		
Subtract line 1f from line 1c. If zer     If there is an amount other than zer     section 4911 tax for this year?      (Some organizations tha     columns bel	o on either line 1h	or line 1i, did the o	ection 501(h) lo not have to c	complete all of the f	☐ Yes ☐ N
Lobl	oying Expenditure	es During 4-Year	Averaging Perio	od	
Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
			1	T 1	

Pa	Complete if the organization is exempt under section 501(c)(3) and has NOT fi (election under section 501(h)).	led Fo	rm 5	768	
	(E	1)		(b)	
	Yes	No	Ai	noun	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)? .				
C	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	-	-		-
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912		_		-
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
-	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(	5). or	secti	on	
	501(c)(6).	,,		-71	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		1
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		1
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		3		1
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, li "Yes."				ed
1	Dues, assessments and similar amounts from members	1		1,79	1,925
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).				
	Current year	2a		140	0,711
	Carryover from last year	2b		444	0 744
	Total	2c			0.711
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3		200	8,789
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				
		4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			0
_	t IV Supplemental Information				
Also	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; complete this part for any additional information. ck 07/23/09 to Friends of Gary R. Herbert, UT Governor			3, line	e 1i.

Schedule C (Fo	orm 990 or 990-EZ) 2009	Page 4
Part IV	Supplemental Information (continued)	
**********		
Commence		seronium de la
-22000000000000000000000000000000000000		******************************
		***************************************
		***************************************
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minimum.		
		2011210110110110110110110111111
		***************************************
ATTICLE CO. 1.		
	remains and the transfer of the same and the	him mane den is me dag and doordoody a final

Department of the Treasury

Internal Revenue Service

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

2009

Open to Public Inspection

Name of the organization Employer identification number Independent Petroleum Association of Mountain States 0700841 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year . . . 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 to the organization's exclusive legal control? . . . . . Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of a certified historic structure ☐ Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b 2c c Number of conservation easements on a certified historic structure included in (a) . . . d Number of conservation easements included in (c) acquired after 8/17/06 . . . . . 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► ..... Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 ▶\$ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service. provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: 

 п	_	-	-	
Ρ	а	O	e	

Pai	t III Organizations Maintaining	Collections	of Art, Histo	rical Treasure	s, or C	ther Similar As	ssets (continued)
3	Using the organization's acquisition, ac collection items (check all that apply):	cession, and c	other records	, check any of th	e follov	wing that are a si	gnificant use of its
а	Public exhibition		d _	Loan or exch			
b	Scholarly research		e L	Other			******
C	Preservation for future generations						
4	Provide a description of the organization Part XIV.	n's collections	and explain	how they further	er the o	rganization's exe	mpt purpose in
5	During the year, did the organization solid assets to be sold to raise funds rather that	cit or receive do an to be mainta	onations of ar ained as part	t, historical treasu of the organizatio	res, or n's coll	other similar ection?	Yes No
Par	Escrow and Custodial Arra IV, line 9, or reported an amo				answe	red "Yes" to For	m 990, Part
	Is the organization an agent, trustee, c included on Form 990, Part X?				ions or	other assets no	t Yes No
b	If "Yes," explain the arrangement in Pa	rt XIV and con	nplete the fol	lowing table:		Ar	mount
C	Beginning balance				10		
	Additions during the year					Y .	
е	Distributions during the year				1e		
f	Ending balance				1f		
2a b	Did the organization include an amoun If "Yes," explain the arrangement in Pa	t on Form 990					☐ Yes ☐ No
Pai	t V Endowment Funds. Comp	lete if the org	ganization a	nswered "Yes"	to Fo	rm 990, Part IV	, line 10.
		a) Current year	(b) Prior ye	ar (c) Two year	s back	(d) Three years back	(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 g	Administrative expenses End of year balance						
2	Provide the estimated percentage of th	e year end ba	lance held as	3:			
а	Board designated or quasi-endowment	<b>&gt;</b>	%				
b	Permanent endowment ▶	%					
C	Term endowment ▶%						
3a	Are there endowment funds not in the pe	ossession of th	ne organizatio	n that are held a	nd adm	ninistered for the	In Land
	organization by:						Yes No
	(i) unrelated organizations	har en engli	r receive t				3a(i)
1	(ii) related organizations			0-1-11-00			3a(ii)
4	If "Yes" to 3a(ii), are the related organiz Describe in Part XIV the intended uses				6. 0.		3b
-	t VI Investments—Land, Buildi		THE PARTY OF THE PARTY.	The state of the s	Part Y	line 10	
Lef-							(1) 0
	Description of investment	(a) Cost or ot (investm		b) Cost or other basis (other)		Accumulated epreciation	(d) Book value
1a	Land	1					
b	Buildings						
C	Leasehold improvements						
d	Equipment			47,841		28,804	19,037
e	Other	1	00.0	58,516		34,100	24,416
Tota	I. Add lines 1a through 1e. (Column (d) mus	t equal Form 9.	90, Part X, co	umn (B), line 10(c	).) .		43,453

