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SCANNED JUN 2 9 2010

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

A F	or the	2009 ca	lendar year, or tax year beginning and ending	<u> </u>	
B c	heck if oplicable	use IRS	C Name of organization	D Employer iden	tification number
	Addres	s label or print or	Wyoming Bankers Association		
	Name change	tvpe	Doing Business As		0156717
느	return	See Specific	Number and street (or P.O. box if mail is not delivered to street address) Room/s	I =	
Ļ	Termin- ated	Instruc-	P.O. Box 2190	(30	
	Amend return		City or town, state or country, and ZIP + 4	G Gross receipts \$	543,581.
	Application	_	Cheyenne, WY 82003	H(a) Is this a group	
	pendin	F Nar	ne and address of principal officer Dave Johnson	for affiliates?	Yes X No
			e as C above	H(b) Are all affiliates	ıncluded? Yes No
1 T	ax exe	mpt statu	us X 501(c) (6) ◀ (insert no.)	lf "No," attach	a list (see instructions)
J W	Vebsite	e: 🕨 WW	w.wyomingbankers.com	H(c) Group exemp	tion number
K F	orm of	organizatio	on: X Corporation Trust Association Other Ly	ear of formation: 1994	M State of legal domicile: WY
Pa	rt I	Summ			
	1 E	Briefly des	scribe the organization's mission or most significant activities To provi	de support s	ervices for
Activities & Governance			r banks		
na L	-		s box if the organization discontinued its operations or disposed of n	nore than 25% of its net	assets
Ş.			f voting members of the governing body (Part VI, line 1a)		12
ၓ			of independent voting members of the governing body (Part VI, line 1b)	•	12
ο Ω			ther of employees (Part V, line 2a)	<u> </u>	5 3
Ë			ber of volunteers (estimate if necessary)	<u>-</u> -	
ξį				· -	70 500
¥	7a	lotal glos	s unrelated business fevenue inon Fari VIII, column (C), line 12 ated business taxable income from 990 T, line 34	· ·	
\dashv	D I	vet unreiz	ared business taxable income from 990 ti, line 34		
			ions and grants (PaMM), iந்திர்றி	Prior Year	Current Year
e e			ons and grams (PathWill, like The Off)	275,073	
ē	9 F	rogram s	service revenue (Part VIII, line 2g)	184,893	
Revenue	10 I	nvestmer	nt income Part VIII Columb A lines 3.4. and 7d)	37,567	
	•••	Julio1 1040	roc, and ro	82,906	
			nue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	580,439	
			d similar amounts paid (Part IX, column (A), lines 1-3)	1,000	2,200.
	14 E	Benefits p	oald to or for members (Part IX, column (A), line 4)		
S	15 5	Salanes, c	other compensation, employee benefits (Part IX, column (A), lines 5-10)	264,934	246,635.
Expenses	16a F	Profession	nal fundraising fees (Part IX, column (A), line 11e)		
×	b٦	Total fund	Iraising expenses (Part IX, column (D), line 25)		
w	17 (Other exp	enses (Part IX, column (A), lines 11a-11d, 11f-24f)	299,287	. 209,941.
	18 7	Total expe	enses Add lines 13-17 (must equal Part IX, column (A), line 25)	565,221	458,776.
l	19 F	Revenue I	ess expenses Subtract line 18 from line 12	15,218	. 84,805.
Assets or Balances				Beginning of Current Yea	
age	20 1	Total asse	ets (Part X, line 16)	1,048,958	. 1,137,178.
8	21 7	Total liabil	ities (Part X, line 26)	161,141	
Fund			s or fund balances Subtract line 21 from line 20	887,817	972,622.
	rt II		ture Block		<u> </u>
		Under pena	tives of perjury, I declare that have examined this return, including accompanying schedules and statements. Declaration of prepare (after than officer) is based on all information of which preparer has any knowle	nts, and to the best of my knowle	edge and belief, it is true, correct,
		and comple	Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	dge	
Sign	.	\mathbf{A}	huid K Why 1000	15-	14-10
		Sign	ature of officer	Date	, , , , ,
Here	=	h Da	ve Johnson, Executive Director		
			e or print name and title		
		 	A Augustian I Date	Check if Prep	arer's identifying number
Paid		Preparer's signature	Solution Shulto	self- (see	instructions)
Prep	arar'a L	Firm's name		employed	
Use		yours if	Leo Riley & Co., CPA's	EIN ►	
		self-employ address, an	d Diff b. center be., bee 200		/205/065 2000
		ZIP + 4	Casper, WY 82601-2519	Phone no.	(307)265-3800
May	the IR	S discuss	s this return with the preparer shown above? (see instructions)		X Yes No

