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832001 12-18-08

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

<u>A F</u>	or the	2008 calendar year, or tax year beginning $JUL~1$, 2008 and ending	<u>JUN 30, 2009</u>	
B c	heck if	Please C Name of organization	D Employer identific	ation number
	∏Addres:	USE IN ERNATIONAL BACCALAUREATE ASSOCIATION		
<u> </u>	_change ∏Name	print or OF ROCKI MOUNTAIN SCHOOLS		597391
	_ change Initial return	See Number and street (or P 0 box if mail is not delivered to street address) Room/su	1	
	Termin- ation	Specific Instruc- 6730 COORS COURT		108-3218
	Amende		G Gross receipts \$	494,675.
	Applica	M(VADA, CO 00004-2047	H(a) Is this a group ref	
	pending	F Name and address of principal officer. DONALD MARSH 12411 MARIA CIRCLE, BROOMFIELD, CO 80020	for affiliates?	Yes X No
		H(b) Are all affiliates incli	uded? Yes No	
		mpt status: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527		list. (see instructions)
		e: ► WWW.IBARMS.ORG	H(c) Group exemption	
			ear of formation 2003 M	State of legal domicile CC
Pa		Summary Briefly describe the organization's mission or most significant activities: SEE FORM	ממ מפוד דד ייים אם	I, LINE 1 &
& Governance		SCHEDULE O FOR CONTINUATION	330, PART 111	t, DINE I &
r.	2 (Check this box If the organization discontinued its operations or disposed of m	nore than 25% of its assets	
8	3 1	lumber of voting members of the governing body (Part VI, line 1a)	3	8
<u>ق</u>	4 1	lumber of independent voting members of the governing body (Part VI, line 1b)	4	3
es	5 T	otal number of employees (Part V, line 2a)	5	0
ctivities		otal number of volunteers (estimate if necessary)	6	23
Ę	7a T	otal gross unrelated business revenue from Part VIII, line 12, colomb (CVLD)	7a	0.
	b N	lot uprelated business taxable income from Form 90031 line 34	7b	0.
		1≟1 DEC 2 2 2000 1811	Prior Year	Current Year
9	8 (Contributions and grants (Part VIII, line 1h)	10,600.	13,150.
Revenue	9 F	Program service revenue (Part VIII, line 2g)	277,641.	476,947.
ě	10 h	nvestment income (Part VIII, column (A), lines 3, 4, and 18)	3,263.	4,578.
-	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12]	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	291,504.	494,675.
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)	5,000.	8,445.
	14 E	Benefits paid to or for members (Part IX, column (A), line 4)		
es	15 8	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
Expenses	16 a F	Professional fundraising fees (Part IX, column (A), line 11e)		
ă	bΤ	otal fundraising expenses (Part IX, column (D), line 25)		
۳	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	140,216.	323,043.
	18 7	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	145,216.	331,488.
		Revenue less expenses Subtract line 18 from line 12	146,288.	163,187.
is s		ļ	Beginning of Year	End of Year
Assets or Balances	20 1	otal assets (Part X, line 16)	278,735.	441,922.
Net As Fund E	21	otal liabilities (Part X, line 26)	0.	0.
		Net assets or fund balances. Subtract line 21 from line 20	278,735.	441,922.
Pa	ert II	Signature Block		
		Under penalties of penury, I declare that I have examined this return, including accompanying schedules and stateme and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	nts, and to the best of my knowledg dge	e and belief, it is true, correct,
٥.		V the process	12-6-	09
Sigr	- 1	Signature of officer	Date	<u> </u>
Here	e	DONALD MARSH, PRESIDENT	5410	
		Type or print name and title	·	
		Preparer's Date		r's identifying number
Paid		signature	self- employed ► [(see inst	tructions)
	arer's	Firm's name (or	EIN ►	
Use	····,	yours if self-employed),		
		address, and ZIP + 4	Phone no	
May		S discuss this return with the preparer shown above? (see instructions)	11101010	Yes No
	01 12-18		instructions	Form 990 (2008)
0.1/1/	UI 12-10	-vo Lint variation has and appropriate lieutration Activities and the Schalafe	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 21111 222 12000

	1990 (2008) OF ROCKY MOUNTAIN SCHOOLS	84-159/391	Page 2
Pai	rt III Statement of Program Service Accomplishments (see instructions)		_
1	Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION		
	,	AND DEVICE OF	TNC
	THE IMPROVEMENT, SUPPORT AND RECOGNITION OF ESTABLISHED		
		SCHOOLS OF	THE
	ROCKY MOUNTAIN REGION. THE AIMS AND GOALS ARE AS FOLLOW	<i>IS</i> : (1) SUPF	PORT
	THE ROLE OF THE HIGH SCHOOL I.B. COORDINATOR; (2) FACILI	TATE	
2			
2	Did the organization undertake any significant program services during the year which were not listed on	٦	Te l
	the prior Form 990 or 990-EZ?	L Yes	X No
	If "Yes", describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
•			
	If "Yes", describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by exp	enses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of g	rants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported		
	anocations to others, the total expenses, and revenue, in any, let dust program service reported		
	264 120	. 176	177
4a			177.)
	PROVIDE EDUCATIONAL TRAINING WORKSHOPS AND CONFERENCES F	OR SCHOOL	
	LEADERS AND TEACHERS IN THE INTERNATIONAL BACCALAUREATE	PROGRAM.	
			-
			770
4b		venue \$	770.)
	PROVIDE MIDDLE YEARS STUDENT SUMMIT PROGRAM		
			
4c	(Code:) (Expenses \$ 6,000 • including grants of \$ 6,000 •) (Re	venue \$)
	PROVIDE SCHOLARSHIPS TO STUDENTS FOR TRAVEL	•	•
	THOUTH BENEMINDING TO STORM TO THE THOUTH		
			
		.	
4d	Other program services. (Describe in Schedule O.)		
÷ū			
	(Expenses \$ including grants of \$) (Revenue \$		
4e	Total program service expenses ▶\$ 279,363. (Must equal Part IX, Line 25, column (B))		
		Form 9	90 (2008)

