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EPCCA 09/14/2010 Form 990

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)

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

OMB No 1545-0047 2009 Open to Public Inspection

<u>A</u>	For the 2009	calendar year, or tax year beginning , and ending			
В	Check if applicable	and i		D Employ	er identification number
	Address change	label or ASSOCIATION, INC.		0.4	0065400
	Name change	print or Doing Business As			0865490
	Initial return	type Number and street (or P O box if mail is not delivered to street address) See P.O. BOX 94	Room/suite		ne number - 475 - 0700
	Termination	Specific	<u>' </u>	G Gross receip	45.005
	Amended return	tions. COLORADO SPRINGS CO 80901-0094	Ì	O Gloss receip	
		F. Name and address of proposal officer		H(a) Is this a	group return for
	Application pendii	JERRY SCHMITZ		affiliates	
		SAME AS C ABOVE		H(b) Are all a included	
				If "No,"	attach a list (see instructions)
1	Tax-exempt st				
	Website:	WWW.ELPASOCOUNTYCONTRACTORS.COM			xemption number
177777	Type of organiza		Year of formation 1	961	M State of legal domicile CO
		Summary			
		describe the organization's mission or most significant activities: PROMOTE EDUCATION AND SKILL DEVELOPMENT IN THE FIELD	OF		
92		NERAL CONTRACTING.			
T a					
Activities & Governance	2 Check	this box > if the organization discontinued its operations or disposed of more than 25%	6 of its net assets		
Ğ		er of voting members of the governing body (Part VI, line 1a)		3	7
es c	4 Numb	er of independent voting members of the governing body (Part VI, line 1b)		4	7
Σŧ	5 Total	number of employees (Part V, line 2a)		5	0
Act	6 Total	number of volunteers (estimate if necessary)		6	
	1	gross unrelated business revenue from Part VIII, column (C), line 12		7a	-843
	b Net ur	nrelated business taxable income from Form 990-T, line 34	Prior Yea	7b	- 843 Current Year
	8 Contri	butions and grants (Part VIII, line 1h)	Thorrea	875	700
Revenue		am service revenue (Part VIII, line 2g)	48	3,440	46,680
eve	1	ment Income (Part VIII) column (A), lines 3, 4, and 7d)		1,131	798
œ	11_0 her.	revenue (Rar VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,757	-843
		revenue – add lines Athrough 11 (must equal Part VIII, column (A), line 12)		2,203	47,335
	H GEE	pang symilan amounts paid (Part IX, column (A), lines 1–3)	14	1,000	14,000
	14 Bener	its paid to or for mentipers (Part IX, column (A), line 4)	-	1 000	2,500
3es	15≥Satan	es sother compen sation, employee benefits (Part IX, column (A), lines 5–10) Storial fundral <u>sing-fees</u> (Part IX, column (A), line 11e)	-	1,000	2,500
2010 pense		ssional-jungtaising-rees (Part IX, column (A), line 11e) fundraising expenses (Part IX, column (D), line 25) ▶			
es m		expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	3,	7,212	36,309
		expenses (1 art IX, column (X), lines 11a-11d, 111-24f) expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		2,212	52,809
<u>-</u>		nue less expenses Subtract line 18 from line 12		-9	-5,474
			Beginning of Cur		End of Year
	20 Total	assets (Part X, line 16)	7.	1,975	66,358
Not Ass	21 Total	habilities (Part X, line 26)	7.	143 1,832	66,358
	22 Net a	ssets or fund balances Subtract line 21 from line 20	/.	1,034	00,336
	art II	Signature Block Under penalties of perjury, I declare that I have exampled this return, including accompanying schedules a	and atotamonto and	to the best of	my knowledge
න		and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all infor	mation of which prej	parer bas any	knowledge
Sig	nr l	1 lem sum		Ŋ	9-20-10
He		Signature of Officer		Date	
		SUMMATICE RRY SCHMITZ SEC/T	RE>		
		Type or print name and title			
		Preparer's Date	Check	ıf	Preparer's identifying number (see instructions)
Pa			.4/10 self- employ	ed 🕨 📙	P00366580
	eparer's	Firm's name (or yours HESLI & COMPANY, PC		EIN ▶	84-1029510
US	e Only	if self-employed), 5350 TOMAH DR STE 1200	_	Phone	
		address, and ZIP+4 COLORADO SPRINGS, CO 80918-6975	5	no 🕨	719-598-1900
		cuss this return with the preparer shown above? (see instructions)			Yes No
For DA		and Paperwork Reduction Act Notice, see the separate instructions.			Form 990 (2009)

Part III Statement of Program S	Service Accomplishments		
1 Briefly describe the organization's mission TO PROMOTE EDUCATION A GENERAL CONTRACTING.		T IN THE FIELD OF	
 Did the organization undertake any signification the prior Form 990 or 990-EZ? If "Yes," describe these new services on S Did the organization cease conducting, or services? If "Yes," describe these changes on Scheet Describe the exempt purpose achievement Section 501(c)(3) and 501(c)(4) organization allocations to others, the total expenses, a 	schedule O make significant changes in how it condition dule O its for each of the organization's three lar ons and section 4947(a)(1) trusts are rec	ucts, any program rgest program services by expenses quired to report the amount of grants and	Yes X No
4a (Code) (Expenses \$ PERIODIC GENERAL MEMBIOF EDUCATION AND DISCUISSUES.		THE PURPOSE)
4b (Code) (Expenses \$ SCHOLARSHIP GRANTS - A MIDDLE SCHOOLS TO PROB SKILLS ASSOCIATED WITH	MOTE AND ENCOURAGE I	I SCHOOLS AND THE GROWTH OF)
4c (Code) (Expenses \$	including grants of	\$) (Revenue \$)
4d Other program services (Describe in Sch			
(Expenses \$	including grants of \$ 47,440) (Revenue \$)
4e Total program service expenses ▶	3/,330	·	Form 990 (2009)