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

Form **990** (2009)

	rt III Statement of Program Service	ankers Association	83-0156	/1/ Page Z
<u> </u>				
1	,	See Schedule O for Continu		
	The Wyoming Bankers As	sociation is the profession	al and trade	
		g's commercial and savings		<u></u>
		presents and advocates the		s
	members enhancing thei	r ability to be preeminent	providers of	
2	Did the organization undertake any signification	nt program services during the year which were not list	ed on	
	the prior Form 990 or 990-EZ?			Yes X No
	If "Yes," describe these new services on Sci	nedule O		
3		ake significant changes in how it conducts, any progra	m services?	Yes X No
_	If "Yes," describe these changes on Schedu		_	
4	•	for each of the organization's three largest program se	anuces by expenses	
7		and section 4947(a)(1) trusts are required to report the	• •	
			e amount of grants and	
	allocations to others, the total expenses, and	d revenue, if any, for each program service reported.		
	(Code.) (Expenses \$	458,776. including grants of \$	\/D	104 061
4a				194,061.)
		sociation exists to assure		
		banking institutions throug		
		welfare of banks is accompl		
		ral political actions, comm		
	education, training pr	ograms, and communication w	ith regulators.	
				····
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$	
	, (Σλροιίουο ψ	molacing grants of t	/ (* 10 V 01 1 d 0	,
	-	* *** ** ** ** ** ** ** ** ** ** ** **		
				·
				· · · · · · · · · · · · · · · · · · ·
		····	. <u></u> .	
	· · · · · · · · · · · · · · · · · · ·			
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$	1
	,(3 3	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,
				
		·		
4d	Other program services. (Describe in Schedu	le O)		
	(Expenses \$ including	g grants of \$) (Revenue \$)	
4e	Total program service expenses ►\$	458,776.		

•			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_1_	<u> </u>	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u> </u>	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	L	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	_5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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 X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		<u> </u>
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		i	
_	Part VI.			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		l	
	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
•	Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		[
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		İ	
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		- 1	
	Schedule D, Parts XI, XII, and XIII.	12	1	X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X	1		
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 United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	j	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part iX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals		ľ	
	located outside the United States? If "Yes," complete Schedule F, Part III	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		Ì	
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u>X</u>
20_	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	100	<u>X</u>
		Form 9	190 (2	(009

Form 990 (2009) Wyoming Bankers Association

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the	1.	ļ	,,
~~	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	ļ	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,		ĺ	v
00	column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	_22	\vdash	X
23		Ì	ļ	
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J			x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		^
Z-70	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		х
b	Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?	24b		1
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
Ĭ	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		1.0	i	
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete	1		
	Schedule L, Part III	27		_X_
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)		1	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was		1	
	an officer, director, trustee, or direct or indirect owner? 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		<u>X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	Ì		
	contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			7.
00	If "Yes," complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	00		v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u>X</u>
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	22	1	X
34	Was the organization related to any tax-exempt or taxable entity?	33		
•	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	\mathbf{x}	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	34		
•	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?	- ~		
,	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	х	
		Form 9	990 (2	009)

Form 990 (2009) Wyoming Bankers Association

Part V Statements Regarding Other IRS Filings and Tax Compliance

•			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable	<u>'</u>]	İ	l
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b (
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		1
	(gambling) winnings to prize winners?	1c	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	1		1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	_X_	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
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	ŀ		
	Financial Accounts		i	
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u> </u>
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u> </u>
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
_	Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit		l	
	any contributions that were not tax deductible?	_6a		<u> </u>
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
7	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services		ļ	
u	provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
-	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year . 7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	ł	i	
	benefit contract?	7e	İ	
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		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
	at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		ŀ	
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
_	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	ļ		
	amounts due or received from them)	1		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	Form 9	200 (2	.000;
		rorm :	コンコレノ (ツ	HILLIAN

