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SCANNED JUN 18 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

For	tne	2009 calendar year, or tax year beginning and ending									
Chec	k if	Please Use IRS	D Employer identifica	tion number							
A	ddres	s label or Livering Lodging C Dogtovment Aggogiatio	.n								
	ame ame ange	print or WYOMITING LOGGING & RESCAULANT ASSOCIACIO type Doing Business As	83-02	04942							
= In	itial itum	See Number and street (or P.O. box if mail is not delivered to street address) Room/s		<u> </u>							
	ermin ed		(307)	634-8816							
- A	meno iturn	ed tions City or town, state or country, and ZIP + 4	G Gross receipts \$	310,412.							
	pplic		H(a) Is this a group retu								
Þ	endin	F Name and address of principal officer:Lynn Birleffi	for affiliates?	Yes X No							
		same as C_above	H(b) Are all affiliates includ	ded? Yes No							
Tax	-exe	empt status: X 501(c) (6	If "No," attach a lis	t. (see instructions)							
Wei	bsit	e:▶ www.wlra.org	H(c) Group exemption	number 🕨							
		organization: Corporation Trust X Association Other ► LY	rear of formation: 1950 MS	State of legal domicile: WY							
Part		Summary									
, l	1	Briefly describe the organization's mission or most significant activities: The Asso	ciation brings	together							
2	members of the industry to share new ideas, provide continuing										
ž 2	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of r	nore than 25% of its net asse								
5 3		Number of voting members of the governing body (Part VI, line 1a)	3	26							
, 4	1	Number of independent voting members of the governing body (Part VI-line 1b)	4	500							
Activities & Governance	5	Total number of employees (Part V, line 2a)	5	0							
<u> </u>		Total number of volunteers (estimate if necessary)	6	<u> </u>							
ž 7		Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.							
`	b	Net unrelated business taxable income from Form 99011 ine 341 2010	7b	0.							
			Prior Year	Current Year							
<u>ه</u> و	3	Contributions and grants (Part VIII, line 1h)									
aniia 1	€	Program service revenue (Pan Hilliam 20)	491,696.	308,090.							
្នំ 1		Investment income (Part VIII, con min A) lines 8, 4, and 7d)	4,292.	2,322.							
		Other revenue (Part VIII column (A), lines 5, 6d, 8d, 9d, 10c, and 11e)									
1	2	Total revenue add lines 8 fthrough 1 must equal Eart VIII, column (A), line 12)	495,988.	310,412.							
1		Grants and similar amounts paid (Part X, column (e) lines 1-3									
1	4	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)									
တ္ထု 1	5	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	195,739.								
ğ 1	6a	Professional fundraising fees (Part IX, column (A), line 1/e)									
Expenses	þ	Total fundraising expenses (Part IX, column (D), line 25)									
[™] 1	7	Other expenses (PartX, column (A), lines 11a-11d, 11f-24f)	401,652.	<u>394,838.</u>							
1	8	Total expenses. Add lines 13:17 (must-equal Part IX, column (A), line 25)	597,391.	<u>394,838.</u>							
1	9	Revenue less expenses. Subtract line 18 from line 12	-101,403.	<u>-84,426.</u>							
8			Beginning of Current Year	End of Year							
흥 2	90	Total assets (Part X, line 16)	244,112.	<u>159,686.</u>							
Fund Balances	21	Total liabilities (Part X, line 26)									
<u> 2</u>		Net assets or fund balances Subtract line 21 from line 20	244,112.	<u> 159,686.</u>							
Part	: 11	Signature Block		· · · · · · · · · · · · · · · · · · ·							
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statem and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowled	ents, and to the best of my knowledge edge	and belief, it is true, correct,							
		\mathcal{L}	, , , , , , ,	-110							
ign		Jam Bully	5/3	//0							
lere		Signature of office	Date /	/							
		Lynn Birleffi, Secretary //		<u>.</u>							
		Type or print name and title									
aid		Preparer's Date	Check if Preparer's	s identifying number uctions)							
	0.510	signature 03/11/10	employed >								
repar se On		Firm's name (or Scott Kelsey, P.C.	EIN >								
ec Ul	ııy	self-employed). 712 East 20th Street									
		address, and ZIP+4 Cheyenne, WY 82001	Phone no. ► (3	07) 432-2538							
lay th	ne II	AS discuss this return with the preparer shown above? (see instructions)		X Yes No							
32001			instructions.	Form 990 (2009)							
		ee Schedule O for Organization Mission State									
	_			\ '							
				`							

