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# **Return of Organization Exempt From Income Tax**

Open to Public Inspection

	. 990		Return of Organization Exempt From Inc	come Ta	ax		OMB No 1545-0047
For	n 000		Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Coo benefit trust or private foundation)	de (except b	lack lun	g	2008
Depa	artment of the Tre nal Revenue Serv	asury	<ul> <li>benefit trust or private foundation)</li> <li>The organization may have to use a copy of this return to satisfy state</li> </ul>	e renortina r	eaureme	ents	Open to Public Inspection
: —			10/01/00		cquir ciri	JII.G.	mapechon
					٦.		11 115 11
	Check if applicable	Please use IRS	÷ 11-11-11-11-11-11-11-11-11-11-11-11-11-	ON OF	□	Employ	er identification number
⊒′	Address change	label or	REALTORS, INC.			04 0	1527441
_ <u></u>	Name change	print or	Doing Business As	<u> </u>			537441
٦	nitial return	type.	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E	•	ne number
╡		See Specific	730 N. RAILROAD AVE.	<u> </u>	_	970-	669-1822
	Termination	Instruc-	City or town, state or country, and ZIP + 4		G	iross receipt	s\$ 228,635
_] /	Amended return	tions.	LOVELAND CO 80537				
	Application pending	F Name	and address of principal officer		H(a	) Is this a g	group return for
) 		DE	BBIE LONG		1	affiliates?	
S		73	O N RAILROAD		1 11/0	Are all aff included?	Tiliates Yes No
Š		LO.	VELAND CO 80537			If "No," at	ttach a list (see instructions)
	Tax-exempt statu	ıs X	501(c) ( <b>6</b> ) <b>◄</b> (insert no.) 4947(a)(1) or 527				
			nline.com		H(c	) Group ex	emption number
	Type of organization			Year of formation	<u> </u>		State of legal domicile CC
		ımmar					
•			ne organization's mission or most significant activities	-,			
			REALTORS				
<u>8</u>	BOAR	m of	REALTORS				
٦au							
Activities & Governance			_				
ઠ્ઠ	2 Check th			25% of its a	assets.	,	
8	3 Number	of voting	members of the governing body (Part VI, line 1a)				11
es	4 Number	of indepe	endent voting members of the governing body (Part VI, line 1b)				11
5	5 Total nur	nber of e	employees (Part V, line 2a)			5	3
5	6 Total nur	nber of v	olunteers (estimate if necessary)			6	
٩			ated business revenue from Part VIII, line 12, column (C)			7a	62,959
	•		siness taxable income from Form 990-T, line 34			7b	58,262
$\neg$	D HOLDING	iatoa bat	miles taxable interine train on the same and	Pri	or Year		Current Year
	8 Contribut	tions and	grants (Part VIII, line 1h)				
∄			revenue (Part VIII, line 2g)		194,4	196	157,251
Kevenue	•		e (Part VIII, column (A), lines 3, 4, and 7d)		19,		7,427
윤			art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		60,		58,815
		•	·	-	274,		223,493
$\dashv$			dd lines 8 through 11 (must equal Part VIII, column (A), line 12)	4		500	5,124
			r amounts paid (Part IX, column (A), lines 1-3)		0,	300	5,127
			r for members (Part IX, column (A), line 4)		<del></del>	260	
8			mpensation, employee benefits (Part IX, column (A), lines 5–10)		75,2	268	80,838
Expenses			raising fees (Part IX, column (A), line 11e RECEIVED				
8	<b>b</b> Total fund	draising	expenses (Fait IX, Column (D), line 25)				
ן ע	17 Other exp	penses (	Part IX, column (A), lines 11a-11d, 11f-24		80,		86,527
	18 Total exp	enses. A	Add lines 13-17 (must equal Part IX, column (24), line(25) 1 9 2010		164,	322	172,489
	•		penses. Subtract line 18 from line 12		110,		51,004
5 g				Beginn	ing of Yea	r	End of Year
lances	20 Total ass	ets (Par	X, line 16) OGDEN, UT-		748,	597	787,328
Bas	51 Total ligh	-	art X, line 26)		3,3	339	1,918
털털		-	d balances. Subtract line 21 from line 20	•	745,	358	785,410
P	art II Si		e Block		•		
				and statemer	nte and to	the heet	of my knowledge
	and	der penan I <b>beket</b> it i	es of perjury, I declare that I have examined this return, including accompanying schedules sripp, correct and complete. Deplaration of preparer (pther than officer) is based on all inf	ormation of wi	nich prepa	rer has ar	y knowledge
z Sig	ž   1	( _)_	1.15- 0103-11		ı	17	1572010
ວເ໘ ···	#i   <b>▶</b> ′	\ <u>\</u>					
SEALTH IN THE PARTY	e   [	Signatur	e of officer			Date	
ĬĨ.		7-K	- Brian Stering It - Treasurer				
嵾	5	Type or	onnt name and title				
3	Pro	parer's	Date		neck if	_ [	Preparer's identifying number (see instructions)
ţġi	d sign	nature	Matherine & Petitison 1/0	4/10 se	lf- nployed		P00055827
۶'n	parer's		KITTY PETERSON & ASSOCIATES, P.		<del></del>		84-1526311
Jse	- <b>U</b> IIIV I	n's name	or yours	<del>-</del> •		EIN J	, 01 1020011
	If se	elf-employ fress, and	erp.			Phone	970-663-3564
						no 🕨 🗅	
May	the IRS discus	ss this re	turn with the preparer shown above? (see instructions)				Yes   No