OF ROCKY MOUNTAIN SCHOOLS 84-1597391 Form 990 (2008) Page 3 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A X 2 Х 2 Is the organization required to complete Schedule B, Schedule of Contributors? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for Х 3 public office? If "Yes." complete Schedule C. Part I Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 4 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 5 reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice X 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, Х 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? If "Yes," complete Х 8 Schedule D. Part III 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 Х 9 credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Х 10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? Х If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable 11 Did the organization receive an audited financial statement for the year for which it is completing this return that was 12 Х 12 prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII X 13 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Х 14a Did the organization maintain an office, employees, or agents outside of the U.S.? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, X and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity 15 Х located outside the United States? If "Yes," complete Schedule F, Part II 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals 16 Х 16 located outside the United States? If "Yes," complete Schedule F, Part III Х Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I 17 17 X Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 18 19 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X 21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 X 22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 X Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J 23 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. X 24a If "No", go to question 25 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a X 25a disqualified person during the year? If "Yes," complete Schedule L, Part I b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a X 25b prior year? If "Yes," complete Schedule L, Part I 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

contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial

Form **990** (2008)

26

X

Х

27

84-1597391

Form 990 (2008)

OF ROCKY MOUNTAIN SCHOOLS

Page 4

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
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		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	İ		
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
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		X
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		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1		
	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

Form **990** (2008)

OF ROCKY MOUNTAIN SCHOOLS 84-1597391 Form 990 (2008) 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 0 U.S. Information Returns. Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming Х (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 0 filed for the calendar year ending with or within the year covered by this return 2b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return, (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3a b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3ь 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5с Х 6a 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 Organizations that may receive deductible contributions under section 170(c). Х a Did the organization provide goods or services in exchange for any guid pro quo contribution of more than \$75? 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 Х to file Form 8282? 7c d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7е benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. 9a a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9ь Section 501(c)(7) organizations. Enter: N/A a Initiation fees and capital contributions included on Part VIII, line 12 10a 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter N/A 11a a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against

12a

11b

amounts due or received from them.)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Form 990 (2008)

OF ROCKY MOUNTAIN SCHOOLS

84-1597391

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

<u>ec</u>	tion A. Governing Body and Management		Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,		.03	110
	processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body	8		
b	Enter the number of voting members that are independent	3		
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		Х
	Does the organization have members, stockholders, or other persons who may elect one or more members of the	- <u>-</u> -		
	governing body?	7a		Х
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			1
•	by the following:			
-	,	8a	Х	Ì
	The governing body?	8b	X	
	Each committee with authority to act on behalf of the governing body?	9a	71	Х
	Does the organization have local chapters, branches, or affiliates?	90		
D	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	۵.		
	and branches to ensure their operations are consistent with those of the organization?	9b		
0	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	1.0	Х	
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10		
1	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			Х
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		_^
sec	tion B. Policies			Γ
			Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14	<u> </u>	X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a		X
b	Other officers or key employees of the organization?	15b		X
	Describe the process in Schedule O. (see instructions)			
I6a	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_		X
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	i		
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) availab	le for		
-	public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fine	incial	
. 5	statements available to the public.	unu 11110	. IUIAI	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the organization of the organization of the property of the person who possesses the books and records of the organization of the public of the person who possesses the books and records of the organization of the orga	ation:	•	
		auvil. 🕨		
20	LORI DOWD - 303-561-1222 408-3218			

Form 990 (2008) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

(A)	(B)				C)			(D)	(E)	(F)	
Name and Title	Average	Position (check all that apply)						Reportable	Reportable	Estimated amount of	
	hours per week	Individual trustee or director	Institutional frustee		pioyee	Highest compensated Componee	Ĭ	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
DORSEE JOHNSON-TUCKER PRESIDENT	2.00	X		x				0.	0.	0.	
DONALD MARSH PRESIDENT-ELECT	2.00	х		х				0.	0.	0.	
CHRISTINE HAYS SECRETARY	2.00	x		X				0.	0.	0.	
GLENDA NOCHTRIEB											
TREASURER	2.00	X		X				0.	0.	0.	
								<u>-</u>			
		_	_	_							

OF ROCKY MOUNTAIN SCHOOLS

Par	T VII Section A. Officers, Directors, Tru	ıstees, Key Eı	nplo	oyee	s, a	nd l	High	est	Compensated Employ	rees (continued)				
	(A)	(B)			•	C)			(D)	(E)	(F)			
	Name and title	Average hours per	(cl		Posi call		app	oly)	Reportable compensation from	Reportable compensation from related		amo	nated unt c her	
		week	Indiwdual trustee or director	35			bated		the organization	organizations (W-2/1099-MISC	,	compe fror	nsat n the	•
			iwdual truste	Institutional trustae	Officer	employee	Highest compensated employee	i i	(W-2/1099-MISC)			orgar and i organ	elate	ed
			<u>1</u>	ISI	₹	Ą	1 E	Ē			\dashv			
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											1		<u>-</u>	
	Total			1	1	1		I	0.		0.			0
	Total number of individuals (including those compensation from the organization	e ın 1a) who re	ceiv	ed r	nore	tha	.n \$1	00,0	000 in reportable		<u> </u>	Ι¥	es	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			e, ke	y en	nplo	yee,	or h	nighest compensated e	mployee on		3		х
4	For any individual listed on line 1a, is the si and related organizations greater than \$15	um of reportab	le co							the organization		4		x
5	Did any person listed on line 1a receive or the organization? If "Yes," complete Sched	accrue compe	nsat	ion 1						rices rendered to		5		X
Sec	tion B. Independent Contractors	ole o for sacri	pors	,071										
1	Complete this table for your five highest countries the organization. NONE	empensated in	depe	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of comp	ensa	ation fro	m	
	(A) (B) Name and business address Description of services								services	Co	(C) ompens	ation	1	
					_									
								_						
	Total number of independent contractors (including thes	e in	1) w/	ho r	ece!	ved	mor	re than \$100 000 in con	ppensation				
	from the organization	0	- "	., **	.,5 ,					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				