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

Sec	tion A. Governing Body and Management								
					Yes	No			
1a	Enter the number of voting members of the governing body	1a	12						
b	Enter the number of voting members that are independent	1b	12						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with any other		ı					
	officer, director, trustee, or key employee?								
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?								
4	4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?								
5	5 Did the organization become aware during the year of a material diversion of the organization's assets?								
6	6 Does the organization have members or stockholders?								
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	mbers of the							
	governing body?		ļ	7a		<u> X</u>			
b	Are any decisions of the governing body subject to approval by members, stockholders, or other personal by the per	sons?		7b		<u> </u>			
8	Did the organization contemporaneously document the meetings held or written actions undertaken of	during the year							
	by the following.								
а			-	8a_	Х				
b	Each committee with authority to act on behalf of the governing body?		}	8b	<u> </u>				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched at the	ľ		ľ				
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		<u> </u>			
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Code)			r				
			Г		Yes	No			
	Does the organization have local chapters, branches, or affiliates?	- h t	}	10a		X			
b	If "Yes," does the organization have written policies and procedures governing the activities of such or and have about the procedure and procedures and procedures governing the activities of such or and have about the procedure and the procedure	chapters, affiliates,							
44	and branches to ensure their operations are consistent with those of the organization?	una tha farma	}	10b	- 				
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fill	ing the form?	}	11	X				
	Describe in Schedule O the process, if any, used by the organization to review this Form 990					v			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	ld	-	12a		<u> </u>			
D	Are officers, directors or trustees, and key employees required to disclose annually interests that couto conflicts?	ia give rise		405					
_		Voo " dooombo	-	12b					
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If " In Schedule O how this is done	res, describe		40-					
13	Does the organization have a written whistleblower policy?	• •	-	12c		X			
14	Does the organization have a written document retention and destruction policy?		F	14		$\frac{\mathbf{x}}{\mathbf{x}}$			
15	Did the process for determining compensation of the following persons include a review and approval	 Lbv independent	ŀ	124	\rightarrow				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	r by independent							
а	The organization's CEO, Executive Director, or top management official			15a	x				
	Other officers or key employees of the organization			15b	X				
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)		·		 -				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ent with a			1				
	taxable entity during the year?			16a		X			
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evalu	uate its participation							
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organic	nızatıon's							
	exempt status with respect to such arrangements?			16b					
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ▶ None								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(501(c)(3)s only) ava	lable fo	or					
	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, co	inflict of interest poli	cy, and	l finar	icial				
	statements available to the public								
20	State the name, physical address, and telephone number of the person who possesses the books and	d records of the orga	ınızatıc	วก ►					
	Cheryl Johnston - 307 638-5008								
	PO Box 2190, Cheyenne, WY 82003								

Form 990 (2009) Wyoming Bankers Association 83-0 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A)	(B)	}		(0	C)			(D)	(E)	(F)	
Name and Title	Average	,		Pos				Reportable	Reportable	Estimated	
	hours per	1	neci	air	tnat	app T	iy) T	compensation from	compensation from related	amount of other	
	week	individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
Mike Matthews											
President	1.00	X		X				0.	0.	0.	
Jeff Wallace											
1st Vice President	1.00	X		X				0.	0.	0.	
Leonard Nack											
2nd Vice President	1.00	X		X			L.	0.	0.	0.	
Gregg Jones											
Director	1.00	X			<u> </u>	<u> </u>		0.	0.	0.	
Keith Geis											
Director	1.00	X				<u> </u>		0.	0.	0.	
Bill Huppert								_	_	_	
Director	1.00	X	ļ			<u> </u>		0.	0.	0.	
Ron Van Voast	1					ł					
Director	1.00	X				 		0.	0.	0.	
Steve Lovas	1 00	,,								•	
Director	_1.00	X	_	_		-		0.	0.	0.	
Todd Peterson	1 00	.						0	0	0 -	
Director Trudy Durfee	1.00	Λ	\vdash					0.	0.	0.	
Director	1.00	v						0.	0	0	
Copper France	1.00	^	-					0.	0.	0.	
Director	1.00	v						0.	0.	0.	
Tom Bass	1.00	^								<u> </u>	
Director	1.00	x						0.	0.	0.	
Dave Johnson											
Executive Director	40.00					x		129,195.	0.	0.	

•	(A) Name and title	(B) Average hours	verage Position						(D) Reportable compensation	(E) Reportable compensation		(F) Stima imoun	
		per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC) from related com com an			r ation he ation ated tions
										,,,,,			
													···-·
												-	
	Total								129,195.		0.		0.
2	Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	d at	oove	e) wh	o re			<u></u>		1
	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s		stee,	, key	em	ploy	/ee,	or h	ighest compensated en	nployee on	3	Yes	No X
	For any individual listed on line 1a, is the su and related organizations greater than \$150 Did any person listed on line 1a receive or a	0,000? If "Yes,	° cor	mple	te S	Sche	dule	J fo	or such individual	-	4		x
	the organization? If "Yes," complete Schedion B. Independent Contractors									1100 000 of a annual	5	•	х
	Complete this table for your five highest co the organization NONE (A)	mpensated inc	iebe	nue		OHU	acto	T	(B)			(C)	
	Name and business	address	-						Description of se	ervices	Compe		n
			<u>-</u>										
	Total number of independent contractors (i \$100,000 in compensation from the organization -	ot lin	nited	i to	thos		ted	above) who received mo	ore than	Form	990 (2009)	