including grants of \$

) (Revenue \$

Form **990** (2008)

(Must equal Part IX, Line 25, column (B))

(Expenses \$

4e Total program service expenses

### Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			v
	candidates for public office? If "Yes," complete Schedule C, Part I	3	-+	<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
_	Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	5		x
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	-		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete		l	
	Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
·	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	Ť		
_	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"		- 1	
	complete Schedule D, Part IV	9	- 1	X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VII, VIII, IX, or X as applicable	11	X	· <u> </u>
12	Did the organization receive an audited financial statement for the year for which it is completing this return	ľ		
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			v
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	46		x
4-	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16 17		$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I  Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		$\frac{\mathbf{x}}{\mathbf{x}}$
18 19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	1	X
20	Did the organization report more than \$15,000 on Fait Viii, line 9a7 if Yes, complete Schedule H	20		$\frac{1}{x}$
21	Did the organization operate one of more than \$5,000 on Part IX, column (A), line 19 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 2º If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23		X
24a				
	\$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. If "No," go to question 25	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	1		
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	l		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<b></b> ∤	
þ	•	_		
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	_		₹.
_	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	<u>,  </u>		v
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	990	X

Part IV Checklist of Required Schedules (continued)

	art transfer of required confedence (continued)		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		163	140
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			İ
-	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,"	200		<del></del> -
U	complete Schedule L. Part IV	28b		x
_	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a	200	<b>-</b>	
С		28c		x
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	29		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			x
	conservation contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			77
	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			
	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		1	
	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? If "Yes," complete Schedule R, Part V, line 2	36		<u> </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		1	ĺ
	VI	37		X
		Eorn	. 990	(2008)

Form **990** (2008)

P	art V Statements Regarding Other IRS Filings and Tax Compliance					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1 1				
	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	_1b	0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and rules	eportabl	е		1	l
	gaming (gambling) winnings to prize winners?			1c	ļ	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			-		
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu				X	ļ
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (sei instructions)	€				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year cover this return?	ed by		3a	х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	Х	İ
	At any time during the calendar year, did the organization have an interest in, or a signature or other	authori	ty			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial)?		•	4a		x
b	If "Yes," enter the name of the foreign country			10		
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank				
	and Financial Accounts	Juni				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	1	x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?		5b		X
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entit					
	Regarding Prohibited Tax Shelter Transaction?			5c	l	
6a	Did the organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ons or				
	gifts were not tax deductible?			6b	ļ	ļ
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	than			1	
	\$75?			7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	-	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as				
	required to file Form 8282?	1 1		7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a benefit contract?	persona	18	7e	1	x
£	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract.	ract?		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required			7g	<del> </del>	X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-					
	required?			7h	1	X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and se	ction				
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spo	nsoring				
	organization, have excess business holdings at any time during the year?			_ 8_		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a		ļ
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b_	ļ	ļ
0	Section 501(c)(7) organizations. Enter	1 1				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	<del></del>			
1	Section 501(c)(12) organizations. Enter	المدا				
а	Gross income from members or shareholders	11a	<del></del> -			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	11b				
2-	amounts due or received from them)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a	1	Ī
2a h	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		120		<b></b>
~	ii i oo, amaa maamaan a tan ahampi maaraa taadhaa ar doolada daliiig iilo jodi					