OF ROCKY MOUNTAIN SCHOOLS 84-1597391 Form 990 (2008) Page 9 Part VIII Statement of Revenue (D) (A) (B) (C) Revenue Related or Unrelated Total revenue excluded from tax under sections 512, exempt function business revenue revenue 513, or 514 1 a Federated campaigns 1a 12,650. **b** Membership dues 1b 1c c Fundraising events 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and 500. similar amounts not included above 9 Noncash contributions included in lines 1a-1f \$_ 13,150. h Total. Add lines 1a-1f **Business Code** 2 a EDUCATIONAL WORKSHOPS/ 476,947. 611600 476,947. Program Service Revenue f All other program service revenue 476,947. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 4,578. 4,578. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 6 a Gross Rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d 494,675. 481,525 Ō. 0. Total Revenue Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e

Form 990 (2008)

84-1597391 Page 10

Part IX Statement of Functional Expenses

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

	All other organizations must compl	ete column (A) but are	not required to comple	ete columns (B), (C), and	(D).
	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	2,445.	2,445.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	6,000.	6,000.		
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				
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				
8	Pension plan contributions (include section 401(k)				
-	and section 403(b) employer contributions)				
9	Other employee benefits		-		
10	Payroll taxes				
11	Fees for services (non-employees):			-	
''а	Management	41,008.	9,858.	31,150.	
b	Legal				
c	Accounting	1,335.		1,335.	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
9	Other	,			
12	Advertising and promotion	10,870.	10,870.		
13	Office expenses	1,826.		1,826.	
14	Information technology	1,655.	-	1,655.	
15	Royalties	39,280.	39,280.		
16	Occupancy				
17	Travel	23,649.	13,374.	10,275.	
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	341.		341.	
23	Insurance			0111	
24	Other expenses Itemize expenses not covered				
24	above (Expenses grouped together and labeled				
	miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	FACILITIES RENTAL	115,243.	115,243.		
b	SPEAKERS FEES & EXPENSE	38,077.	38,077.		
c	SUPPLIES	18,573.	18,161.	412.	
ď	MEALS & ENTERTAINMENT	9,494.	7,714.	1,780.	
e	REGISTRATION COSTS	7,857.	7,857.		
f		13,835.	10,484.	3,351.	
25	Total functional expenses. Add lines 1 through 24f	331,488.	279,363.	52,125.	0.
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			1	
	educational campaign and fundraising solicitation				
92201	2 12-18-08				Form 990 (2008)

8<u>4-1597391</u> Page **11**

Pa	$\pi \lambda$	Balance Sheet	_								
					(A) Beginning of year		(B) End of year				
	1	Cash · non-interest-bearing	_		269,443.	1	440,4	23.			
	2	Savings and temporary cash investments				2					
	3	Pledges and grants receivable, net				3					
	4	Accounts receivable, net			10.	4		0.			
	5	Receivables from current and former officers, o	irectors	s, trustees, key							
		employees, or other related parties. Complete I				5					
	6	Receivables from other disqualified persons (as		r ·							
		4958(f)(1)) and persons described in section 49		t i							
		Part II of Schedule L				6					
ş	7	Notes and loans receivable, net				7					
Assets	8	Inventories for sale or use				8					
Ä	9	Prepaid expenses and deferred charges			8,000.	9		0.			
	10a	Land, buildings, and equipment: cost basis	10a	1,983.							
	ь	Less: accumulated depreciation Complete									
		Part VI of Schedule D	10b	484.	1,282.	10c	1,4	99.			
	11	Investments - publicly traded securities				11					
	12	Investments · other securities. See Part IV, line	11			12					
	13	Investments - program-related. See Part IV, line			13						
	14	Intangible assets				14					
	15	Other assets. See Part IV, line 11				15					
	16	Total assets. Add lines 1 through 15 (must equ	ual line	34)	278,735.	16	441,9	<u>22.</u>			
	17	Accounts payable and accrued expenses			17						
	18	Grants payable	_	··· ·	18						
	19	Deferred revenue	<u> </u>		19						
	20	Tax-exempt bond liabilities		20							
es	21	Escrow account liability. Complete Part IV of So		F		21	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
ij	22	Payables to current and former officers, director		· · · · · · · · · · · · · · · · · · ·							
Liabilities		highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22									
	23	Secured mortgages and notes payable to unre		23							
	24	Unsecured notes and loans payable		24							
	25	Other liabilities. Complete Part X of Schedule D)			25					
	26	Total liabilities. Add lines 17 through 25		0.	26		0.				
		Organizations that follow SFAS 117, check h	ere 🕨	and complete			1000 1001 1 101 1 101				
S		lines 27 through 29, and lines 33 and 34.		·							
ž	27	Unrestricted net assets				27					
ala	28	Temporarily restricted net assets				28					
D B	29	Permanently restricted net assets				29					
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, or	check I	nere ▶ X and							
ō		complete lines 30 through 34.									
ets	30	Capital stock or trust principal, or current funds	3		0.	30		0.			
Ass	31	Paid-in or capital surplus, or land, building, or e	quipme	ent fund	0.	31		0.			
e e	32	Retained earnings, endowment, accumulated in	ncome,	or other funds	278,735.	32	441,9				
Z	33	Total net assets or fund balances			278,735.	33	441,9				
	34	Total liabilities and net assets/fund balances			278,735.	34	441,9	22.			
Pa	rt XI	Financial Statements and Reporting	9	· ••• · · · · · · · · · · · · · · · · ·	·						
	A = -	nunting mathed used to access the Ferry CCC	T	anh Marrie [Other		Yes	No			
1		ounting method used to prepare the Form 990:					2a X	ŀ			
2a		e the organization's financial statements compile			iccountant r			Х			
b		e the organization's financial statements audited	•	•	albility for avaraight of the	audi+	2b	^			
С		If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,									
3 -		review, or compilation of its financial statements and selection of an independent accountant? As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit									
Ja		3a	Х								
h		and OMB Circular A-133? es," did the organization undergo the required <u>au</u>	udit or a	audits?			3b				
											