Wyoming Bankers Association 83-0156717 Page 9 Part VIII Statement of Revenue (D) Revenue excluded from (A) (B) (C) Total revenue Related or Unrelated exempt function tax under sections 512, business revenue revenue 513, or 514 Contributions, gifts, grants and other similar amounts 1 a Federated campaigns 1a 267,733. b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f 267,733. **Business Code** 611430 Program Service Revenue 2 a Conference & Conventio 98,882. 98,882 ь Education & Seminars 611600 40,660. 40,660. 27,692. c Legislative Meetings 561499 27,692. d Miscellaneous 561499 1,960. 1,960. f All other program service revenue 169,194. Total. Add lines 2a-2f ▶ Investment income (including dividends, interest, and 3 27,134. other similar amounts) 27,134. Income from investment of tax-exempt bond proceeds Royalties 5 (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 (ı) 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 Group Insurance Sales 524298 48,348. 48,348. 31,172 ь Endorsements 541800 31,172. d All other revenue 79,520. e Total. Add lines 11a-11d 169,194. 79,520. 12 Total revenue. See instructions. 543,581. 27,134.

Form **990** (2009)

Form 990 (2009)

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

	All other organizations must compl		not required to comp	lete columns (B), (C), an	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	2,200.			
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		=-1		
5	Compensation of current officers, directors,			1	
	trustees, and key employees	129,195.	<u></u>		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		<u> </u>		
7	Other salaries and wages	86,169.			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	12,143.		<u> </u>	
10	Payroll taxes	19,128.			
11	Fees for services (non-employees)				
а	Management				
b	Legal	1,494.			
С	Accounting	7,375.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other .				<u> </u>
12	Advertising and promotion	739.			
13	Office expenses	21,543.			
14	Information technology				
15	Royalties				
16	Occupancy	14,052.			
17	Travel .				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	103,262.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,682.	 		
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	Unrelated Business Inco	12,344.			
b	Equipment Lease	23,065.			
c	Telephone	10,551.			
d	Miscellaneous	8,937.		<u> </u>	
e	Board of Directors' Exp	2,560.			
f	All other expenses	1,337.			
25	Total functional expenses. Add lines 1 through 24f	458,776.			
26	Joint costs. Check here ▶ ☐ If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
					Form 990 (2000)

Pa	rt X	Balance Sheet					
•					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	_		156,940.	1	161,259.
	2	Savings and temporary cash investments			883,660.	2	966,025.
	3	Pledges and grants receivable, net		Ĺ		3	
	4	Accounts receivable, net			1,455.	4	375.
	5	Receivables from current and former officers, d	rectors, trustees, ke	y			
		employees, and highest compensated employe	es Complete Part II				
		of Schedule L		•		5	
	6	Receivables from other disqualified persons (as	defined under section	on			
		4958(f)(1)) and persons described in section 49	58(c)(3)(B). Complete	e			
		Part II of Schedule L		L		6	
S	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ĕ	9	Prepaid expenses and deferred charges			500.	9	2,933.
	10a	Land, buildings, and equipment cost or other					
		basis Complete Part VI of Schedule D	10a 2	29,940.			
	ь	Less: accumulated depreciation	10b 2	23,354.	6,403.	10c	6,586.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities See Part IV, line	11			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)		1,048,958.	16	1,137,178.
	17	Accounts payable and accrued expenses			231.	17	-179.
	18	Grants payable				18	
	19	Deferred revenue			160,077.	19	164,735.
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability Complete	Part IV of Schedule I	o [21	
Liabilities	22	Payables to current and former officers, director	rs, trustees, key emp	oloyees,			
abi		highest compensated employees, and disqualifi	ied persons Comple	te Part II			
=		of Schedule L		L		22	
	23	Secured mortgages and notes payable to unrela	ated third parties			23	
	24	Unsecured notes and loans payable to unrelate	d third parties	L		24	
	25	Other liabilities Complete Part X of Schedule D			833.	_25	
	26	Total liabilities. Add lines 17 through 25			161,141.	26	164,556.
		Organizations that follow SFAS 117, check he	ere 🕨 📖 and d	omplete		ł	
es		lines 27 through 29, and lines 33 and 34.					
SE.	27	Unrestricted net assets		L		_27	
3als	28	Temporanly restricted net assets		L		28	
Ē	29	Permanently restricted net assets		_		29	
Ē	Ì	Organizations that do not follow SFAS 117, c	heck here 🕨 🛚 🛚 🕹	and			
ō		complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds			887,817.	30	972,622.
ASS	31	Paid-in or capital surplus, or land, building, or ed			0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come, or other fund:	s _	0.	32	0.
Z	33	Total net assets or fund balances			887,817.	33	972,622.
	34	Total liabilities and net assets/fund balances			1,048,958.	34	1,137,178.

