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Form **990-EZ**

Department of the Treasury Internal Revenue Service

Short Form

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

For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.

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

2004

OMB No 1545-1150

Open to Public Inspection

A F	or the	2004 calend	lar year,	or tax year beginning	JANUARY 1	, 2004, and e	nding [DECEMBE	R 31	, 20 04	
	Check if ap Address c	hange	Please use IRS label or	C Name of organization RICO CENTER				D Employe 20 : 5		tification number 89	
Z	Name cha Initial retui Final retun	m	print or type. See	Number and street (or P O b	ox, if mail is not delivere	d to street address)	Room/suite	E Telephor	ne nur	nber	
	Amended		Specific Instruc- tions.	City or town, state or country RICO, CO 81332	, and ZIP + 4				up Exemption		
מוח	Section	on 501(c)(3)	-	ations and 4947(a)(1) nonex appleted Schedule A (Form 9	•	s must attach	1	nting methor	od:	Cash Z Accrual	
<u>i</u> /	Websit	e: ▶ <u>ww</u>	W.RICC	OCENTER.ORG				▶ ☐ if required to		•	
ر بُ	Organiz	ation type (check or	nly one)— 🗹 501(c) (3) ∢ (insert no.)	a)(1) or 🔲 527	Sched	ule B (Form	990,	990-EZ, or 990-PF)	
K (Check >	If the or	ganızatı	on's gross receipts are norman 990 Package in the mail, it	ally not more than \$2						
<u> </u>	Add lines	s 5b, 6b, and	7b, to lir	ne 9 to determine gross receipt	s, if \$100,000 or more,	file Form 990 ınste	ad of Form 99	90-EZ .	▶ \$	42,544.03	
Pa	art I	Revenue	, Expe	nses, and Changes in	Net Assets or Fo	und Balances	(See page	37 of th	e ins	structions.)	
. 1	1	Contributio	ns, gifts	s, grants, and similar amour	nts received				1	41,009.79	
	2	Program s	ervice r	evenue including governm	nent fees and contra	acts			2	0	
	3	Membersh	np dues	and assessments STAT	FINE TRUE				3	0	
	4	Investmen	t incom	e RE	CEIVED				4	1,534.24	
1	5a			m sale of assets other tha				0	ł		
;	b	Less: cost	or other	er basis and sales explans	⊧ର 1 201n · ·	5b		0	-	_	
` _	С			n sale of assets other than		ess line 5b) (att	ach schedu	ıle). 📑	īc	0	
Ž	6	Special eve	ents and	activities (attach schedute	Hanyamount is fro	om gaming , che	ck here 🕨				
	а	Gross reve	enue (no	ot including \$O	GDEN of contrib	utions					
178		reported of						0	-		
CLEARED	b	Less: dire	ct expe	nses other than fundraisin				. 0		_	
Ш	С	Net incom	e or (lo	ss) from special events an	id activities (line 6a	less line 6b) .		• –	ic _	0	
ہر	7a	Gross sale	es of inv	entory, less returns and a	illowances	7a		0	Ì		
	b	Less: cost	of goo	ds sold		7b		0	İ	_	
Щ	С			ss) from sales of inventor	y (line 7a less line 7	b)		. <u> </u>	7c	0	
5	8			escribe ► N/A		· · · · · · · · · · · · · · · · · · ·		— ›	8	0	
TATUTE	9			ld lines 1, 2 , 3, 4, 5c, 6c,		<u></u>	<u> </u>	•	9	42,544.03	
ו⊻ו	10	Grants an	d sımıla	r amounts paid (attach so	Fedura D				10	14,333.78	
ුහ	11	Benefits p	aid to d	or for members					11	0	
S S	12	Salaries, o	ther co	mpensation and employe	e peretita O .			. –	12	0	
y kelle. Senses	13	Profession	nal fees	and other payments to in	dependent copuract	ors			13	968.89	
Exp &	14	Occupano	y, rent,	utilities, and maintenance	- N 1 1 1 5 5			[1	14	0	
.¥ Ш ≫	15	Printing, p	ublicati	utilities, and maintenance ons, postage, and strippin	®N, U I .			[1	15	0	
MYM Z SU Expe	16	Other exp	enses (describe - DANTILLO				—) └	16	96.20	
\leq $-$	17	Total exp	enses (add lines 10 through 16)	<u> </u>	. <u></u>	<u> </u>		17	15,338.87	
@ \$	18) for the year (line 9 less li				• -	18	27,205.16	
SCANNED A Net Assets	19	Net assets	s or fur	nd balances at beginning	of year (from line 2	7, column (A)) (must agree	with			
图 🗸		end-of-yea	ar figure	e reported on prior year's	return)			[-	19	0	
Net	20			net assets or fund balance				· ·	20	07.005.40	
3	21			d balances at end of year					21	27,205.16	
m Pa	irt II	Balance		s-If Total assets on line 2		250,000 or mor		_			
				See page 40 of the instruc	•		(A) Beg	inning of yea		(B) End of year	
22		n, savings,							22	27,20 <u>5.16</u>	
23									23		
24				► <u>N/A</u>					24	0	
25	Tota	l assets							25	0	
26 27	Tota	I liabilities	(describ	De ► N/A	(R) must seree ::::	h line 21)	-		26	27,205.16	
21	net	assets of 1	iurio D2	nances one 77 of column	i ioi musi auree Wil	пинеги .	1		1121		