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

2008 Open to Public Inspection

OMB No 1545-0047

Name of the organization

INTERNATIONAL BACCALAUREATE ASSOCIATION OF ROCKY MOUNTAIN SCHOOLS

Employer identification number 84-1597391

Pa	rt I	Reason 1	for Public Charl	ty Status (All organiz	ations mu	st complet	e this part	.) (see inst	tructions)			
The	organı	zation is not a	private foundation t	pecause it is: (Please ch	eck only o	ne organiz	ation)					
1		A church, cor	vention of churches	s, or association of chur	ches desci	ribed in se	ction 170	(b)(1)(A)(i)	•			
2				0(b)(1)(A)(ii). (Attach Sc								
3		A hospital or	a cooperative hospit	al service organization of	described	n section	170(b)(1)	(A)(iii) . (Att	ach Sche	dule H)		
4		A medical res	search organization of	perated in conjunction	with a hos	pıtal descr	ibed in se	ction 170	(b)(1)(A)(iii). Enter th	e hospital's name,	,
		city, and state	e:									
5		An organizati	on operated for the l	penefit of a college or ur	niversity ov	vned or op	erated by	a governr	nental unit	describe	d in	
		-	(b)(1)(A)(iv). (Comple									
6				ent or governmental unr	t described	d in sectio	n 170(b)(1)(A)(v).				
7	\Box	•	. •	eives a substantial part				• • • • •	r from the	general p	ublic described in	
-		•	b)(1)(A)(vi). (Comple							•		
8				ection 170(b)(1)(A)(vi).	(Complete	Part II.)						
	$\overline{\mathbf{X}}$	•		eives: (1) more than 33		•	om contri	butions, m	nembershii	o fees, and	d aross receipts fro	om
•		•	•	octions - subject to certa								
				axable income (less sect								
			509(a)(2). (Complete			,			,			
10				perated exclusively to te	st for publ	c safety S	ee sectio	n 509(a)(4	I). (see ins	tructions)		
11	雨			perated exclusively for the							ourposes of one or	
•				itions described in secti								
				organization and compl				•	·			
		а П Туре І	·· <u> </u>	¬ ~		e III - Func		tegrated		d 🔲	Type III - Other	
е				t the organization is not	controlled	directly of	r indirectly	by one or	more disc	qualified p	ersons other than	
•				han one or more publicly								
f				ten determination from							.,,,	
•		•	rganization, check th				, , , ,,	, ,,				
g				rganization accepted ar	nv aift or c	ontribution	from any	of the follo	owing pers	sons?		
3		•		rectly controls, either a							Yes	No
				upported organization?	_						11g(i)	
		-		described in (i) above?	•						11g(ii)	
		(iii) A 35% d	controlled entity of a	person described in (i)	or (II) abov	e?					11g(iii)	
h		Provide the fe	ollowing information	about the organizations	the organ	ization sup	oports.					
			Ū	·	•	,	•					
(1)	Nome	of supported	(ii) EIN	(iiı) Type of	(IV) Is the	rganization	(v) Did yo	u notify the	(vi) Is	the	(vii) Amount of	
(1)		inization	(11) = 11	organization		sted in your			organization (II) organiz	on in col ed in the	support	
	0.90			(described on lines 1-9 above or IRC section	governing	document?	(i) of you	r support?	US	2		
				(see instructions))	Yes	No	Yes	No	Yes	No		
					<u> </u>							
						1						
						ļ						
					 			-	ļ	-		
						1						
					ļ	ļ		ļ	<u> </u>			
						1						

	Form 990 or 990·EZ) 2008	
Part II	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)	(1)(A)(vi)

Page 2

<u></u>	(Complete only if you checke	d the box on line 5	5, 7, or 8 of Part I.)				•••			
Sec	tion A. Public Support									
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
1	Gifts, grants, contributions, and					1				
	membership fees received. (Do not					1				
	include any "unusual grants.")									
2	Tax revenues levied for the organ-									
	ization's benefit and either paid to									
	or expended on its behalf				ļ					
3	The value of services or facilities									
	furnished by a governmental unit to									
	the organization without charge						_			
4	Total. Add lines 1 · 3									
5	The portion of total contributions									
	by each person (other than a									
	governmental unit or publicly									
	supported organization) included									
	on line 1 that exceeds 2% of the									
	amount shown on line 11,		[
	column (f)									
_6	Public Support. Subtract line 5 from line 4	<u> </u>	<u> </u>	L						
	ction B. Total Support		T	1			-			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
7	Amounts from line 4				1					
8	Gross income from interest,									
	dividends, payments received on		-							
	securities loans, rents, royalties									
	and income from similar sources				ļ 		-			
9	Net income from unrelated business									
	activities, whether or not the									
	business is regularly carried on			 	·	+				
10	Other income. Do not include gain									
	or loss from the sale of capital									
	assets (Explain in Part IV)									
11			<u> </u>	1	L	1				
12	Gross receipts from related activities,	•	•			12				
13	First five years. If the Form 990 is for	_	s tirst, second, thi	ra, τουπη, or τιπη τ	ax year as a section	on 501(c)(3)	▶□			
Sac	organization, check this box and stop etion C. Computation of Publ		rcentage							
14	Public support percentage for 2008 (column (fl)		14	<u> </u>			
15	Public support percentage from 2007	, , ,	=	COIGITIIT (1/)		15				
	33 1/3% support test - 2008. If the c			on line 13, and line	14 is 33 1/3% or	\- <u></u>				
	stop here. The organization qualifies	-			1413 00 17070 01	more, encon uno ce	▶ □			
	33 1/3% support test - 2007. If the c		-		1 line 15 is 33 1/39	% or more, check th	us box			
•	and stop here. The organization qual	-			3 11110 10 10 10 170	75 61 111616, 611661 11	▶ □			
17=	10% -facts-and-circumstances tes		•		e 13, 16a. or 16b.	and line 14 is 10%	or more.			
		-								
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization									
H	b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or									
•										
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization									
18	Private foundation. If the organization						s▶□			
						edule A (Form 990				