Form	990 (2009) Wyoming Bankers Association	_83 ⁻ 0156717	7 Pa	ce 1
Par	t XI Financial Statements and Reporting			<u> </u>
•			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.	1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X	ŀ
b	Were the organization's financial statements audited by an independent accountant?	2b		Х
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,		
	review, or compilation of its financial statements and selection of an independent accountant?	2c	X	i
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	d on a		ĺ
	consolidated basis, separate basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	igle Audit		l

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form **990** (2009)

Act and OMB Circular A-133?

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

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

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

 Section 501(c)(4), (5), or 	(6) organizat	ons Complete Part III			
Name of organization			·	Emp	oloyer identification number
W	yoming	Bankers Associa	ation		83-0156717
Part I-A Complete	if the org	anization is exempt un	der section 501(c) or is a section 527	organization.
1 Provide a description o	f the organiza	ation's direct and indirect politi	ical campaign activities	s in Part IV	
2 Political expenditures					\$
3 Volunteer hours					
Part I-B Complete	if the ora	anization is exempt un	der section 501(c	3)(3).	
		ncurred by the organization ur			\$
	•	ncurred by organization manage			\$
3 If the organization incur	rred a sectior	4955 tax, did it file Form 4720	o for this year?		Yes No
4a Was a correction made	?				Yes No
b If "Yes," describe in Pa					
Part I-C Complete	if the org	anization is exempt un	der section 501(c), except section 501	
1 Enter the amount direct	tly expended	by the filing organization for s	ection 527 exempt fun	ction activities	<u> </u>
2 Enter the amount of the	e filing organi	zation's funds contributed to c	ther organizations for	section 527	
exempt function activiti	•			▶:	B0.
•	expenditures	Add lines 1 and 2 Enter here	and on Form 1120-PO	L,	
line 17b	51- F	MOD BOL CONTRACTOR		▶ :	· — — — — — — — — — — — — — — — — — — —
4 Did the filing organization		_	'IN' of all acation 507 -		Yes No
		ployer identification number (E le amount paid from the filing (
~	•	rered to a separate political org	_		
	•	provide information in Part IV.	•	- ,	
(a) Name		(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
(4)		(4)	(0) =	filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate political organization
					If none, enter ⋅0-
			-		
	I				I

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 Part II-A Complete if the org	Wyoming anization is e	Bankers Assoc xempt under section	ciation on 501(c)(3) and fil	83- ed Form 5768	0156717 Page 2
(election under sec					
A Check if the filing organiza	ition belongs to an	affiliated group			
, —	-	A and "limited control" pr	ovisions apply		
	ts on Lobbying Ex ditures" means an	openditures nounts paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinio	on (grass roots lobbying)			
b Total lobbying expenditures to infl	uence a legislative	body (direct lobbying)		·	
c Total lobbying expenditures (add l	ines 1a and 1b)				
d Other exempt purpose expenditur	es				
e Total exempt purpose expenditure	-	•			
f Lobbying nontaxable amount. Ent		the following table in bo	th columns	···	
If the amount on line 1e, column (a)	· · · I	lobbying nontaxable an	11		
Not over \$500,000		of the amount on line 1e			
Over \$500,000 but not over \$1,00		0,000 plus 15% of the ex			
Over \$1,000,000 but not over \$1,5		5,000 plus 10% of the ex			
Over \$1,500,000 but not over \$17 Over \$17,000,000		5,000 plus 5% of the exce 00.000	ess over \$1,500,000		
Over \$17,000,000	1 \$1,0	00,000			
g Grassroots nontaxable amount (er	nter 25% of line 1ft				
h Subtract line 1g from line 1a. If zer	•				
i Subtract line 1f from line 1c If zero	,				
j If there is an amount other than ze	ro on either line 1h	or line 1i, did the organiz	ation file Form 4720		<u> </u>
reporting section 4911 tax for this	year?				Yes No
· · · · · · · · · · · · · · · · · · ·	ations that made	Averaging Period Under a section 501(h) electio the instructions for line	n do not have to comp		
	Lobbying Ex	penditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures	-				
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 Wyoming Bankers Association Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (a) (b) Yes Nο **Amount** During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). No Were substantially all (90% or more) dues received nondeductible by members? X Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 X Did the organization agree to carryover lobbying and political expenditures from the prior year? X Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, line 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." 267,733. Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 71,083. a Current year 2a -21,680. Carryover from last year 2b 49,403. 2c 66,933. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) -17.530Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1: Also, complete this part for any additional information Part I-A, Line 1: Wyoming Bankers Association lobbies on behalf of the Banking Community