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

<u>Sec</u>	tion A. Governing Body and Management		<b>V</b>	
	For each "Was" secretaria to lines 2. 7h holour and for a "Nis" secretaria lines 0 or 0h holour decembs the		Yes	No
	For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the			
4.	circumstances, processes, or changes in Schedule O. See instructions  Enter the number of voting members of the governing body			ĺ
1a b				ĺ
ь 2			,	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2		х
3	any other officer, director, trustee, or key employee?	-		
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		X_
4	supervision of officers, directors or trustees, or key employees to a management company or other person?  Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5		5		X
6	Did the organization become aware during the year of a material diversion of the organization's assets?  Does the organization have members or stockholders?	6		X
7a	Does the organization have members of stockholders, or other persons who may elect one or more members			
<i>1</i> d	of the governing body?	7a		x
b	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	7.0		
0	the year by the following			
а	The governing body?	8a	x	ĺ
b	Each committee with authority to act on behalf of the governing body?	8b	X	<del></del>
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	Ja		
U	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations	30		
10	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at	10		
••	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		x
Sec	tion B. Policies			<u></u>
	TOTAL CHOICE		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	1.2.2		
	rise to conflicts?	12b		x
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	122		
Ŭ	describe in Schedule O how this is done	12c	x	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	x	
b	Other officers or key employees of the organization?	15b	X	
_	Describe the process in Schedule O (see instructions)	132		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		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			ĺ
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website 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 financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ DEBBIE LONG 730 N RAILROAD AVE.			
L	OVELAND CO 80537	970-66	9-1	822

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

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

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

Check this box if the c	organization did not comp	ensat	e an	y offi	cer,	direc	ctor,	trustee, or key employee	<del> </del>	
(A)	(B)		(C) Position (check all that apply)					(D)	(E)	(F)
Name and Tit <u>l</u> e	Average hours per week	or director		Officer		Highest compensated employee		Reportable, compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
BRIAN STEVIN	rG	1				T				
TREASURER	10	x		x				o	0	0
BILLIE JO DO	WNING	1								
PRES ELECT	10	x						O	0	0
GARY MAGGI										
CAR DIRECTOR	5	X						0	0	0
ROBERT WALK	WICZ									
CAR DIRECTOR	5	X						0	0	0
KURT ALBERS		T								
PAST PRES	5	X						0	0	0
JIM MULLER		7								
2ND V-P	5	X		X				0	0	0
MIKI ROTH										
DIRECTOR	5	X						0	0	0
RENAE HUPP						l				
PRESIDENT	10	X		X		_		0	0	0
SCOTT MCCREA									_	
DIRECTOR	5	X	L.					0	0	0
ROGER JENKIN		1								_
DIRECTOR	5	X						0	0	0
DEBB MANDERS		1				i				
SECRETARY	10	X		X				0	0	0
		+				Н				
										<u> </u>
		T						***		
		+	-	<u> </u>		$\vdash$				

Pa	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A) Name and title	(B) Average	Posi	tion (	chec	C) k all t	hat a <sub>l</sub>		(D) Reportable	(E) Reportable	 E	(F) stimated	j
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	con f org ar	mount of other oth	on on d
						ļ							
										<u></u>			
	<u></u>		ļ 								_		
		<b>j</b>											
													<del></del>
	· · · · · · · · · · · · · · · · · · ·												
											-		
<u>1b</u> 2	Total  Total number of indi organization ▶ 0	viduals (including those in	1a) v	who	rece	ıved	more	<b>►</b> e tha	] an \$100,000 in reportable o	compensation from the			
3		list any former officer, dire	ector	or tr	ruste	e, k	ey er	nplo	yee, or highest compensal	red	Γ	Y	
4	employee on line 1a For any individual lis	i? If "Yes," complete Sched sted on line 1a, is the sum	lule . of re	J for porta	such able	n ind com	lıvıdu pens	al atıo	n and other compensation s," complete Schedule J for	from		3	X
5	individual Did any person lister	d on line 1a receive or acci	rue c	omp	ensa	ation	fron	n an	y unrelated organization fo			4	X
Sec	services rendered to	the organization? If "Yes,"	con	nplet	te Sc	ched	ule J	tor	such person		l_	5	<u> </u>
1		for your five highest compe the organization	ensa	ted II	ndep	end	ent c	ontr	actors that received more			· · ·	
		(A) Name and business address							Descrip	(B) tion of services		Compe	nsation
													<del> </del>
	<del></del>								-				
		-								***			
2	Total number of inde		dıng	thos	se in	1) w	/ho re	ecer	ved more than \$100,000 in			0	
DAA		- <del></del>								-		Form <b>9</b> 9	90 (2008)