Form	990 (2009) Wyoming Lodging & Restaurant Association 83-0204942 Page 2
Pai	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission:
•	WLRA is committed to improving the business climate and profit of the
	lodging, restaurantand tourism industry.
	Todging, restaurantand courism industry:
2	Did the organization undertake any significant program services during the year which were not listed on
2	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
-	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	Organized and held an annual meeting and exposition for informing
	members regarding current industry trends and regulations
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	Published and mailed monthly newsletters to all members.
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	,,,
	· · · · · · · · · · · · · · · · · · ·
	Other program convers (Decomb or Orbital CO)
4d	Other program services. (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses ► \$

			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		<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	1]	1
	public office? If "Yes," complete Schedule C, Part I	3		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		X
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		X
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	ļ	X
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			į
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total		İ	1
	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.		1	
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			Ì
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? No]		
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	1	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		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			
	located outside the United States? If "Yes," complete Schedule F, Part III	16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	1	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	1	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	1	X
		Form	990	(2009)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	· · · · · · · · · · · · · · · · · · ·			
	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		_X_
	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 to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	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	l		
	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	<u> </u>	<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			77
	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			
~~	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):	200		x
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b	-	X
b	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was	200		
C	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	_	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		1
30	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?	-	_	-
٥.	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
0 _	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 Schedule R, Part V, line 2	35		х
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>L</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
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	X	

Part V

				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	1a 0	j		l
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	_1b0]		l
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portable gaming			Í
	(gambling) winnings to prize winners?		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see				
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d by this retum?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	<u> </u>	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authority over, a	1		
	financial account in a foreign country (such as a bank account, securities account, or other financial a	account)?	4a		X
þ	If "Yes," enter the name of the foreign country:				ĺ
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign E	Bank and			ĺ
	Financial Accounts.		ł	,	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction.		5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega	rding Prohibited	_		1
_	Tax Shelter Transaction?		<u>5c</u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit			v
_	any contributions that were not tax deductible?	· · · ·	6a		X
D	If "Yes," did the organization include with every solicitation an express statement that such contributivere not tax deductible?	ions or gins	6b		
7	Organizations that may receive deductible contributions under section 170(c).	•	OD		
a		nonds and services	Ì		
a	provided to the payor?	goods and scrinces	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	as required			
•	to file Form 8282?		7c		1
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 p	ersonal	1		
	benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	act? .	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	ganizations. Did the			1
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exce	ess business holdings			
	at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a	<u> </u>	
b	Did the organization make a distribution to a donor, donor advisor, or related person?		<u>9b</u>	<u> </u>	
10	Section 501(c)(7) organizations. Enter:	المدا			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	1		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1		
11	Section 501(c)(12) organizations. Enter:	440	1		
a	Gross income from other sources (Do not not amounts due or paid to other sources against	11a	1		
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1.24		
	1991 Sinter the difficulty of tax champs interest received of accorded during the year		' _	2000	

Form 990 (2009) Wyoming Lodging & Restaurant Association 83-0204942 Page 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