	See Form 990, Part X, lin	e 12.
<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Company of the compan		
Financial derivatives		
Other		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments—Program Relate	d. See Form 990, Part X, lin	ie 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
		Cost or eng-oi-year market value
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►  Part IX Other Assets. See Form 990, Part	rt V line 15	
Other Assets. See Form 990, Fa	(a) Description	(b) Book value
	(a) Decemperation	(2) 2001. 14.00
Total (Column /h) must squal Form 000, Part V, col	(D) lina 15 )	
Part X Other Liabilities. See Form 990,	Part X, line 25.	
Part X Other Liabilities. See Form 990,  1. (a) Description of liability		
Part X Other Liabilities. See Form 990,  1. (a) Description of liability	Part X, line 25.	
Part X Other Liabilities. See Form 990,  1. (a) Description of liability	Part X, line 25.	
Part X Other Liabilities. See Form 990,  1. (a) Description of liability	Part X, line 25.	
	Part X, line 25.	
Part X Other Liabilities. See Form 990,  1. (a) Description of liability	Part X, line 25.	
Part X Other Liabilities. See Form 990,  1. (a) Description of liability	Part X, line 25.	
Part X Other Liabilities. See Form 990,  1. (a) Description of liability	Part X, line 25.	
Part X Other Liabilities. See Form 990,  1. (a) Description of liability	Part X, line 25.	
Part X Other Liabilities. See Form 990,  1. (a) Description of liability	Part X, line 25.	
Part X Other Liabilities. See Form 990,  1. (a) Description of liability  Federal income taxes	Part X, line 25.	
Part X Other Liabilities. See Form 990,  1. (a) Description of liability	Part X, line 25.  (b) Amount	

Pai	Reconciliation of Change in Net Assets from Form 990 to Audited Financial St	tateme	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		10	D. Line
_	Reconciliation of Revenue per Audited Financial Statements With Revenue	1	Return
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:	1	
a	Net unrealized gains on investments	-	
b	Donated services and use of facilities	-	
C	Recoveries of prior year grants	-	
d	Other (Describe in Part XIV.)	- 00	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4b	-	
b	Other (Describe in Part XIV.)	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
_	t XIII Reconciliation of Expenses per Audited Financial Statements With Expense	-	r Return
	T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1	riotain
1	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities		
b	Prior year adjustments	7	
C	Other losses		
d	Other (Describe in Part XIV.)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV.)		
C	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Par	t XIV Supplemental Information		
and	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d ar part to provide any additional information.		
		********	

Schedule D (Form	n 990) 2009	Page 5
Part XIV	Supplemental Information (continued)	
	•••••••••••••••••••••••••••••••••••	
		1000000
*************		
		10 000 000

# SCHEDULE G (Form 990 or 990-EZ)

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.

▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Independent Petroleum Association of Mountain States 84 0700841 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. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants e Internet and email solicitations Solicitation of government grants Special fundraising events c Phone solicitations d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees 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 (ii) Activity (v) Amount paid to (or retained by) fundraiser listed in (iii) Did fundraiser have (iv) Gross receipts (vi) Amount paid to custody or control of contributions? (or retained by) organization or entity (fundraiser) from activity col. (i) Yes No 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

	rt I	Fundraising Events. Comore than \$15,000 on F				
			(a) Event #1 Awards Dinner	(b) Event #2 Awards Dinner	(c) Other events	(d) Total events (add col. (a) through col. (c))
Revenue	1 2	Gross receipts	(event type) 150,850	(event type) 158,500	(total number)	309,350
	3	Gross income (line 1 minus line 2)	150,850	158,500		309,350
	4	Cash prizes				
	5	Noncash prizes	1,550	19,668		21,218
ses	6	Rent/facility costs ,	33,220	26,109		59,329
Direct Expenses	7	Food and beverages	73,520	106,698		180,218
Direct	8	Entertainment	1,700			1,700
П	9	Other direct expenses	34,761	45,767		80,528
	10 11 rt	Direct expense summary. Ad Net income summary. Comb  Gaming. Complete if t than \$15,000 on Form	ine line 3, column (d), a he organization ansv	nd line 10		( 342,993) (33,643) , or reported more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue				
nses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				·
Direct	4	Rent/facility costs				
	5	Other direct expenses .  Volunteer labor	☐ Yes%	☐ Yes%	☐ Yes%	
	7	Direct expense summary. Ad		9 / 4 / 1		( )
	8	Net gaming income summary	y. Combine line 1, colun	nn d, and line 7		
9 a b	ls	iter the state(s) in which the o the organization licensed to o "No," explain:	perate gaming activitie	s in each of these state		9a
		ere any of the organization's g 'Yes," explain:	gaming licenses revoke	d, suspended or termin	ated during the tax ye	ar? 10a
11		pes the organization operate g	aming activities with no			11
12	ls for	the organization a grantor, be med to administer charitable	eneficiary or trustee of a gaming?	a trust or a member of	a partnership or other	entity 12

2	n	-	

		Ye	s No
13	Indicate the percentage of gaming activity operated in:		
a	The organization's facility		
b	An outside facility		
14	Enter 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 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:		
	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 ▶ \$		

# Continuation Sheet for Form 990

OMB No. 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the Organization

Independent Petroleum Association of Mountain States

Employer identification number 84 0700841

Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated

(A) Name and title	(B) Average hours	Donit	ion la		C)	that ap	hilar	(D) Reportable	(E) Reportable	(F) Estimated
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Pam Roth Colorado State Vice President	.5	1						0	0	0
Bruce Bowman  Montana State Vice President	.5	1						0	0	0
Phil Kriz Nebraska State Vice President	.5	1						0	0	0
T. Greg Merrion New Mexico State Vice President	.5	1						0	0	0
Brent Miller North and South Dakota State Vice Presic	.5	1						0	0	0
Dave Banko Oregon and Washington State Vice President	.5	1						0	0	0
Brad Miller Utah State Vice President	.5	1						0	0	0
Randy Bolles Wyoming State Vice President	.5	1						0	0	0
Daria Mahoney Banking & Finance Committee Chair	.5	1						0	0	0
Shane Schulz Legislative, Legal, & Regulatory Chair	.5	1						0	0	0
Phil Schlagel Air Quality Subcommittee Chair	.5	1					1	0	0	0
Tom Crowe NGV Subcommittee Chair	.5	1	Ц	1				0	0	0
Pat Hanley Tax Subcommittee Chair	.5	1						0	0	0
Bryan Pratt Tax Subcommittee Chair	.5	1						0	0	0
Joe Icenogle Wildlife Subcommittee Chair	.5	1						0	0	0
Kimberly Mazza Communications Committee Chair	.5	1						0	0	0
Rob Bilger At-Large	.25	1						0	0	0
Terry Dobkins At-Large	.25	1	L					0	Ō	0
Rick Hayley At-Large	.25	1						0	0	0
Tom Hendrick At-Large	.25	1						0	0	0
Paul Sheppard At-Large	.25	1						0	0	0