Pa	ırt V	ill Stater	nent of Rev	venu	Э _					
							(A) Total revenue	(B) Related or exempt function	(C) Unrelated business	(D) Revenue excluded from tax under sections
				······				revenue	revenue	512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated car	npaigns	1a						
gra	b	Membership d	lues	1b						
ts,	С	Fundraising e	vents	1c						
igi	d	Related organ	ızatıons	1d						
Ş.Ë	е	Government grants	(contributions)	1e						
er s	f	All other contribution	ns, gifts, grants,							
듗		and similar amounts	not included above	1f						
Ę	g	Noncash contributio	ns included in lines	1a-1f	\$					
	h	Total. Add line	es 1a–1f			<b>•</b>				
Program Service Revenue						Busn. Code				
Ven	2a	MEMBER 1	DUES				96,227	96,227		
æ	b	EDUCATION	ON/SEMINAR	CLAS	SES		26,948	26,948		
<u> </u>	С	MISCELL	ANOUS EVENT	INC	OME		13,595	13,595		
Ser	d	AFFILIA'	TE DUES				11,531	11,531		
Ē	е	MEMBER :	NOITATION	FEES			7,800	7,800		
g	f	All other progr	am service rev	venue			1,150	1,150		
2		Total. Add line				<b>•</b>	157,251			
	3	Investment inc	come (includin	g divid	ends, intere	est, and				
		other similar a	mounts)			•	7,427		5,514	1,913
	4	Income from I	nvestment of t	ах-ехе	mpt bond p	roceeds >				
	5	Royalties				<b>•</b>				
			(ı) Real	1	(II) F	Personal				
	6a	Gross Rents								
	b	Less rental exps								
	С	Rental inc or (loss)								
	d	Net rental inco	me or (loss)			•				
	7a	Gross amount from sales of assets	(ı) Secuni	ties	(H)	Other .				
		other than inventory								
	b	Less cost or other								
		basis & sales exps			1					
	С	Gain or (loss)								
	d	Net gain or (lo	ss)			•				
	8a	Gross income fro	om fundraising e	vents						
ne		(not including \$								
/en		of contributions r	eported on line 1	1c)						
Re		See Part IV, line	18		a					
Other Revenue	b	Less direct ex	penses		b				,	
ਰ	C	Net income or	(loss) from fu	ndraisi	ng events	<b>•</b>				
	9a	Gross income fro	om gaming activi	ties						
		See Part IV, line	19		a		1			
	b	Less direct ex	penses		b					
		Net income or		_	activities	<b>•</b>				
	10a	Gross sales of	inventory, les	s						
		returns and all	owances		a	6,512				
	b	Less cost of g	joods sold		b	5,142				
	ç	Net income or	(loss) from sa	les of	inventory	▶_	1,370	1,370		
		Misc	ellaneous Reven	ue		Busn. Code				
	11a	IRES LLC	- 84-13286	40		531390	57,445		57,445	
	b							_		
	С						,			
	d	All other reven	ue							·····
	е	Total. Add line	s 11a-11d			▶	57,445			····
	12	Total Revenue	e. Add lines 1h	n, 2g, 3	3, 4, 5, 6d, 7	<sup>7</sup> d, 8c,				
		9c, 10c, and 1	1e			▶	223,493	158,621	62,959	1,913