<u>sec</u>	tion A. Governing Body and Management						
_		1	ı	م د [-	Yes	No
1a	Enter the number of voting members of the governing body	<u>1a</u>		26			
b	Enter the number of voting members that are independent	1b		500			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other				7.
_	officer, director, trustee, or key employee?			. }	2	_	<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the	ie dire	ct supervisioi	'			v
4	of officers, directors or trustees, or key employees to a management company or other person?		O was filed?	-	3		X
4 5	Did the organization make any significant changes to its organizational documents since the prior Fo Did the organization become aware during the year of a material diversion of the organization's asset		o was illeur	-	5		X
6	Does the organization become aware during the year of a material diversion of the organization's assertion of the organization have members or stockholders?	101	•	-	6	Х	
7a		ember	 e of the	-	•	Λ	
	governing body?	CITIDO	5 01 1110		7a	x	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other pe	· rsons'		"	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken		•	•			
•	by the following:		9 ,				
а	The governing body?				8a	x	
	Each committee with authority to act on behalf of the governing body?	•	•	·	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached	at the	. [
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenu	e Code.)				
				_		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?				10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such	chap	ters, affiliates				
	and branches to ensure their operations are consistent with those of the organization?				10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before the state of the state o	filing tl	ne form?	Ĺ	11		<u> </u>
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			ŀ			
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 co	uld gi	e rise				
	to conflicts?			}	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,	descnbe				
	ın 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 approv		naepenaent				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	•			45-		X
a _		•	• •	-	15a		X
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)		•	• }	15b		
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment	with a				
u	taxable entity during the year?				16a		x
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evi	aluate	its participati	on I			 -
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org						
	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) a	vailable 1	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,	conflic	t of interest p	olicy, an	d fina	ncial	
	statements available to the public.						
20	State the name, physical address, and telephone number of the person who possesses the books a	and re	cords of the o	rganızatı	on. 🕨		
	WAGAN - (307) 634-8816						
	1825 Carey Ave. 82001						

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

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

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

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

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

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)					ılv)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual frustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Mark Demple										
Chair	5.00	X		X				0.	0.	0
John Eastman									,	
President	5.00	X		X				0.	0.	0
Barry Sims										
President Elect	5.00	X		X		L	L.	0.	0.	0
Chris Brown			1							
Vice President	5.00	X	<u> </u>	X				0.	0.	0
Jim Waldrop		Ì								
Treasurer	5.00	X	_	X				0.	0.	0
Lynn Birleffi										
Secretary	20.00	X		X				0.	0.	0
		-	_							
		-								
			-							
			-	\vdash	-					
				-						
			-	-	_	-				

Form 9	90 (2009) Wyoming I								t Associatio		<u> 204</u>	942	Pi	age 8
Part	VII Section A. Officers, Directors, Tru		mple	oyee			<u> High</u>	est		ees (continued)				
	(A)	(B)				C)			(D)	(E)		_	(F)	
	Name and title	Average hours	(cl		Pos call		app	ılv)	Reportable compensation	Reportable compensatio			timate nount	
		per	⊢ `	<u> </u>	T	Ī	T	,,	from	from related			other	··
		week	direct				Ę.		the		, i			
			stee or	ustee			ensate		organization (W-2/1099-MISC)	(W-2/1099-MIS 			om the anızat	
			la di	onal tr	İ	ployee	8 8					_	d relat	
			Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Гогтег				orga	ınızatı	ons
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1b T	otal	l	1	!	L			<u> </u>	0.		0.			0.
	otal number of individuals (including but n	ot limited to th	nose	liste	ed a	bov	e) wl	ho r	1	,000 in reportabl				
	ompensation from the organization						_							0
											r		Yes	No
	old the organization list any former officer,			, ke	y en	nplo	yee,	or t	nighest compensated ei	nployee on	1			
	ne 1a? If "Yes," complete Schedule J for s								h		.	3		<u> </u>
	or any individual listed on line 1a, is the sund related organizations greater than \$150									tne organization				x
	old any person listed on line 1a receive or a									ices rendered to	}	4		
	ne organization? If "Yes," complete Sched											5		Х
	on B. Independent Contractors													
1 (complete this table for your five highest co	mpensated in	depe	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of com	npensa	ation f	rom	
t	ne organization. NONE									 ,				
	(A) Name and business	address						l	(B) Description of s	ervices	C	(C ompe		n
								\dashv	- Bosonphon or c				-	· <u>·</u>
								i						
								T						
		<u> </u>						_						
		 _	-					-				-	-	
2 T	otal number of independent contractors (i	ncluding but r	not li	mıte	d to	tho	se li	stec	d above) who received n	nore than				
	100,000 in compensation from the organi	-					0		·					
		·										Form	990 (2009)