INTERNATIONAL BACCALAUREATE ASSOCIATION 84-1597391 Page 3 OF ROCKY MOUNTAIN SCHOOLS Schedule A (Form 990 or 990-EZ) 2008 Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 4,965 5,725. 6,800. 11,100. 13,150. 41,740. include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 100,283. 243,095. 476,947. 134,129. 277,141. 1231595. organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 490,097. 106,008. 249,895. 288,241. 139,094. 1273335. 6 Total. Add lines 1 · 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9. 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b 1273335. 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in)▶ (c) 2006 (e) 2008 (a) 2004 **(b)** 2005 (d) 2007 (f) Total 249,895. 139,094 106,008 288,241. 490,097 1273335. 9 Amounts from line 6 10a Gross income from interest. dividends, payments received on securities loans, rents, royalties 3,263 4,578. 7,841. and income from similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 3,263. 7,841. 4,578. c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,

	regularly carried on				
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)				
13	Total support (Add tines 9, 10c, 11, and 12)				1281176.
14	First five years. If the Form 990 is for	the organization's first, second	i, third, fourth, or fifth tax y	ear as a section 501(c)(3) of	organization,
	check this box and stop here				▶ 🗀
Se	ction C. Computation of Publ	ic Support Percentage			
15	Public support percentage for 2008 (ine 8, column (f) divided by line	13, column (f))	15	99.39 %
16	Public support percentage from 2007	Schedule A, Part IV-A, line 27g	<u> </u>	16	100.00 %
Se	ction D. Computation of Inve	stment Income Percent	age		
17	Investment income percentage for 20	08 (line 10c, column (f) divided	by line 13, column (f))	17	.61 %
18	Investment income percentage from	2007 Schedule A, Part IV-A, line	27h	18	%
19a	a 33 1/3% support tests - 2008. If the more than 33 1/3%, check this box a	J			d line 17 is not ► X
t	o 33 1/3% support tests - 2007. If the	organization did not check a be	ox on line 14 or line 19a, an	id line 16 is more than 33 1	1/3%, and
	line 18 is not more than 33 1/3%, che	ck this box and stop here. The	organization qualifies as a	publicly supported organi	zation 🕨 📖

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule D

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

2008
Open to Public Inspection

Name of the organization

INTERNATIONAL BACCALAUREATE ASSOCIATION OF ROCKY MOUNTAIN SCHOOLS

 $\begin{array}{c} \textbf{Employer identification number} \\ 84-1597391 \end{array}$

Pa	rt 1 Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	ised funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a		pe used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor or other impermissible p	orivate benefit?
Pa			
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or p	, , , , , , , , , , , , , , , , , , ,	istorically important land area
	Protection of natural habitat		fied historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a co	nservation easement on the last day
_	of the tax year.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	- III III III III II II II II II II II I		Held at the End of the Year
а	Total number of conservation easements		2a
Ь	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
ď	Number of conservation easements included in (c) acquired	2d	
3	Number of conservation easements modified, transferred, re		
•	vear ▶	,	
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		and
•	enforcement of the conservation easements it holds?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, a	nd enforcing easements during the year	<u> </u>
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
_	and section 170(h)(4)(B)(ii)?	,	Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expens	
٠	include, if applicable, the text of the footnote to the organiza	·	
	conservation easements.	manda datamento trat documento	o the enganization o appearating for
Pa	rt III Organizations Maintaining Collections o	f Art. Historical Treasures. or (Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	•	
	the footnote to its financial statements that describes these	· ·	
h	If the organization elected, as permitted under SFAS 116, to		ince sheet works of art, historical treasures.
_	or other similar assets held for public exhibition, education, or	•	
	these items:	or research in refunction of public service	so, provide the fellowing amounts relating to
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		> \$ > \$
2	,	accuracy or other cimilar access for finance	
2	If the organization received or held works of art, historical tre the following amounts required to be reported under SFAS 1		iai gaili, provide
_	·	To relating to these items:	> ¢
a	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
D	Assets included in Form 990, Part X		Ψ

	· · · · · · · · · · · · · · · · · · ·	CKY MOUNTA	IN S	CHOOLS	<u> </u>			<u>84-15</u>	<u>9739:</u>	l P	age 2
Par	t III Organizations Maintaining C	ollections of A	rt, Hist	orical Tr	easures,	or Othe	r Simil	ar Asse	ts (conti	nued))
3	Using the organization's accession and other	records, check any	y of the f	ollowing tha	at are a signif	icant use	of its col	lection itei	ms (chec	k all	
	that apply):										
а	Public exhibition	c	ı 🔲	Loan or exc	hange progr	ams					
b	Scholarly research	•	• 🔲	Other							
c	Preservation for future generations										
4	Provide a description of the organization's co	llections and explai	in how th	ey further t	he organizat	ion's exer	npt purpo	se in Parl	XIV.		
5	During the year, did the organization solicit or	receive donations	of art, hi	storical trea	sures, or oth	er sımılar	assets				
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Trust, Escrow and Custodial					ered "Yes	to Form	990, Par	l IV, line 9	9. or	
	reported an amount on Form 990, Par		,	J				•			
1a	Is the organization an agent, trustee, custodia	an or other intermed	diary for	contribution	ns or other as	sets not	ıncluded				
	on Form 990, Part X?		•					[Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowina i	able:				-			
_									Amount		
С	Beginning balance						1c		74,1100111		
	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1f				
	Did the organization include an amount on Fo	orm 990 Part X line	212						Yes	\neg	No
	If "Yes," explain the arrangement in Part XIV.	7111 550, 1 art 7, iine	, 21.					<u> </u>	J 163		J 140
Par		organization answ	ered "Ye	s" to Form 9	990 Part IV	line 10					
		(a) Current year	ſ	rior year	(c) Two yea		(d) Three y	pare hack	(e) Four	VASTE	hack
12	Beginning of year balance	(a) Ourient year	19/ 1	iioi yeai	(C) TWO year	13 Dack	d) illies y	Cars Dack	(e) i oui	years	Dack
1a 5	Contributions	<u>-</u>			 		***************************************				
b	Γ	<u> </u>	· · · · · · · · · · · · · · · · · · ·	······································	 		······································			··········	
C	Investment earnings or losses				 		•••••				·····
đ	Grants or scholarships		 	·····	 					··········	······
е	Other expenditures for facilities										
	and programs		ļ	······································	ļ				~~~~~		··········
Ť	Administrative expenses		ļ	······							
9	End of year balance		1		<u> </u>						
2	Provide the estimated percentage of the year	end balance held a									
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
		%									
За	Are there endowment funds not in the posses	ssion of the organiz	ation tha	it are held a	and administe	ered for th	ne organiz	zation	_		
	by:								$\overline{}$	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		<u> </u>
b	If "Yes" to 3a(ii), are the related organizations	listed as required of	on Sched	dule R?					3ь		L
4	Describe in Part XIV the intended uses of the	organization's end	owment	funds.							
Par	t VI Investments - Land, Building	s, and Equipm	ent. Se	e Form 990	, Part X, line	10.					
	Description of investment	(a) Cost or o	other	(b) Cost	t or other	(c) De	epreciatio	n	(d) Book	valu	е
		basis (investi	ment)	basis	(other)						
1a	Land										
b	Buildings										
С	Leasehold improvements										
	Equipment								_		
-	• •				1 092		1	Q A	 -	1 1	<u>a a </u>