84-0537441

### Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	, 8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	<b>,</b>	4 104			
	organizations in the U.S. See Part IV, line 21	4,124			
2	Grants and other assistance to individuals in	1,000			
	the U.S. See Part IV, line 22	1,000			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
4	U S See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members  Compensation of current officers, directors,	<del></del>			
3	trustees, and key employees				
6	Compensation not included above, to disqualified				
Ū	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	ı			
7	Other salaries and wages	70,484	·		
8	Pension plan contributions (include section 401(k)				
-	and section 403(b) employer contributions)				
9	Other employee benefits	4,366			
10	Payroll taxes	5,988			
11	Fees for services (non-employees)	•			
а	Management				
b		290			
С	Accounting	2,100			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	884			
12	Advertising and promotion	520			
13	Office expenses	7,833			<del></del>
14	Information technology	4,026	·		
15	Royalties	11.001			
16	Occupancy	11,231			
17	Travel	14,749			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	20, 200			
19	Conferences, conventions, and meetings	38,298			
20	Interest			-	
21	Payments to affiliates	2,052			
22 23	Depreciation, depletion, and amortization Insurance	513			
23	mourance	343	······································		
24	Other expenses Itemize expenses not				
-	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below )				
а	STATE INCOME TAX	3,697			
b	MISCELLANEOUS	182			
С	DIRECTORS CONTIGENCY	152			
d					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	172,489			
26					
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation			1	I

<u>P</u>	art X	Balance Sheet		<del></del> _				
				(A) Beginning of year		(B) End of		
_	1	Cash—non-interest bearing		14,044	1			136
		•	F	274,574		2.		<del>555</del>
	2 3	Savings and temporary cash investments	F	2/3/3/3	3	<del></del>	, ,	<del>555</del>
	_	Pledges and grants receivable, net Accounts receivable, net	F	2,062	_		3	199
	4		lotopa kou	2,002	-	<del></del> -	<u>J,</u>	199
	5	Receivables from current and former officers, directors, tru	' '		5			
	_	employees, or other related parties. Complete Part II of So			-	<del></del>		
	6	Receivables from other disqualified persons (as defined un	<b>.</b>					
		4958(f)(1)) and persons described in section 4958(c)(3)(B)	Complete			•		
	_	Part II of Schedule L	-		6	<del>                                     </del>		
ets	7	Notes and loans receivable, net	-		7	<del>                                     </del>		
Assets	8	Inventories for sale or use	-	1,168	8	-	2	053
4	9	Prepaid expenses and deferred charges	122 004	1,100	9		<u> </u>	<u> </u>
		·- · · · · · · · · · · · · · · · · ·	10a 123,994					
	b	Less accumulated depreciation Complete	03 376	22 770		1 .	20	710
,			10ь 93,276	32,770		ļ <u>`</u>	<del>50</del> ,	<u>718</u>
	11	Investments—publicly traded securities	<u> </u>	•	11	<del>                                     </del>		
	12	Investments—other securities See Part IV, line 11	į-		12	<del> </del>		
	13	Investments—program-related See Part IV, line 11	-		13	<del>                                     </del>		
	14	Intangible assets	<u> </u>	424 070	14	<u> </u>	50	667
	15	Other assets See Part IV, line 11	<u> </u>	424,079	15			<u>667</u>
_	16	Total assets. Add lines 1 through 15 (must equal line 34)		748,697	16	<u> </u>		328 018
	17	Accounts payable and accrued expenses	_	3,339			<u> </u>	<u>918</u>
	18	Grants payable	_		18			
	19	Deferred revenue	<del> </del>		19			
S	20	Tax-exempt bond liabilities	_		20			
Liabilities	21	Escrow account liability Complete Part IV of Schedule D			21	ļ		
ilic	22	Payables to current and former officers, directors, trustees	· · · · · · · · · · · · · · · · · · ·					
iat		employees, highest compensated employees, and disquali	ified		i	ĺ		
_		persons Complete Part II of Schedule L			22			
	23	Secured mortgages and notes payable to unrelated third p	arties		23			
	24	Unsecured notes and loans payable	<u> </u> -		24			
	25	Other liabilities Complete Part X of Schedule D			25		4	<del>-1-</del>
	26	Total liabilities. Add lines 17 through 25		3,339	26	ļ	Ι,	918
Jces			and					
ū		complete lines 27 through 29, and lines 33 and 34.		745 250		-,	` F	410
Balan	27	Unrestricted net assets		745,358		/8	35, ·	<u>410</u>
B	28	Temporarily restricted net assets		-	28	<del></del>		
Fund	29	Permanently restricted net assets	F		29			
Ŧ		Organizations that do not follow SFAS 117, check here	▶ ∐					
ō		and complete lines 30 through 34.				ŧ		
ts	30	Capital stock or trust principal, or current funds			30			
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fu			31			
As	32	Retained earnings, endowment, accumulated income, or o	ther funds	545 050	32		_	440
et	33	Total net assets or fund balances	<u> </u>	745,358	33			410
	34	Total liabilities and net assets/fund balances		748,697	34		37,	<u>328</u>
P	art X	Financial Statements and Reporting		<del></del>				
						[	Yes	No
1		ounting method used to prepare the Form 990 🔃 Cas						
<b>2</b> a	We	re the organization's financial statements compiled or review	wed by an independent accounta	ant?		2a		<u>X</u>
b		re the organization's financial statements audited by an inde				2b		<u> </u>
C		es" to lines 2a or 2b, does the organization have a commit						
		audit, review, or compilation of its financial statements and				2c		<b></b>
3a		a result of a federal award, was the organization required to	undergo an audit or audits as se	et forth in				
		Single Audit Act and OMB Circular A-133?				3a		<u>X</u>
b	If "Y	es," did the organization undergo the required audit or aud	ıts?			3b		
						Form	990	(2008)