	1 VIII		ing & Rest	aurant As	sociation	83-0204	942 Page 9
<u>rai</u>	VIII	Statement of Nevenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
ts ts	1 a	Federated campaigns 1a					
E	b	Membership dues 1b					
S, g	С	Fundraising events 1c					
agi.	d	Related organizations 1d					
S,E	е	Government grants (contributions) 1e				Ì	
ti Si	f	All other contributions, gifts, grants, and					
혈		similar amounts not included above . 1f					
불일	g	Noncash contributions included in lines 1a-1f \$					
Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a 1f	▶.				
			Business Code				
Program Service Revenue		Membership Dues	561000	212,584.	212,584.		
	b	Annual Meetings	561000	57,612.	57,612.		
S E	C	Program Services	561000	37,894.	37,894.		
e a	d						
Prog	е						
	f	All other program service revenue		200 000			
		Total. Add lines 2a-2f	· · · ·	308,090.			<u></u>
	3	Investment income (including dividends, inte	L	2 222	2 222		
		other similar amounts)		2,322.	2,322.		
	4	Income from investment of tax-exempt bond	proceeds				
	5	Royalties . (i) Real	(ii) Personal				
	6 a	Gross Rents	(ii) reisonai				
		Less: rental expenses					
		Rental income or (loss)					
		Net rental income or (loss)	<u> </u>				
		Gross amount from sales of (i) Securities					
	, ,	assets other than inventory	(1) (1)				
	ь	Less: cost or other basis					
	_	and sales expenses					
İ	С	Gain or (loss)					
		Net gain or (loss)					
Other Revenue		Gross income from fundraising events (not including \$ of					
Ş.		contributions reported on line 1c). See					
Ę.		D 1841 40	a				
흌	ь		b				
0		Net income or (loss) from fundraising events	•				
		Gross income from gaming activities. See					
			a				
	b	Less direct expenses	b				
	С	Net income or (loss) from gaming activities					·
	10 a	Gross sales of inventory, less returns					
		and allowances	a				
	b	Less: cost of goods sold	b				
ļ	c	Net income or (loss) from sales of inventory	. •				
ļ		Miscellaneous Revenue	Business Code				,
	11 a						
İ	b						
	C						
	d	All other revenue					
	e	Total. Add lines 11a-11d		210 110	210 410		
93200	12	Total revenue. See instructions.	> _	310,412.	310,412.	0.	0.
02-04	-10						Form 990 (2009)

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

Do -	not include amounts reported on lines 6b,				(D) Fundraising
	Sb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21		· · · · · · · · · · · · · · · · · · ·		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22		·-···		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):	100 504			
а	Management	189,534.			
b	Legal .	454.			_
С	Accounting	6,615.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees			-	
g	Other		<u> </u>		<u> </u>
12	Advertising and promotion	12 545			
13	Office expenses	13,545.		<u> </u>	
14	Information technology	2,520.			
15	Royalties .				
16	Occupancy	10 776			
17	Travel	18,776.	-		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	83,931.			
19	Conferences, conventions, and meetings	03,931.		-	
20	Interest				
21	Payments to affiliates			-	
22	Depreciation, depletion, and amortization			-	
23	Insurance		-	<u> </u>	
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.) Dues	37,956.		1	
a b	Board Trust Program	21,468.		 	
b	Miscellaneous	10,506.			
ن	Membership Directory	5,295.	<u></u>		
u	Insurance	4,035.			
e f	All other expenses	203.			
25	Total functional expenses. Add lines 1 through 24f	394,838.			
<u>25</u> 26	Joint costs. Check here	3,5 2 ,0 30 •		· · · · · ·	
20	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	and the same of th				

Form 990 (2009)

Pai	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	196,895.	1	110,698.
	2	Savings and temporary cash investments	47,217.	2	48,988.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II			
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			· ·
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete	i		
		Part II of Schedule L		6	
Ø	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	-
As	9	Prepaid expenses and deferred charges		9	
	l .	Land, buildings, and equipment: cost or other	·		
		basis. Complete Part VI of Schedule D 10a			
	Ь			10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	 .
				13	
	13	Investments - program-related. See Part IV, line 11 Intangible assets		14	
	14	Other assets. See Part IV, line 11		15	
	15		244,112.	16	159,686.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	. 244,112.	17	132,000.
	17	Accounts payable and accrued expenses Grants payable		18	
	18	Deferred revenue	•	19	
	19			20	
	20	Tax-exempt bond liabilities		1 1	
Liabilities	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Ē	22	Payables to current and former officers, directors, trustees, key employed			
Lia		highest compensated employees, and disqualified persons. Complete Pa	ut II		
		of Schedule L	· · · · · · · · · · · · · · · · · · ·	22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D	0.	25	0.
	26	Total liabilities. Add lines 17 through 25		26	<u> </u>
		Organizations that follow SFAS 117, check here	iete		
ces		lines 27 through 29, and lines 33 and 34.	244 112		150 606
lan	27	Unrestricted net assets	244,112.	1 1	159,686.
Ba	28	Temporanly restricted net assets		28	
<u>n</u>	29	Permanently restricted net assets		29	
Ī		Organizations that do not follow SFAS 117, check here	d	1	
3 0		complete lines 30 through 34.		_	
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	<u> </u>
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	150 505
~	33	Total net assets or fund balances	244,112.		<u> 159,686.</u>
	34	Total liabilities and net assets/fund balances	244,112.	34	159,686.