Schedule D (Form 990) 2008

Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c))

OF ROCKY MOUNTAIN SCHOOLS Schedule D (Form 990) 2008

Schedule D (Form 990) 2008 OF ROCKY	MOUNTAIN SCHOOLS	84	-1597391 Page 3
Part VII Investments - Other Securities. Se	ee Form 990, Part X, line 12.		
(a) Description of security or category	(b) Book value	(c) Method of valua	ition:
(including name of security)	(b) Book value	Cost or end-of-year mar	ket value
Financial derivatives and other financial products			
Closely-held equity interests			
Other	-		
Other	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	·
	 		
	<u> </u>		
			· · · · · · · · · · · · · · · · · · ·
	!		
Total. (Col (b) should equal Form 990, Part X, col (B) line 12)		•••••	
Part VIII Investments - Program Related. S			
		(c) Method of valua	tion
(a) Description of investment type	(b) Book value	Cost or end-of-year mar	
		Cost of end-of-year mar	Net value
			*···
		 	
			······
Total (Col (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, line			(h) Daakwahia
(a)	Description		(b) Book value
,			
	***	-	
	· ·		
		·	·····
		-	<u> </u>
Total. (Column (b) should equal Form 990, Part X, col (B) I		<u>▶</u>	
Part X Other Liabilities. See Form 990, Part X			
(a) Description of liability	(b) Am	iount	
Federal income taxes			
		 [
	+	<u></u>	
<u></u>			
Total. (Column (b) should equal Form 990, Part X, col (B)	ine 25.)		

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. 832053 12-23-08

84-1597391 Page 4 Schedule D (Form 990) 2008 OF ROCKY MOUNTAIN SCHOOLS Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements 494,675 Total revenue (Form 990, Part VIII, column (A), line 12) 331,488. 2 2 Total expenses (Form 990, Part IX, column (A), line 25) 163,187. 3 3 Excess or (deficit) for the year. Subtract line 2 from line 1 4 4 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 5 6 6 Investment expenses 7 7 Prior period adjustments 8 8 Other (Describe in Part XIV) 9 Total adjustments (net). Add lines 4-8 9 163,187. 10 10 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains on investments 2a **b** Donated services and use of facilities 2b c Recoveries of prior year grants 2c 2d d Other (Describe in Part XIV) e Add lines 2a through 2d 2e 3 3 Subtract line 2e from line 1 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) 4b c Add lines 4a and 4b 4c 5 Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25. 2a a Donated services and use of facilities **b** Prior year adjustments 2ь c Losses reported on Form 990, Part IX, line 25 2c d Other (Describe in Part XIV) 2d 2e e Add lines 2a through 2d 3 Subtract line 2e from line 1 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 4b b Other (Describe in Part XIV) c Add lines 4a and 4b 4c Total expenses Add lines 3 and 4c. (This should 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 III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

SCHE	SCHEDULEI								OMB No. 1545-0047	545-0047
(Forn	(Form 990)			Grants and Governn	ants and Other Assistance to Organizatio Governments, and Individuals in the U.S.	irants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	æ		2008	8
Departr Internal	Department of the Treasury Internal Revenue Service		▼ Сощр	Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.	n answered "Yes," on F ■ Attach to Form 990.	," on Form 990, Pa m 990.	art IV, lines 21 or 22.		Open to Public Inspection	Public .
Name	Name of the organization	NI		SCHOOLS	ASSOCIATION	Z		_	Employer identification number 84-1597391	on number 97391
Part	 	General Information on Grants and Assistance	nd Assistance							
-	Does the organize	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	/ for the grants or ass	istance, and the select		[
	criteria used to av	criteria used to award the grants or assistance?	tance?		:				X Yes	2
<u>ا</u>	影	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for monit	oring the use of grant	funds in the Unite	d States				
Part	~~_	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Governments and	l Organizations in the	• United States. C	Somplete if the organiae organiae	anization answered "Y	es" on Form 990, Part	IV, line 21, for any	
	(a) Name and add	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	grant
							Trans.			
~	Enter total numbe	Enter total number of section 501(c)(3) and government organizations	nd government org	ganizations					A	
က	Enter total numbe	Enter total number of other organizations							•	
Ŧ	For Privacy Act	LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	tion Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2008	990) 2008

INTERNATIONAL BACCALAUREATE ASSOCIATION OF ROCKY MOUNTAIN SCHOOLS

Part III

Page 2

84-1597391

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Use Schedule I-1 (Form 990) if additional space is needed Schedule I (Form 990) 2008

Schedule I (Form 990) 2008 (f) Description of non-cash assistance (book, FMV, appraisal, other) Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (d) Amount of non-cash assistance °. 6,000. (c) Amount of cash grant (b) Number of recipients COLLEGIATE WORLD STUDIES SCHOLARSHIPS (a) Type of grant or assistance 832102 12-18-08