### SCHEDULE D (Form 990)

Internal Revenue Service

### Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that

OMB No 1545-0047 Open to Public

Department of the Treasury answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. Inspection Employer identification number Name of the organization LOVELAND-BERTHOUD ASSOCIATION OF REALTORS, INC. 84-0537441 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 2 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year > \$ \_\_\_\_ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 relating to these items

Sche		BERTHOUD ASSO			37441		Page 2
Pa	rt III Organizations Maintaining	Collections of Art,	Historical Trea	sures, or Other	Similar As	sets (continu	ıed)
3	Using the organization's accession and other items (check all that apply)	r records, check any of the	following that are a	significant use of its	collection		
а	Public exhibition	d 🗌 Loan o	or exchange program	ns			
b	Scholarly research	e Other					
С	Preservation for future generations	_				_	
4	Provide a description of the organization's co	ollections and explain how t	hey further the orga	ınızatıon's exempt p	urpose in		
5	During the year, did the organization solicit o assets to be sold to raise funds rather than to	r receive donations of art, it to be maintained as part of	nistorical treasures, the organization's c	or other similar ollection?		Yes	☐ No
Pa	art IV Trust, Escrow and Custod	lial Arrangements. C	omplete if orga	nization answei	red "Yes" to	Form 990,	
	Part IV, line 9, or reported	an amount on Form 9	990, Part X, line	<del>2</del> 1.			
1a	Is the organization an agent, trustee, custodi	an or other intermediary fo	r contributions or otl	her assets not			
	included on Form 990, Part X?					Yes	∐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the following	table				
			•			Amount	
С	Beginning balance	•	7		1c		
d	Additions during the year				1d		
е	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amount on Fe	orm 990, Part X, line 21?				Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV						
Pa	rt V Endowment Funds. Comp	lete if organization a	nswered "Yes" 1	to Form 990, Pa	art IV, line 1	0.	
		(a) Current year	(b) Pnor year	(c) Two years back	(d) Three year	s back (e) Four	years back
1a	Beginning of year balance						
b	Contributions						
С	Investment earnings or losses		<del></del>				
d	Grants or scholarships						
е	Other expenditures for facilities						
	and programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of the year	r end balance held as					
а	Board designated or quasi-endowment ▶ _	%					
b	Permanent endowment ▶ %						
C	Term endowment ▶ %						
3a	Are there endowment funds not in the posses	ssion of the organization th	at are held and adm	ninistered for the		_	
	organization by						Yes No
	(i) unrelated organizations					3a(i)	
	(ii) related organizations		•			3a(ii)	
b	If "Yes" to 3a(II), are the related organizations	s listed as required on Scho	edule R?			3b	
4	Describe in Part XIV the intended uses of the						
<u>Pa</u>	at VI Investments—Land, Build					<del>, , , , , , , , , , , , , , , , , , , </del>	
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other	)	epreciation	(d) Book	
1a	Land		10	,000			.0,000
b	Buildings		60	,812	40,274	2	0,538
С	Leasehold improvements						
d	Equipment		53	,182	53,002		180
е	Other						
Total	. Add lines 1a-1e (Column (d) should equal F	Form 990, Part X, column (	B), line 10(c))		<u> </u>	<u>3</u>	0,718