orm	1 990 (2009) Wyoming Lodging & Restaurant Association 83-0204942	Pag	je 12
Pa	rt XI	Financial Statements and Reporting		
			Yes	No
1	Acco	unting method used to prepare the Form 990: X Cash Accrual Other		
	If the	organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were	the organization's financial statements compiled or reviewed by an independent accountant?	Х	
b	Were	the organization's financial statements audited by an independent accountant? 2b		X
C	If "Y	s" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,		
	revie	w, or compilation of its financial statements and selection of an independent accountant?		_X
	If the	organization changed either its oversight process or selection process during the tax year, explain in Schedule O		
d	If "Ye	s" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a		
	cons	olidated basis, separate basis, or both:		
		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 Single Audit		
	Act a	nd OMB Circular A-133?		_X_
b	If "Ye	s," did the organization undergo the required audit or audits? If the organization did not undergo the required audit		
	or au	dits, explain why in Schedule O and describe any steps taken to undergo such audits		
		Form S	9 90 (2009)

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.

2009
Open to Public Inspection

Name of the organization

Wyoming Lodging & Restaurant Association

Employer identification number 83-0204942

Par		d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		•
		(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 (dunng year)		
4	Aggregate value at end of year	*	
5	Did the organization inform all donors and donor advisors in w	vriting that the assets held in donor adv	ised funds
_	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor ad	-	e used only
_	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?		Yes No
Pai	rt II Conservation Easements. Complete if the org	anization answered "Yes" to Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or p	leasure) Preservation of an h	istorically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form	n 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
c	Number of conservation easements on a certified historic stru	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, rele	eased, extinguished, or terminated by tl	ne 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	iodic monitoring, inspection, handling of	f
	violations, and enforcement of the conservation easements it		L Yes L No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 17	
_	and section 170(h)(4)(B)(ii)?		Yes L No
9	In Part XIV, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describe	s the organization's accounting for
Dai	conservation easements. rt III Organizations Maintaining Collections of	Art Historical Treasures or	Other Similar Assets
Га	Complete if the organization answered "Yes" to Form:	· ·	outer offiliar Assets.
	Complete it the organization and the test to to the	000,1 41,11,1110 0.	
10	If the organization elected, as permitted under SFAS 116, not	t to report in its revenue statement and	halance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	· ·	
	the footnote to its financial statements that describes these if		
b	If the organization elected, as permitted under SFAS 116, to		ance sheet works of art, historical treasures.
-	or other similar assets held for public exhibition, education, or	•	
	these items:	. rocca. or in randous area or passio cor ri	so, provide the femouring amounte relating to
	(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 trea		· · · · · · · · · · · · · · · · · · ·
_	the following amounts required to be reported under SFAS 1	·	• , p
а	Revenues included in Form 990, Part VIII, line 1	•	> \$
	Assets included in Form 990, Part X		S