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

INTERNATIONAL BACCALAUREATE ASSOCIATION OF ROCKY MOUNTAIN SCHOOLS

Employer identification number 84-1597391

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CONTINUING PROGRAM DEVELOPMENT, CURRICULUM IMPROVEMENT AND CURRICULUM
IMPLEMENTATION; (3) PROVIDE A NETWORK FOR COLLABORATION AMONG
PROFESSIONAL STAFF OF I.B. PROGRAMS; (4) SERVE AS A CLEARINGHOUSE FOR
IDEAS AND MATERIALS RELATING TO I.B. CURRICULUM; (5) PROVIDE PUBLICITY
OF I.B. PROGRAMS AND ACHIEVEMENTS OF I.B. STUDENTS WITHIN THE REGION;
(6) SUPPORT PROGRAMS THAT ENCOURAGE INTERACTION BETWEEN I.B. STUDENTS
FROM THE REGION; (7) PROVIDE SUPPORT FOR DEVELOPING I.B. PROGRAMS
WITHIN THE REGION; (8) FOSTER RECOGNITION AND UNDERSTANDING OF THE
I.B.PROGRAM BY NORTH AMERICAN UNIVERSITIES AND COLLEGES; AND (9)
PROVIDE EDUCATION OF I.B. PROGRAMS FOR SCHOOLS, DISTRICTS, UNIVERSITIES
AND STATE AGENCIES.
FORM 990, PART VI, SECTION A, LINE 10: THE PRESIDENT REVIEWS THE 990
TOGETHER WITH THE ORGANIZATIONS FINANCIAL STATEMENTS. QUESTIONS THAT ARISE
DURING THE REVIEW PROCESS ARE FORWARDED TO THE TAX PREPARER AND THE
TREASURER.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS
GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON
REQUEST THROUGH ITS WEBSITE.
NO CHANGE IN PROCESS FROM PRIOR YEAR.

4562

Depreciation and Amortization (Including Information on Listed Property)

See separate instructions. ► Attach to your tax return.

990

OMB No 1545-0172

Attachment Sequence No 67 Identifying number

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Business or activity to which this form relates

INTERNATIONAL BACCALAUREATE ASSOCIATION OF ROCKY MOUNTAIN SCHOOLS

FORM 990 PAGE 10

81-1507201

	F ROCKI POUNTAIN SC	поопо	<u> </u>	ב ויב	JU PF	IGE IU		04-139/391
Par	t 1 Election To Expense Certain Proper	y Under Section 1	79 Note If you have any lis	ted pro	perty, co	omplete Part	V before yo	ou complete Part I
1 M	laximum amount. See the instructions	for a higher limit	for certain businesses				1	250,000.
2 To	otal cost of section 179 property place	d in service (see	instructions)				2	
3 TI	hreshold cost of section 179 property	before reduction	in limitation				3	800,000.
4 R	eduction in limitation. Subtract line 3 f	rom line 2. If zero	or less, enter -0-				4	
5 Do	ollar limitation for tax year. Subtract line 4 from line	1 If zero or less, enter	-0- If married filing separately, see	e instruct	ions		5	
6	(a) Description of pro	perty	(b) Cost (busin	ess use	only)	(c) Elected	cost	
7 Li	sted property. Enter the amount from	line 29	<u> </u>		7			
	otal elected cost of section 179 proper		in column (c), lines 6 and	7			8	
	entative deduction. Enter the smaller	-					9	
0 C	arryover of disallowed deduction from	line 13 of your 20	007 Form 4562				10	·
	usiness income limitation. Enter the sr	-		ro) or lı	ne 5		11	
	ection 179 expense deduction Add lin		•	•			12	
	arryover of disallowed deduction to 20			▶ [13			
	Do not use Part II or Part III below for				•		,	
Par	t II Special Depreciation Allowar	nce and Other D	epreciation (Do not Inclu	de liste	d proper	ty)		
			· · · · · · · · · · · · · · · · · · ·					
4 S	pecial depreciation for qualified proper	ty (other than list	ted property) placed in sei	rvice d	uring the	tax year	14	
	roperty subject to section 168(f)(1) ele	• ,			Ū	•	15	
	ther depreciation (including ACRS)						16	
Par		Include listed pr	operty.) (See instructions.	.)				
			Section A					
17 M	ACRS deductions for assets placed in	service in tax ye	ears beginning before 2008	 8			17	285.
	you are electing to group any assets placed in servi	-			eck here	▶ □		
			e During 2008 Tax Year (ral Deprecia	tion Syste	em
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation(business/investment use only - see instructions)		Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
9a	3-year property							
b	5-year property	1 1	558.	5	YRS.	HY	SL	56.
С	7-year property	1			•			
d	10-year property]						
е	15-year property	1						
f	20-year property	1 1						
g	25-year property]		2	5 yrs		S/L	
		/		T	.5 yrs.	MM	S/L	
h	Residential rental property	/		1	.5 yrs.	ММ	S/L	
		/		1	9 yrs.	MM	S/L	
i	Nonresidential real property	/				MM	S/L	
	Section C - Assets P	aced in Service	During 2008 Tax Year U	sing th	e Altern			tem
20a	Class life						S/L	
b	12-year]		1:	2 yrs	1	S/L	
С	40-year	,			0 yrs.	MM	S/L	
Par	t IV Summary (See instructions.)							
	isted property. Enter amount from line	28	-	-			21	
	otal. Add amounts from line 12, lines 1		es 19 and 20 in column (a	i), and	ine 21.			
	nter here and on the appropriate lines	-	·				22	341.
	or assets shown above and placed in	=	•					- · · · · · · · · · · · · · · · · · · ·
	ortion of the basis attributable to secti	•	y car, onto the	ŀ	23			
16251								Form 4562 (2008)