91,9,10 33

_	390-EZ	<u>`</u>	mliahmanta (Cas assa	A1 of the inc						age Z
Par		Statèment of Program Service Accom					(Rec	Expens Juired for		c)(3)
		e organization's primary exempt purpose?					14110	(4) orga	anızat	ions
descr	ibe w	hat was achieved in carrying out the organize e services provided, the number of persons be	ation's exempt purposes	. In a clear ar Information for	each n	rogram title		4947(a)(onal for c		
		led grants to community organizations that				rog. a.r. titio.				
-		co residents, visitors and employees.	at preserved or entrene	a the quality	<u> </u>					
-				(Grants \$	·	14,333.78)	28a		14.33	33.78
20						,	200	··		
29 .		•								
-	-	•••••••••••••••••••••••••••••••••••••••		(Grants \$			29a			
30										
-		***************************************	•••••••••••••••••••••••••••••••••••••••							
			•••••••••••••••••••••••••••••••••••••••	(Grants \$)	30a			
31 O	ther p	program services (attach schedule)		(Grants \$)	31a			0
32 To	otal p	rogram service expenses (add lines 28a th		· · · · · · · · · · · · · · · · · · ·		▶	32			33.78
Par	t IV	List of Officers, Directors, Trustees, and Key		even if not com	pensate	d. See page 4	1 of th	e instruc	tions)
		(A) Name and address	(B) Title and average hours per week	(C) Compe (If not p		(D) Contributio employee benefit	ns to nlans &	(E) E	xpens unt an	
			devoted to position	enter -		deferred comper	sation	other allowances		
Barl	<u>furr</u>	in, Rico Colorado	Board member, 1 Hr		0		0			0
Der	<u> </u>	Cuitman Diag Calanda	,							
DOU	ovan	Spitzman, Rico, Colorado	Board member, 1 Hr		0		0			0
Cath	orino	Allen, Rico, Colorado								
Cati	iei iiie	Alleli, Nico, Colorado	Board member, 1 Hr		0		0			0
Par	t V	Other Information (Note the attachm	ent requirement in Ge	neral Instruc	rtion V	nage 14)		1	Yes	No
		e organization engage in any activity not previously					h ootuu	-		✓
		ny changes made to the organizing or governing docum								1
		organization had income from business activi						_		
		eported on Form 990-T, attach a statement ex								
		e organization have unrelated business gross incom								1
		s," has it filed a tax return on Form 990-T for			g, .					
		here a liquidation, dissolution, termination, or s	•	ring the year?	(If "Yes	," attach a st	ateme	ent.)		✓
		amount of political expenditures, direct or in-		•				0		
b	Did th	ne organization file Form 1120-POL for this	year?							
38a	Did th	ne organization borrow from, or make any lo	oans to, any officer, dire	ctor, trustee,	or key	employee or	were	any		
		loans made in a prior year and still unpaid a	•	•	1	1				✓
		s," attach the schedule specified in the line 38 i	mondonono and onto the	amount miror	~~· [-					
		(7) organizations. Enter: a Initiation fees and	•	cluded on line	~ ~ -	9a				
		receipts, included on line 9, for public use			. 🕒	9b		-		
		(3) organizations. Enter Amount of tax imposed of				_		0		
			912 ▶						-	-
		(3) and (4) organizations. Did the organization or did it become aware of an excess benefit								✓
		or did it become aware of all excess benefit nt of tax imposed on organization managers or disc		•						0
		: Amount of tax on line 40c, above, reimburs								0
		ne states with which a copy of this return is file				· · · · · · ·				
42	The b	ooks are in care of Frin Neer			Telen	hone no. >	970) 562-3	932	
	Locat	ed at ▶ 27696 Highway 145, Dolores, Co	lorado			ZIP + 4 ▶	8132	23		
43	Section	on 4947(a)(1) nonexempt charitable trusts fili	ng Form 990-EZ in lieu	of Form 1041	—Che	ck here				
	and e	nter the amount of tax-exempt interest rece								
	İ	Under penalties of perjury, I declare that I have examinand belief it is true, correct, and complete. Declarat	ned this return, including acco	mpanying sched	ules and	statements, and	to the	best of m	y know	vledge
Plea	se	Sold and complete Declarat	or proparer touler trial offi	Josepho Daseu OII	a.,	2/12	\ \ ~			uge
Sign	ļ	Scanding of office	<u>-</u>		l_ <u>_</u>	<u>ي.</u> 115	110	010		
Here	ľ	Signature of office)				ate				
	Type or print name and title									
			Da	ite In	heck if	Property	r's CCNI	or PTIN (Se	e Gen	Inet ۱۸۸
Paid		Preparer's signature		s	elf-		. 3 3011	S. 1 1114 (SE	o util	11)
Prepa		Firm's name (or yours		le	mployed	N P	:			
Use C	/IIIY	if self-employed), address and ZIP + 4			 	hone no 🕨 ()			