Bart III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)	-		Lodging &								
conceck all that apply): a											
Public exhibition d Loan or exchange programs	3		on, and other record	is, check any or the	FIGHOWING THA	il ale a si	giiiicani t	ise oi its	Collectio	HILEHI	5
b Scholarly research e Other Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solf to raise funds rather than to be maintained as part of the organization's collection? Yes No. Part IV Scorow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990 Art X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 1b If Yes, explain the arrangement in Part XIV and complete the following table: 1 Candiditions during the year 2 Distributions during the year 3 Ending balance 4 Additions during the year 5 Ending balance 4 Distributions during the year 6 Ending balance 2 Distributions during the year 7 Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance 6 Contributions 6 Net investment earnings, gains, and losses 6 Grants or scholarships 6 Other expenditures for facilities 7 Administrative expenses 9 End of year balance 9 Contended organizations 10 In related organizations 11 Administrative expenses 9 End of year balance 12 Provide the estimated percentage of the year end balance held as: 13 Board designated or quasisendowment \$\infty\$ 6 14 Permanent endowment \$\infty\$ 6 15 Permanent endowment funds not in the possession of the organization that are held and administered for the organization by: 16 Permanent endowment funds not in the possession of the organization that are held and administered for the organization by: 17 Pert to Salin, are the related organizations listed as required on Schedule R? 2 Describe in	а	`	d	Loan or exc	change progra	ams					
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete firganization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b If Yes, "explain the arrangement in Part XIV and complete the following table: C Beginning balance c Beginning balance d Additions during the year 1 Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance 1b Contributions 1 Administrative expenses 2 End of year balance 3 Cartan so resolicarships 4 Ordine expenditures for facilities and programs 1 Administrative expenses 2 End of year balance 3 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment 96 5 Term endowment 96 5 Term endowment 96 5 Term endowment 96 6 Term endowment 96 6 Term endowment 96 6 Term endowment 96 7 Term endowment 96 8 Demander endowment 96 9 Permanent endowment 96 9 Permanent endowment 96 1 Description of investment endid so of the organizations sted as required on Schedule P? 1 Description of investment (a) Cost or other basis (other) (b) Accumulated depreciation (b) Polyce the basis (other) (b) Accumulated depreciation (d) Book value basis (investment) 96 1a Land 96 1b Buildings 96 1c Lassehold improvements 96 1c Lassehold improvements 96 1c Lassehold improvements											
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 Duming the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990. Part X line 21. 1a Is the organization an agent, trustee, oustodian or other intermediary for contributions or other assets not included on Form 990. Part X line 21. 1b If "Yes," explain the arrangement in Part XIV and complete the following table: C Beginning balance 1		,	C			 					
5 During the year, did the organization solicit or receive donations of art, instoncal treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	4	_	ollections and evolui	n how they further	the organization	on'e avar	nnt nurno	ee in Par	Y1\/		
to be sold to rase funds rather than to be maintained as part of the organization collection?	- -	_			=			SC III F al	L AIV.		
Eart IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, Ine 9, or reported an amount on Form 990, Part X, Ine 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ves	3										
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Par					s" to Form	n 990 Pa	rt IV line			1 140
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ves	<u> </u>										
on Form 990, Part X?	12	~,~		liary for contribution	ns or other as	sets not	ıncluded				
b If "Yes," explain the arrangement in Part XIV and complete the following table: C Beginning balance	ıa	_		-	no or other as	3013 1101	iiiciaaca		Vac		No
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Distributions during the year f Ending balance 3 Did the organization include an amount on Form 990, Part X, line 217 Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment 96 b Permanent endowment 96 c Term endowment 96 c Term endowment 96 c Term endowment 97 c Term endowment 97 c Term endowment 98 share there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations if "Yes" to 3a(i), are the related organizations listed as required on Schedule R? 4. Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Part VI Investments - Land, Buildings, and Equipment basis (investment) basis (other) depreciation b Buildings Glocal Content Col Accumulated	.				•		•		_ 163		7 140
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? bif Yes, explain the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance	U	in res, explain the arrangement in rait XIV	and complete the to	mowing table.				-	Amoun	+	
d Additions during the year Distributions during the year 1 1 1 1 1 1 1 1 1	_	Reginning balance					10		Anoun	<u>. </u>	
e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21? The organization include an amount on Form 990, Part X, line 21? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. The organization of year balance (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back		· -				•					
f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21?		-			• •						
2a Did the organization include an amount on Form 990, Part X, line 21? b If Yes,* explain the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ 96 b Permanent endowment ▶ 96 c Term endowment I ▶ 96 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment a Land b Buildings c Leasehold improvements d Equipment e Other .	4			•	•						
Segment Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back b Contributions (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back c Contributions (b) Pnor year (c) Two years back (d) Three years back (e) Four years back c Contributions (b) Pnor year (c) Two years back (d) Three years back (e) Four years back c Contributions (b) Pnor year (c) Two years back (d) Three years back (e) Four years back c Contributions (e) Pnor year (c) Two years back (d) Three years back (e) Four years back c Contributions (e) Pnor year (c) Two years back (d) Three years back (e) Four years back c Contributions (e) Pnor year (c) Two years back (d) Three years back (e) Four years back c Contributions (e) Four years back (d) Three years back (e) Four years back c Contributions (e) Pnor year (c) Two years back (d) Three years back (e) Four years back d Contributions (e) Pnor year (c) Two years back (e) Four years back (e) F	00		 			•	[11]		7 ٧		T.N.
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back		-		211	•	•			_ res		7 MO
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back				swered "Yes" to Fo	orm 990 Part	IV line 1	<u> </u>		•		
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs 1 Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment \(\bigcirc \) % b Permanent endowment \(\bigcirc \) % c Term endowment \(\bigcirc \) % 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (investment) (b) Equipment depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other		T T T T T T T T T T T T T T T T T T T						ears hack	(a) Four	r vears	hack
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment	10	Reginning of year halance	(a) Ourient year	(b) i noi year	(C) (Wo year	IS DOCK	(u) Thice y	cars back	(e) i ou	yours	Daux
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d Grants or scholarships e Other expenditures for facilities and programs 1 Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment	•	• • • •					·				
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g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶											
2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶		·					-				
Board designated or quasi-endowment Mathematical States Mat		* * * *	r and balance hald a	\	_l						
b Permanent endowment	-		ii end balance neld a	15. 04							
Term endowment ▶			0/								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (investment) basis (other) c Leasehold improvements d Equipment e Other		•	 i -								
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(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other									0-(1)	res	NO
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Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (other) (b) Cost or other depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other	4		-						30		L
Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value basis (other) Leasehold improvements d Equipment e Other	Par				O Part V line	10					
basis (investment) basis (other) depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other	- 4						nou imi iloto	<u>а</u>	(d) Poo	L vote	
ta Land b Buildings c Leasehold improvements d Equipment e Other		Description of investment	, , <i>,</i>	1 , ,				١	(a) Boo	K Value	E
b Buildings c Leasehold improvements d Equipment e Other		Land	, , , , , , , , , , , , , , , , , , , ,		· '			- 			
c Leasehold improvements d Equipment e Other		• • •									
d Equipment		-	_								
e Other		•									
			-					-			
			equal Form 990. Part	X. column (B). line	10(c).)						0.