before the Wyoming Legislature.

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Wyoming Bankers Association

Employer identification number 83-0156717

Pai	organizations Maintaining Donor Advise organization answered "Yes" to Form 990, Part IV, line		is Of Accounts. Complete if the
	5	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed 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	advisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring
	impermissible private benefit?		Yes No
Pai	rt II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or p	oleasure) Preservation of an hi	storically important land area
	Protection of natural habitat	Preservation of a cer	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06	2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by th	e organization during the tax
	year >		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	nodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements if	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements of	during the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	g the year > \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	D(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	tion's financial statements that describes	the organization's accounting for
	conservation easements		
Pai	rt III Organizations Maintaining Collections of	f Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and b	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pu	iblic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these r	tems	
þ	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and balar	nce sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, o	r research in furtherance of public service	e, 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		► \$ ► \$
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		► \$ ► \$

_		Bankers A								7 Page 2
Pai	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	reasures,	or Othe	er Simil	ar Asse	ts (conti	nued)
3 .	Using the organization's acquisition, access	ion, and other record	ds, ched	ck any of the	following th	at are a s	ignificant	use of its	collection	ı items
	(check all that apply)									
а	Public exhibition	•	a 🖳	Loan or exc	hange prog	rams				
b	Scholarly research	•	e 🔲	Other		_				
C	Preservation for future generations									
4	Provide a description of the organization's continuous	ollections and expla	in how t	hey further t	he organizat	tion's exe	mpt purpo	ose in Pai	t XIV	
5	During the year, did the organization solicit of	or receive donations	of art, h	nstorical trea	sures, or oth	ner sımılaı	assets			
	to be sold to raise funds rather than to be m	aintained as part of	the orga	anization's c	ollection?				Yes	☐ No
Pai	t IV Escrow and Custodial Arran	gements. Comp	lete if or	ganization a	nswered "Ye	s" to For	m 990, Pa	rt IV, line	9, or	
	reported an amount on Form 990, Pa			_						
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	contribution	ns or other a	ssets not	ıncluded			
	on Form 990, Part X?							Г	Yes	☐ No
h	If "Yes," explain the arrangement in Part XIV	and complete the fo	oliowina	table				-		
_									Amount	
С	Beginning balance						1c		7 111100111	
	Additions during the year						1d			
	Distributions during the year						1e			
e	Ending balance						1f	_		
f	Did the organization include an amount on F	orm 000 Part V line	212				L-!!J	Г	Yes	No
2a	If "Yes," explain the arrangement in Part XIV	•	7211					L	_ res	L NO
Pai			Seworod	L"Voc" to Fo	rm 990 Part	IV line 1	0	· · · · · · · · · · · · · · · · · · ·		
	E Tallow Month Lands. Complete				1			anen haale	(-) Form	···········
	Dammung of ware balance	(a) Current year	(0)	Pnor year	(c) Two yea	IIS DACK	(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance		ļ	-						
b	Contributions		-			-				
С	Net investment earnings, gains, and losses									
	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses	· · · · · · · · · · · · · · · · · · ·								
g	End of year balance					L				
2	Provide the estimated percentage of the year	r end balance held a	as							
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Term endowment	%								
3a	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	nd administe	ered for th	ne organız	ation	_	
	by.									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations							<u>.</u>	3a(ii)	
ь	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Sche	dule R?					3b	
4	Describe in Part XIV the intended uses of the	organization's endo	owment	funds.						
Pai	t VI Investments - Land, Building	gs, and Equipm	ent. se	e Form 990	, Part X, line	10				
	Description of investment	(a) Cost or o basis (investr		1 ' '	or other (other)		cumulate reciation	d	(d) Book	value
	Land				,,	336				
	Buildings			 -						
	<u>*</u>			 				-		
	Leasehold improvements				0 0 4 0		22 25	-		E06
	Equipment			 - 4	9,940.		23,35	74.	6	,586 <u>.</u>
	Other		· · · · · ·	L				_		F06
Total	. Add lines 1a through 1e (Column (d) must e	qual ⊦orm 990, Part	X, colur	nn (B), line 1	U(c))		 		6	,586.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 Wyoming Ba Part VII Investments - Other Securities.	nkers Association See Form 990, Part X, line 12.	<u>83-0156717</u>	/ Fage
(a) Description of security or category		(c) Method of valuation	
(including name of security)	(b) Book value	Cost or end-of-year market value	
Financial derivatives			
Closely-held equity interests			
Other			
		_ 	
	 		