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),

501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2004

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Total number of others receiving over \$50,000 for

professional services.

Supplementary Information—(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ Name of the organization Employer identification number **RICO CENTER** 20:5827289 Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.") (d) Contributions to (e) Expense (a) Name and address of each employee paid more (b) Title and average hours (c) Compensation mployee benefit plans & account and other than \$50,000 per week devoted to position deferred compensation allowances N/A Total number of other employees paid over 0 \$50,000 Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.") (b) Type of service (c) Compensation (a) Name and address of each independent contractor paid more than \$50,000 N/A

0

Page	2

Pa	t III	Statements About Activities (See page 2 of the instructions.)	Y	res	No
1	atte or i Par	ring the year, has the organization attempted to influence national, state, or local legislation, including any empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid incurred in connection with the lobbying activities \$	1		✓
	org	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other janizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of elobbying activities.			
2	sut with	ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any ostantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or h any taxable organization with which any such person is affiliated as an officer, director, trustee, majority ner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the insactions.)			
а	Sal	le, exchange, or leasing of property?	2a		✓
b		nding of money or other extension of credit?	2b		√
c		mishing of goods, services, or facilities?	2c		✓
d		yment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		√
e	-	insfer of any part of its income or assets?	2e		√
3a	Do	you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how a determine that recipients qualify to receive payments)	3a	Ì	✓
b		you have a section 403(b) annuity plan for your employees?	3b		1
		I you maintain any separate account for participating donors where donors have the right to provide advice			
		the use or distribution of funds?	4a		✓
b		you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		✓
The	_	unization is not a private foundation because it is: (Please check only ONE applicable box.)			
5	_	A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6	_	A school. Section 170(b)(1)(A)(ıı). (Also complete Part V.)			
7	_	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hosp and state ▶			
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section (Also complete the Support Schedule in Part IV-A.)			
	_	An organization that normally receives a substantial part of its support from a governmental unit or from the generation (b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)	ral public	c. Se	ction
11b 12		A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) An organization that normally receives: (1) more than 33½% of its support from contributions, membership receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more its support from gross investment income and unrelated business taxable income (less section 511 tax) from business.	re than sinesses	331/3	% of
		by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part I	V-A.)		
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supp described in (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(3).)			
		Provide the following information about the supported organizations. (See page 5 of the instructions.)		
		(a) Name(s) of supported organization(s)	number above	r	
			·		
14		An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instruct	ions.)		