0 . Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 Wyoming Lod	<u>lging & Restau</u>	rant Associati	ion 83-0204942 Page 3
Part VII Investments - Other Securities. Se	e Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b) Book value		ethod of valuation d-of-year market value
Financial derivatives			
Closely-held equity interests			
Other			
		<u> </u>	
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)			<u>-</u>
Part VIII Investments - Program Related. S	ee Form 990, Part X, line 1		ath and an explainment
(a) Description of investment type	(b) Book value		ethod of valuation: nd-of-year market value
		0031 01 011	id of year market value
	· · · · · · · · · · · · · · · · · · ·		
<u> </u>			
			
			· · · · · · · · · · · · · · · · · · ·
	-		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, line	15.		
<u> </u>	Description	· · · · · · · · · · · · · · · · · · ·	(b) Book value
			
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15.)		
Part X Other Liabilities. See Form 990, Part X,	line 25.		
1. (a) Description of liability		(b) Amount	
Federal income taxes			

			-
Total (Column (h) must sound Form 000, Dark V and (D) to	251		
Total. (Column (b) must equal Form 990, Part X, col (B) line 2. FIN 48 Footnote. In Part XIV, provide the text of the footnote.		financial statements that m	enorte the organization's liability for

15

_	dule D (Form 990) 2009 Wyoming Lodging & Restaurant Associa)4942 Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Finan	cial State	ements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		310,412.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		394,838.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		-84,426.
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	· · ·	
	Other (Describe in Part XIV.)	8		
8	Total adjustments (net). Add lines 4 through 8	9		
9	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		-84,426.
10 Pai	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue Translation of Revenue Per Audited Financial Statements With Revenue Per Audited F		Return	-04,440.
		ide per i		
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		-	
С	Recoveries of prior year grants		4	
d	Other (Describe in Part XIV)		4	
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		_	
b	Other (Describe in Part XIV.)			
C	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expe	nses pe	r Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities			
b	Pnor year adjustments]	
С	Other losses		<u> </u>	
d	Other (Describe in Part XIV.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIV.)		1	
-	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	••	5	· · · · · · · · · · · · · · · · · · ·
_	rt XIV Supplemental Information		, ,	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	art IV linee	1b and 2b: E	Part V. line 4: Part
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to pro			
, ,		rriae arry ar		
				
				

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047
2009

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

➤ Attach to Form 990. ➤ See separate instructions.