r.,	, , , , , , , , , , , , , , , , , , ,		ERNAT							ssoc	CIA	TIO	N	0.4	1507	201	_
_	m 4562 (2008) art V Listed Proper		F ROC													391	
<u> </u>	recreation, or a	amusement.) <i>vehicle for w</i>	hich vou ai	re usind	the	standar	d milea	ge rate o				•					
	through (c) of	Section A, ali	of Section	B, and	d Sec	tion C if	applic	<u>able</u>									
Sec	ction A - Depreciation a	and Other In	formation	(Cauti	on: S	See the I	nstruct	ions for l	ımıts fo	or passe	nge	r auton	nobiles)				
248	Do you have evidence to	support the bu	siness/inve	stment L	ise cla	aimed?	<u> </u>	res 🗌	□ No	24b lf	'Yes	s," is th	e evidei	nce writt	ten?	Yes [No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Busine investn use perce	ient	ot	(d) Cost or her basis	/hi	(e) sis for depr siness/inve use only	stment	(f) Recove perior		Met	g) hod/ ention	Depre	h) ciation iction	Ele sectio	(i) cted on 179 ost
25	Special depreciation all	owance for c	ualified list	ted pro	perty	placed	in serv	ice durin	g the t	ax year	and				-		
_	used more than 50% in												25				
<u>26</u>	Property used more that	an 50% in a c	qualified bu		use.					Г							
	 	 	-	% _			_				+				_		
		 	ļ	_ %							+						
		.	<u> </u>	%		-				<u> </u>						<u> </u>	
<u>27</u>	Property used 50% or I	ess in a qual	ified busine	ess use) :					· · · · · · · · · · · · · · · · · · ·							
		ļ <u> </u>		%							!	S/L <u>·</u>					
				%			_				!	S/L					
			<u> </u>	%								S/L -					
28	Add amounts in column	n (h), lines 25	through 2	7. Ente	r here	e and or	line 2	I, page 1					28				
29	Add amounts in column	n (I), line 26. E	nter here	and on	line 7	7, page	1								_ 29		
				Sect	tion E	B - Infor	mation	on Use	of Vel	hicles							
If y	mplete this section for veous provided vehicles to you be vehicles.														ng this s	ection f	or
					l:	a)	T	(b)		(c)		(0	n	- 1	e)	(1	n
30	Total business/investment	miles driven d	uring the			icle	l .	hicle	١,	/ehicle		Veh	•		ncle	Veh	
30			uning the		VEI	IICIO		illoie	· · · ·	remole_	\dashv	V 611	ICIE	VEI	licie	Veii	ICIE
	year (do not include com			-			-		 							-	
	Total commuting miles	_		-					 				-				
32	Total other personal (no	oncommuting	g) miles														
	driven			-					-								
33	Total miles driven during																
	Add lines 30 through 32	2							-	1							
34	Was the vehicle availab	ole for person	al use		<u>es</u>	No	Yes	No	Yes	No.	<u> </u>	Yes	No	_Yes	No	Yes	No
	during off-duty hours?																
35	Was the vehicle used p	rimarily by a	more			1											
	than 5% owner or relate	ed person?															
36	Is another vehicle availa	able for perso	onal						-								
	use ⁹]											
	·	Section C	- Questio	ns for l	Empl	oyers V	Vho Pro	vide Vel	hicles	for Use	by '	Their E	mploye	es			•
Ans	swer these questions to														re not m	ore than	5%
	ners or related persons.		-									-	, ,				
	Do you maintain a writte	en policy stat	tement tha	t prohil	bits a	ıll persoi	nal use	of vehicl	es, Inc	luding	omr	nuting,	by you	,		Yes	No
20	employees?			A	L						4						
30	Do you maintain a writte			•	•				•			•	our				
	employees? See the ins			-	•		nicers,	airectors	, or 1%	or mo	re ov	vners				-	-
	Do you treat all use of v	•		•													
40	Do you provide more th						ınforma	ition from	ı your	employ	ees a	about					
	the use of the vehicles,																
41	Do you meet the require	ements conc	erning qua	lified a	utom	obile de	monstr	ation use	?								ļ
	Note: If your answer to	37, 38, 39, 4	0, or 41 is	"Yes," (do no	ot comp	lete Se	ction B fo	or the c	covered	vehi	icles					<u></u>
P	art VI Amortization																
	(a) Description o	of costs		(b) Date amon begin	tization		(c) Amortiza amour			(d) Cod section	е		(e) Amortizat period or peri			(f) nortization r this year	
42	Amortization of costs th	nat begins di	Iring vour 2			er:							or port				
			3 / 55 / 2		. , , , ,	<u> </u>	-							I.			
									-		-						

43

44

43 Amortization of costs that began before your 2008 tax year

44 Total. Add amounts in column (f) See the instructions for where to report

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If y	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box		▶ X
-	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	•	
Do no	ot complete Part II unless you have already been granted an automatic 3-month extension on a previously fi	led For	m 8868.
Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
A cor	poration required to file Form 990·T and requesting an automatic 6-month extension · check this box and com	plete	
art I		•	▶ □
\// ot/	ner corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar	exten	sion of time
	income tax returns.		
noted not a /ou m	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic utomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consist submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file irs.gov/efile and click on e-file for Charities & Nonprofits	cally if nsolida	(1) you want the additional sted Form 990-T. Instead,
Гуре	or Name of Exempt Organization	Empl	oyer identification number
orint	INTERNATIONAL BACCALAUREATE ASSOCIATION	_	4 1507201
le by	OF ROCKY MOUNTAIN SCHOOLS	8	4-1597391
due dat iling yo etum	le for Number, street, and room or suite no. If a P.O. box, see instructions.		
nstruct			
Chec	k type of return to be filed (file a separate application for each return).		
X	Form 990 Form 990-T (corporation) Form 47	720	
	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52		
	Form 990-EZ Form 990-T (trust other than above) Form 60	069	
	Form 990-PF	370	
Te If t	LORI DOWD e books are in the care of ► 6730 COORS COURT - ARVADA, CO 80004-204 lephone No ► 303-561=1222 408-3218 FAX No. ►	ıs ıs foı	
1	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt FEBRUARY 15, 2010 , to file the exempt organization return for the organization named a		The extension
	is for the organization's return for		
	▶		
	► X tax year beginning JUL 1, 2008 , and ending JUN 30, 2009		
2	If this tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period
3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		***************************************
	nonrefundable credits. See instructions.	3 <u>a</u>	\$
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated		
	tax payments made Include any prior year overpayment allowed as a credit.	3ь	\$
С	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,		
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)	ļl	
	See instructions.	3c _	\$ N/A
auti	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form		EO for payment instructions.