			.
Catal (Oal/h) must aqual Form 000 Port V and (P) line 10 \	 		
otal (Col (b) must equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related.	Soc Form 990 Part V line 13		
		(c) Method of valuation	
(a) Description of investment type	(b) Book value	Cost or end-of-year market value	
		, , , , , , , , , , , , , , , , , , , ,	
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, III	ne 15		
(8	a) Description	(b) Book v	/alue
	<u> </u>		
	-		
			
Total. (Column (b) must equal Form 990, Part X, col (B) III			
Part X Other Liabilities. See Form 990, Part > (a) Description of liability		uint T	
·	(b) Amo	bunt	
ederal income taxes	· · · · · · · · · · · · · · · · · · ·		
			
			
	,		

Sche	dule D	(Form 990) 2009 Wyoming Bankers Association		_				0156	717	Page 4
Par	t XI	Reconciliation of Change in Net Assets from Form 990 to A	Audit	ed Finan	cial S	Statem	ıen	ts		
1'	Totalı	evenue (Form 990, Part VIII, column (A), line 12)			1					
2	Total e	expenses (Form 990, Part IX, column (A), line 25)			2					
3	Exces	s or (deficit) for the year Subtract line 2 from line 1			3					
4	Net ur	realized gains (losses) on investments			4					
5	Donat	ed services and use of facilities			5					
6	invest	ment expenses			6					
7	Prior p	period adjustments			7					
8	Other	(Describe in Part XIV)			8					
9	Total a	adjustments (net) Add lines 4 through 8			9					
10 Par		s or (deficit) for the year per audited financial statements. Combine lines 3 and Reconciliation of Revenue per Audited Financial Statemen		th Rever	10 nue p	er Ret	turr		-	
1	Totalı	evenue, gains, and other support per audited financial statements				-	1			
2		nts included on line 1 but not on Form 990, Part VIII, line 12								
а	Net ur	realized gains on investments	2a			f	ļ	ı		
b		ed services and use of facilities	2b					1		
c	Recov	eries of prior year grants	2c		•					
d	Other	(Describe in Part XIV)	2d							
е	Add lii	nes 2a through 2d					2e	l		
3	Subtra	act line 2e from line 1					3		-	
4	Amou	nts included on Form 990, Part VIII, line 12, but not on line 1	•		-					
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	4a							
b	Other	(Describe in Part XIV.)	4b				İ			
С	Add lii	nes 4a and 4b					4c			
5		evenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)					5			
Par	t XIII	Reconciliation of Expenses per Audited Financial Statement	nts W	ith Expe	nses	per R	<u>etu</u>	rn		
1	Total e	expenses and losses per audited financial statements				L	1			
2	Amou	nts included on line 1 but not on Form 990, Part IX, line 25								
а	Donat	ed services and use of facilities	2a				-			
þ	Prior y	ear adjustments	2b				ı			
C	Other	losses	2c							
d	Other	(Describe in Part XIV)	2d							
е	Add lii	nes 2a through 2d				2	2e			
3	Subtra	act line 2e from line 1			-	<u> </u>	3			
4		nts included on Form 990, Part IX, line 25, but not on line 1				1				
		ment expenses not included on Form 990, Part VIII, line 7b	4a							
b	Other	(Describe in Part XIV)	4b							
С		nes 4a and 4b				4	k			
5		expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)					5			
Ь		Supplemental Information					-			
		is part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, t XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comple								Part
										
									<u></u>	
					-					·
									_	
			·-							

SCHEDULE O

Supplemental Information to Form 990

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

Wyoming Bankers Association

Employer identification number 83-0156717

Form 990, Part III, Line 1, Description of Organization Mission:
financial services.
Form 990, Part VI, Section B, line 11: The 990 and 990T are prepared by
the Association's CPAs. The 990 and 990T are reviewed and signed by the
Executive Director.
Form 990, Part VI, Section B, Line 15: In June, the President of the Board
of Directors reveiws wages and determines an appropriate increase in annual
salaries and hourly rates. He brings the proposal to the Board of Directors
who discuss the matter and accepts, rejects or modifies the proposal. A
majority vote constitutes approval.
Form 990, Part VI, Section C, Line 19: Public documents are available for
inspections during normal office hours.
Form 990, Part XI, Line 2c
Committee responsible for review oversight.
The organization's Board of Directors selects an independent CPA to
perform a review of the financial statement and assumes responsibility
for the oversight of the review, with the assistance of the Executive
Director and the Administrative Assistant.