Wyoming Lodging & Restaurant Association
Part I Questions Regarding Compensation

83-0204942

Employer identification number

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	:		
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)		ľ	
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?			
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply.	,		
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year did any person leted in Form 900 Part VIII Section A line 1e with respect to the filing			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
_	Receive a severance payment or change-of-control payment?	4a		х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
_	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	+		
	The state of the second and provide the applicable amounts for each term in the artific			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5				
	contingent on the revenues of:			
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		ļ <u> </u>
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	ınıtıal contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			Ì
	Regulations section 53.4958-6(c)?	9		<u></u>

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

Schedule J (Form 990) 2009

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed. Schedule J (Form 990) 2009

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(Q)	(E)	(F)
		Retirement and	Nontaxable	Total of columns	Compensation
(ij) Base (ii) Bonus & compensation compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D)·(I)(B)	reported in prior Form 990 or
•					FOILII 990-EZ
(1)					
(ii)					
(0)					
(ii)					
(0)					
(1)					
(0)					
(1)					
(1)					
(ii)					
0					
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(1)					
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(1)					
(ii)					
0		:			
(ii)					
0					
(ii)					
8					
(0)					
8					
(ii)					
0					
(i)					
6					
(0)					
8					
(m)					
(1)					

Schedule J (Form 990) 2009

SCHEDULE L

Department of the Treasury

(Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c. or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047 Open To Public

Internal Revenue Service Inspection Name of the organization Employer identification number Wyoming Lodging & Restaurant Association 83-0204942 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. 1 (c) Corrected? (a) Name of disqualified person (b) Description of transaction Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a. (f) Approved (a) Name of interested (g) Written (b) Loan to or from (c) Original principal (e) In (d) Balance due by board or default? person and purpose the organization? amount agreement? cómmittee? Yes No To From Yes No Yes No Total **Grants or Assistance Benefiting Interested Persons.** Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and (c) Amount and type of the organization assistance² **Business Transactions Involving Interested Persons.**

Lynn Birleffi 189,534.WLRA is 100% owned is man

(b) Relationship between interested

person and the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

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

(a) Name of interested person

Schedule L (Form 990 or 990-EZ) 2009

(d) Description of

transaction

(e) Sharing of

òrganızatıon's

revenues? No

X

Yes

See Schedule O for Schedule L Continuations

(c) Amount of

transaction

SCHEDULE O

Supplemental Information to Form 990

(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 Lodging & Restaurant	Association	Employer identification number 83-0204942
Form 990, Part I, Line 1, Description of Organ	nization Mis	sion:
education, and stay current with industry reg	ulations.	
Form 990, Part VI, Section A, line 6: WLRA co	nsists of ar	proximately 500
members within its association.		
Form 990, Part VI, Section A, line 7a: WLRA's	governing b	oard of directors
are elected each year by its membership.		
Form 990, Part VI, Section B, line 11: Please	complete.	
Form 990, Part VI, Section B, line 11: WLRA se	ecretary Lyn	n Birleffi will
review Form 990 prior to its filing. The ent	ire board of	directors will
also review the form at its next meeting.		
Form 990, Part VI, Section C, Line 19: All WL	RA governing	documents,
policies, and financial statements are made a	vailable upc	n request.
Sch L, Part IV, Business Transactions Involvi	ng Intereste	d Persons:
(a) Name of Person: Lynn Birleffi		
(b) Relationship Between Interested Person and	d Organizati	on:
WAGAN is 100% owned by Lynn.		
(c) Amount of Transaction \$ 189534.		
(d) Description of Transaction: WLRA is manag	ed through W	AGAN contract.
(e) Sharing of Organization Revenues? = No		