# **Continuation Sheet for Form 990**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the Organization Independent Petroleum Association of Mountain States Employer identification number 84 ! 0700841

Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated **Employees** 

(A) Name and title	(B) Average hours	Posit	ion I		C) k all	that ap	(vlac	(D) Reportable	(E) Reportable	(F) Estimated	
	per week	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
Steve Bain								11			
At-Large	.25	1						0	0	0	
Kevin Bailey		- 2	ir ii								
At-Large	.25	1						0	0	0	
Steve Barnes											
At-Large	.25	1						0	0	0	
Rob Bayless		100	T								
At-Large	.25	1						0	0	0	
Dominic Bazile		13.									
At-Large	.25	1						0	0	0	
Bill Bergner		140									
At-Large	.25	1						0	0	0	
Todd Berryman											
At-Large	.25	1						0	0	0	
Tony Best		1									
At-Large	.25	1						0	0	0	
Jonny Brumley		1						177			
At-Large	.25	1						0	0	0	
Mike Brunstein		15						1			
At-Large	.25	1				_		0	0	0	
Jason Buehler		100									
At-Large	.25	1			-		_	0	0	0	
Alex Campbell					10						
At-Large	.25	1						0	0	0	
Chris Carter											
At-Large	.25	1			-			0	. 0	0	
Robert Clark		75.						·			
At-Large	.25	1	Ш					0	0	0	
Paul DeBonis											
At-Large	.25	1						0	0	0	
Eric Dillé					11				-		
At-Large	.25	1						0	0	0	
Kurt Doerr		1.0									
At-Large	.25	1						0	0	0	
Cornelius Dupré											
At-Large	.25	1						0	0	0	
Todd Ennenga											
At-Large	.25	1			_			0	0	0	
Rich Eichler											
At-Large	.25	1						0	0	0	
Jack Ekstrom		1 51									
At-Large	.25	1						0	0	0	

# **Continuation Sheet for Form 990**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part I

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

Name of the Organization Independent Petroleum Association of Mountain States Employer identification number 0700841

Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated

(A) Name and title	(B) Average hours	Desit	ion la		C)	that ap	(ede	(D) Reportable	(E) Reportable	(F) Estimated
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Mark Erickson At-Large	.25	/						0	0	0
Tuss Erickson At-Large	.25	1						0	0	0
Steve Fallin At-Large	.25	1						0	0	0
Tom Foncannon At-Large	.25	1						Ō	0	0
Steve Frazier At-Large	.25	1						0	0	0
Rick Grisinger At-Large	.25	1						0	0	0
Stephen Harpham At-Large	.25	1						0	0	0
John Harpole At-Large	.25	1						0	0	0
Alan Harrison At-Large	.25	1						0	0	0
Tad Herz At-Large	.25	1						0	0	0
Steve Hulse At-Large	.25	1						0	0	0
Danny Jimenez At-Large	.25	1				Ц		0	0	0
Dana Johnson At-Large	.25	1						0	0	0
Bill Jones At-Large	.25	1		,				0	0	0
Bruce Kelso At-Large	.25	1						0	0	0
Mike Kennedy At-Large	.25	1						0	0	0
E.P. "Tripp Kerr III At-Large	.25	1						0	0	0
Art Krasny At-Large	.25	1						0	0	0
Dale Larsen At-Large	.25	1						0	0	0
Don Law At-Large	.25	1						0	0	0
DJ Lay At-Large	.25	1						0	0	0

# **Continuation Sheet for Form 990**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the Organization Independent Petroleum Association of Mountain States Employer identification number 84 !

Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated **Employees** 

(A) Name and title	(B) Average hours	Positi	ion /		C)	that ap	holy	(D) Reportable	(E) Reportable	(F) Estimated	
reame and title	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
Jim Lightner At-Large	.25	1						0	0	0	
Joe Lima											
At-Large	.25	1						0	0	0	
Andy Logan At-Large	.25	1						0	0	0	
Brian Macke			m		11						
At-Large	.25	1						0	0	0	
Murphy Markham At-Large	.25	1						0	0	0	
Carter Mathies											
At-Large	.25	1						0	0	0	
John T. McDougal At-Large	.25	1	ij		ij			0	0	0	
Ed McLaughlin											
At-Large	.25	1	<b>24</b>					0	0	0	
Scott Moore										-	
At-Large	.25	1						0	0	0	
René Morin At-Large	.25	1						0	0	0	
Greg Morzano	120	1		7						·	
At-Large	.25	1						0	0	0	
Mike O'Shaughnessy										0	
At-Large	.25	1					-	0	0	0	
Larry Parnell At-Large	.25	1						0	0	0	
Randy Pharo At-Large	.25	1						0	0	0	
Bill Picquet	1 7 5 1	1									
At-Large	.25	1						.0	0	0	
Ward Polzin		11.1									
At-Large	.25	1						0	0	0	
Jim Powers At-Large	.25	1						0	0	0	
Jay Prudhomme											
At-Large	.25	1						0	0	0	
Shawn Reed		1									
At-Large	.25	1						0	0	0	
Doug Rogers											
At-Large	.25	1						0	0	0	
Charlie Searle At-Large	.25	1						0	0	0	

# 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open To Public Inspection Employer identification number

Independent Petroleum Association of	Mountair	1 States				8	34 :		07	00841		
Part I Excess Benefit Transactions Complete if the organization answ								Part V	, line 4	40b.		
1 (a) Name of disqualified person	(a) Name of disqualified person			(b) [	Description of					(c) Con Yes	rected?	
<ul><li>2 Enter the amount of tax imposed on under section 4958</li><li>3 Enter the amount of tax, if any, on line</li></ul>								year	▶ \$ ▶ \$			
Part II Loans to and/or From Interest Complete if the organization a			n Form 99	0, Part I	V, line 26,	or Form 9	990-E	Z, Pa	rt V, I	ine 38	3a.	
(a) Name of interested person and purpose	(b) Loan	to or from anization?	(c) Original principal amount		(d) Balan		-	default?	the form of the		-3-5	ritten ment?
	То	From				Ye		No	Yes	No	Yes	No
Total				. ▶ \$								
Part III Grants or Assistance Benefic Complete if the organization a				0, Part I	V, line 27.							
(a) Name of interested person	(b) R	elationship	between inter organizati		son and the	(c	Amou	int and	type o	of assist	ance	
Part IV Business Transactions Invol				0 D- 1 II	/ Page 00a	001	00					
(a) Name of interested person	(b) Relationship interested person organizati		on and the transac		nount of	, 28b, or 28c.  (d) Description of transa			ansacti	ion	(e) Sha organiz rever	ation's
Porter Bennett	Board	d membe	ar.		12 766	Natural gas consulting p			proje	Yes	No 🗸	
Forter Definett	Doard	a memo	31	-	42,700	ivatural	yas (	Jonst	ming	hrolt		٧

# Supplemental Information to Form 990

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

OMB No. 1545-0047

2009

Open to Public Inspection

0700841

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Independent Petroleum Association of Mountain States

Attach to Form 990.

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 organization 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 President, the Treasurer, and a former President, comprise the compensation committee. None of these Board members have a conflict of interest as defined in the Regulations. The Board members of the Committee evaluated the compensation for all 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.

Schedule O (Form 990) 2009	Page 2
Name of the organization	Employer identification number
	***************************************
	·

## 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.
- g. 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.
- 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 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 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 number(s), because this

schedule will be made available for public inspection.