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Employer identification number , 83-0156717

Direct controlling entity

End-of-year assets

Total Income Ð

> Legal domicile (state or foreign country)

Primary activity

Name, address, and EIN of disregarded entity

Part I

2009
2009
Open to Public Inspection

► See separate instructions. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) ► Attach to Form 990. Wyoming Bankers Association Name of the organization

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

of related organization	(b) Primary activity	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity	(f) Direct controlling
Wyoming Bankers Association Educational	Receives and remits	oreign country)		501(c)(3))	Á
Foundation - 06-1707774, 200 East 8th	contributions for	; - - -		_	Wyoming Bankers
		Burnio	761/21/20		ABBOCIACION
	Ī				
	1				_

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83-0156717

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Schedule R (Form 990) 2009 Wyoming Bankers Association

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year) Part III

General or managing partner? Percentage ownership Schedule R (Form 990) 2009 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year) 9 Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets \equiv <u>(</u> ate allocations? Disproportion-Yes No Ξ Share of total income Share of end-of-year assets Type of entity (C corp, S corp, or trust) ₤ Share of total income Ξ (d)
(d)
(l Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>e</u> Legal domicile (state or foreign country) છ (d)
Direct controlling
entity Primary activity Legal domicile (state or foreign country) <u>©</u> Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization <u>a</u> 932162 02-04-10 Part IV

Part V Transactions With Related Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

		-		1
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			Yes No	ol
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				- 1
a Receipt of (I) interest (II) annuities (III) royalties or (iv) rent from a controlled entity		1 3	×	
b Gift, grant, or capital contribution to other organization(s)		<u>유</u>	×	
c Gift, grant, or capital contribution from other organization(s)		ပ္	X	۰۰
d Loans or loan distantes to or for other organization(s)		7	>	١.
		2	()	۱.
e Loans or loan guarantees by other organization(s)		<u>a</u>	×	
f Cala of accate to other organization(e)		;	*	١.
Cale of assets to other organization(s)		=	<	يا.
g Purchase of assets from other organization(s)		Đ	×	ا۔
h Exchange of assets		=	×	
i Lease of facilities, equipment, or other assets to other organization(s)		=	×	١.,
j Lease of facilities, equipment, or other assets from other organization(s)		=	×	١.,
b Deformance of convector or mombarchin or fundrations called the action of the state or season action (s)		;	>	١.
		¥	4	. اړ
l Performance of services or membership or fundraising solicitations by other organization(s)		=	×	اد
m Sharing of facilities, equipment, mailing lists, or other assets		Ē	×	i
n Sharing of paid employees			×	i
		⊢	_	
o Beimblirsement haid to other oxpanization for expenses		,	>	١.
		0	4 :	٦.
p Heimbursement paid by other organization for expenses		9	×	ا۔
q Other transfer of cash or property to other organization(s)		9	×	١.,
		+	*	١.
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	otion thresholds	= 	4	ا
1	CHOLL II II ESTIDIOS			
(a) Name of other organization(s)		(c) Amount involved	olved	
	type (a-r)			
(1) Wyoming Bankers Association Educational Foundation	×		0	_•
(2) Wyoming Bankers Association Educational Foundation	z		0	
(6)				ł
(4)				_
(5)				
(9)				
932163 02-04-10	Schedul	Schedule R (Form 990) 2009	990) 200	၂ ဇ

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Schedule R (Form 990) 2009 Wyoming Bankers Association

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a)	(Q)	(2)	<u>(</u>	(e)	£	(B)	Ð
Name, address, and EIN	Primary activity		Are all partners	Share of end-of-	Dispropor-	Code V-UBI	
of entity		(state or foreign country)	organizations?	year assets		of Schedule K·1 (Form 1065)	managing partner?
					•		
							-
							_
							<u>.</u>
							_
	-						
				•			
							_
	,						n

Schedule R (Form 990) 2009