Part VII	Investments—Other Securities. See For		04-0557441	Page 3
	(a) Description of security or category	(b) Book value	(c) Method o	f valuation
	(including name of security)		Cost or end-of-ye	ar market value
	atives and other financial products			
Closely-held ed	quity interests		<u> </u>	
Other		- <del>-</del>		
			<del></del>	
			<del></del>	
			<del></del>	
Total (Caluman	(b) should could Form 2000 Port V and (D) line 12.)			
Part VIII	(b) should equal Form 990, Part X, col (B) line 12) Investments—Program Related. See Form	rm 000 Part Y line 13		
Fait Viti	(a) Description of investment type	(b) Book value	(c) Method o	f valuation
	(a) Description of investment type	(b) Book value	Cost or end-of-ye	
	<del></del>		,	<u> </u>
		<del></del>		
	-	·	*	<del> </del>
		·		
				<del></del>
	·		1	<u>.</u>
		-		
Total. (Column	(b) should equal Form 990, Part X, col (B) line 13)	<b>&gt;</b>		
Part IX	Other Assets. See Form 990, Part X, line	: 15.		
	(a) Descript			(b) Book value
	PARTNERSHIP INVESTM	ENT - IRES		469,667
·				
<del></del>				
<del></del>				
			<del></del>	
		· · ·	·	469,667
Part X	(b) should equal Form 990, Part X, col (B) line 15)	lino 25	<b>&gt;</b>	409,007
Part A	Other Liabilities. See Form 990, Part X, I  (a) Description of liability	(b) Amount	-	
Fadaral Isaania		(b) Amount	<del>-</del> -{	
Federal income	taxes		<del>-</del>	
			<del></del>	
			_	
			<del> </del>	
Total (Column	(b) should equal Form 990, Part X, col (B) line 25)	<b>•</b>		
	vide the text of the footnote to the organization's finance	<del> <u> </u></del>	e organization's liability for	
	ositions under FIN 48	catesine that reports the	gammason o maonity for	

Sche	dule D (Form 990) 2008 LOVELAND-BERTHOUD ASSOCIATIO	N OF	84-053744	1	Page 4
Pa	Reconciliation of Change in Net Assets from Form 990 to	to Fina	ncial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		·	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4-8			9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10	
₽ŧ	int XII Reconciliation of Revenue per Audited Financial Statem	nents V	Vith Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	- · · - · · · - · · · · · · · · · · · ·	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)			5	
Pa	IT XIII Reconciliation of Expenses per Audited Financial State	ments \	With Expenses per f	Retur	'n
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
C	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	
Pa	rt XIV Supplemental Information				
Com	plete 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 2	2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2	2d and 4b			
_					
_				-	
_					
_				-	
_				_	
_					
_				-	
_					

Schedule D (F	orm 990) 20	08	LOV	ELA	ND-	BER	THO	QUC	AS	SO	CI	LTA	ON	OI	F		84	1-0	537	44	1					F	age 5
Schedule D (F	Suppler	nenta	ıl Inf	orma	tion	(conti	nued)	)																			
							-	<b>-</b> -		_	_				_	_	-			-	-		-	-	-	-	
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**SCHEDULE O** 

(Form 990)

**Supplemental Information to Form 990** 

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ 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.

Name of the organization

LOVELAND-BERTHOUD ASSOCIATION OF REALTORS, INC.

Employer identification number 84-0537441

Form 990, Part VI, Line 10 - Organization's Process Used to Review Form 990 PREPARED BY CPA & REVIEWED BY EXECUTIVE DIRECTOR AND BOARD TREASURER PRIOR TO FILING.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy REVIEW WHEN REPORT OF VIOLATION OCCURS.

Form 990, Part VI, Line 15a - Compensation Process for Top Official BOARD OF DIRECTORS REVIEW AND DETERMINE SALARY

Form 990, Part VI, Line 15b - Compensation Process for Officers BOARD OF DIRECTORS WITH RECOMMENDATION FROM EXECUTIVE DIRECTOR.