Cale	e: You may use the worksheet in the instructions andar year (or fiscal year beginning in)	(a) 2003	(b) 2002	(c) 2001	(d) 20		(e) Total
15	Gifts, grants, and contributions received. (Do	(a) 2003	(6) 2002	(6) 2001	(a) 20	00	(e) Total
	not include unusual grants. See line 28).						
16	Membership fees received			 			
17	Gross receipts from admissions, merchandise			····			
••	sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose.						
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975.						
19	Net income from unrelated business activities not included in line 18						
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.	0	0	0		0	0
21	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge.						
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets						
23	Total of lines 15 through 22	0	0	0		o	0
24	Line 23 minus line 17						0
25	Enter 1% of line 23	0	0	0		0	
26	Organizations described on lines 10 or 11:		amount in colum	n (e) line 24		26a	0
b	Prepare a list for your records to show the name	ne of and amount	contributed by	each person (other	er than a		
	governmental unit or publicly supported organiz amount shown in line 26a. Do not file this list wi					26b	0
С	Total support for section 509(a)(1) test: Enter lin					26c	0
d	Add. Amounts from column (e) for lines: 18					1	
u	, ,					26d	- • •
е	Public support (line 26c minus line 26d total)					26e	
f	Public support percentage (line 26e (numera	tor) divided by li	ne 26c (denomi	nator))	. •	26f	%
27	Organizations described on line 12: a Fo person," prepare a list for your records to show Do not file this list with your return. Enter the	r amounts includ the name of, and sum of such am	ed in lines 15, 1 total amounts red tounts for each y	6, and 17 that verved in each yeare	ere receivar from, each	ed from ch "disqu	a "disqualified ualified person."
	(2003)						
D	For any amount included in line 17 that was recenshow the name of, and amount received for each (Include in the list organizations described in lines the difference between the amount received and amounts) for each year: (2003) (2002)	year, that was mor 5 through 11, as w the larger amount	re than the larger ell as individuals.) described in (1)	of (1) the amount Do not file this li or (2), enter the s	on line 25 st with you um of thes	for the year return. e differer	ear or (2) \$5,000. After computing aces (the excess
С	Add: Amounts from column (e) for lines 15					1 1	
	17 20 .					27c	
d		and line 27b total				27d	
е	Public support (line 27c total minus line 27d to					27e	
f	Total support for section 509(a)(2) test. Enter a	mount from line 2	3. column (e) .	▶ 27f		1 1	
g	Public support percentage (line 27e (numera					27g	0 %

Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief

description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

35

COLIEC	Mile A (1 01111 990 01 990-22) 2004			aye -
Par	Private School Questionnaire (See page 7 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30				
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe, if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
С	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d	<u> </u>	
е	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
ħ	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		<u> </u>
b	Has the organization's right to such aid ever been revoked or suspended?	34b		

Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05

Page	5

Pa	rt VI-A Lobbying Expenditures by Ele (To be completed ONLY by an					struction	s.)	
Che	ck ▶ a ☐ if the organization belongs to an affilia		eck ▶ b 🔲 ıf			Ilmited cont	trol" p	provisions apply.
	Limits on Lobbyir (The term "expenditures" mear				,	(a) Affiliated grout totals	ιþ	(b) To be completed for ALL electing organizations
		<u>.</u>			36		\dashv	
36 37	Total labburg expenditures to influence public				37			
3 <i>1</i> 38	Total lobbying expenditures to influence a legis Total lobbying expenditures (add lines 36 and 3		38		寸			
39	Other exempt purpose expenditures		39					
40	Total exempt purpose expenditures (add lines 3				40			
41	Lobbying nontaxable amount Enter the amount							
•	· -	bbying nontaxa	-	_	 			
	Not over \$500,000 20% o			_				
	Over \$500,000 but not over \$1,000,000 \$100,0							
	Over \$1,000,000 but not over \$1,500,000 . \$175,0	•		1	41			
	Over \$1,500,000 but not over \$17,000,000. \$225,0	•						
		,000						
42	Grassroots nontaxable amount (enter 25% of li				42			
43	Subtract line 42 from line 36. Enter -0- if line 43				43			
44	Subtract line 41 from line 38. Enter -0- if line 4	1 is more than lii	те 38		44			
	Caution: If there is an amount on either line 43	or line 44. vou r	nust file Form 47	720.				
		raging Perio			1			
	(Some organizations that made a section See the instructions for	n 501(h) election	do not have to	complete all	of the fi		s bel	ow
		Lob	bying Expendit	ures During	4-Year	Averaging	Per	riod
	Calendar year (or fiscal year beginning in) ▶	(a) (b) (c) 2004 2003 2002					(e) Total	
	neodi yedi begining ny	200.		1			\dashv	
45	Lobbying nontaxable amount							
46	Lobbying ceiling amount (150% of line 45(e))						_	
47	Total lobbying expenditures							
48	Grassroots nontaxable amount							
49	Grassroots ceiling amount (150% of line 48(e))			1				
50	Grassroots lobbying expenditures							
Pa	rt VI-B Lobbying Activity by Nonelect (For reporting only by organization)			Part VI-A)	(See pa	age 11 of	the	instructions.)
	ng the year, did the organization attempt to influ		_		iding any	Yes	No	Amount
atte	mpt to influence public opinion on a legislative π	natter or referend	lum, through the	use of				
а								
b	Paid staff or management (Include compensation	on in expenses r	eported on lines	c through h	1.)	.	-	
С	Media advertisements					·	\dashv	
d	Mailings to members, legislators, or the public					·	-	
е	Publications, or published or broadcast statem					· 	-	
f	Grants to other organizations for lobbying purp					·		
g	Direct contact with legislators, their staffs, gove		_	-		·		
h			-			·		
ı	Total lobbying expenditures (Add lines c through if "Yes" to any of the above, also attach a state	ement giving a d	etailed description	on of the lol	 obying ad	 ctivities.		

Par	t VI			nsfers To and Transaction 1 of the instructions.)	s and Relationships With Nonchar	ritable	Exe	mpt
51					following with any other organization design 527, relating to political organizations?		ın se	ection
а		•		to a noncharitable exempt organ			Yes	No
_		·		· · · · · · · · · · · · · · · · · · ·	I .	51a(i)		
	٠,	Other assets				a(ii)		
h		er transactions:						
			es of assets with a	noncharitable exempt organizat	ion	b(i)		
		_		itable exempt organization		b(ii)		
				ner assets		b(iii)		
			• •			b(iv)		
			-	. 		b(v)		
		•		ship or fundraising solicitations		b(vi)		
c				sts, other assets, or paid employ		С		
ď		-			Column (b) should always show the fair n		alue.	of the
ŭ	goo	ds, other assets, o	r services given by	the reporting organization If the	ne organization received less than fair mass, other assets, or services received	arket va	alue i	n any
(a	a)	(b)		(c)	(d)			
Line		Amount involved	Name of none	chantable exempt organization	Description of transfers, transactions, and sha	ırıng arra	ngeme	ents
						-		
						-		
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	<u> </u>							
	des	_	01(c) of the Code (other than section 501(c)(3)) or i	e or more tax-exempt organizations n section 527?] Yes] No
		(a)		(b)	(c)			
		Name of organiz	zation	Type of organization	Description of relationship			
		· · · · · · · · · · · · · · · · · · ·	·					
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			· . <u>-</u> · · · · · · · · · · · · · · · · · · ·					
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