Form 990 (2009) EL PASO COUNTY CONTRACTORS' Page 3 **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X 3 candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) X 5 notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 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," X 6 complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, X 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Х 8 complete Schedule D, Part III 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," X 9 complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or X 10 quasi-endowments? If "Yes," complete Schedule D, Part V Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, X 11 VII, VIII, IX, or X as applicable • 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 • 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 related 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 the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12 X 12 Schedule D, Parts XI, XII, and XIII 12A Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No X 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 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, X 14b business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I Did the organization report on Part iX, column (A), line 3, more than \$5,000 of grants or assistance to any 15 X 15 organization or entity located outside the United States? If "Yes," complete Schedule F, Part II Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 X 16 to individuals located outside the United States? If "Yes," complete Schedule F, Part III Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 17 X 17 on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19

19

X

X

If "Yes," complete Schedule G, Part III

Did the organization operate one or more hospitals? If "Yes," complete Schedule H

Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations X 21 in the United States on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants and other assistance to individuals in the 22 X United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 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 X 23 employees? If "Yes," complete Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines X 24b through 24d and complete Schedule K. If "No," go to line 25 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c to defease any tax-exempt bonds? 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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 that the transaction has not been reported on any of the organization's prior Forms 990 or 25b 990-EZ? If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or X disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 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? X 27 If "Yes," complete Schedule L, Part III 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) 28a X 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 X 28b Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, X 28c Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X 30 conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 32 Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X 33 sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 X 34 III, IV, and V, line 1 is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 X 35 Schedule R. Part V. line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 36 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, X 37

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

38

<u> Pa</u>	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	1a	1			
þ	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and report	able			v	
•	gaming (gambling) winnings to prize winners?	1		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		0			
_	Statements, filed for the calendar year ending with or within the year covered by this return	2a		2	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	,			1	
Ja	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 auth	ontv				
	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 Ban	k			- 1	
	and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		_ <u>X</u> _
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	?		5b	[<u> </u>
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	ng				
	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 any contributions that were not tax deductible?			6a		_ <u>x</u> _
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions of	or				
_	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).	ı_			1	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	IS		7a	Ī	
b	and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
ŭ	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 person					
	benefit contract?			7e]	
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				I	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				ŧ	
	organization, have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.				ŧ	
a	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	10a			1	
a b	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	10a 10b			1	
11	Section 501(c)(12) organizations. Enter	100			I	
'' a	Gross income from members or shareholders	11a			1	
b	Gross income from other sources (Do not net amounts due or paid to other sources against				ı	
-	amounts due or received from them)	11b			1	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10			12a]	
b_	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
				Form	990	(2009)

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			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customanly performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	}		
	of the governing body?	7a	<u> </u>	Ь—
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X	ļ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following	1		Ī
а	The governing body?	8a	X	<u> </u>
b	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 reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
	tion B. Policies (This Section B requests information about policies not required by the Internal			
Kev	venue Code.)		V	
400	December organization have local chapters, branches, or offiliator?	10a	Yes	No X
10a	Does the organization have local chapters, branches, or affiliates?	iva		
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10b		
44	affiliates, and branches to ensure their operations are consistent with those of the organization? Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	100		\vdash
11	form?	11	х	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990	<u> </u>		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
·	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		x
14	Does the organization have a written document retention and destruction policy?	14		х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	†
b	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 arrangement			ŧ
	with a taxable entity during the year?	16a	[X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
_	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			l
	the organization's exempt status with respect to such arrangements?	16b		
Sec	ction 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)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ JEROME L. SCHMITZ P.O. BOX 94			
C	olorado springs CO 80901-0094 719	<u> - 47</u>	5 - 0	700

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Form **990** (2009)

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	Pos	ition (C) k all t	hat a	(vlac	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	or director		Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
CHRIS WHITE	1 00	٦,						•	0	
PAST PRES.	1.00	X	_					0	0	0
DENNIS GATES	1 00	<u>.</u>						0	0	
BOARD MEMBER MARIO RIGGIO	1.00	X						0		0
BOARD MEMBER	1.00	x						0	0	o
RON GRASSE	1.00	┼≏		 	-		\vdash	O		
BOARD MEMBER	1.00	x						0	0	o
JEROME L. SCHMITZ		┼≏		-	 	\vdash	\vdash			
SEC./TREAS.	1.00			x				2,500	0	o
MIKE ST MARIE	1.00	t		-	 -	 		2,500		
VICE PRES.	1.00	İ		x				0	0	0
STEVE LEPINE	1.00	+		-		t^-				
PRESIDENT	1.00			x				0	0	0
		 		-						

Pa	rt VII Section A. Officers	, Directors, Trus	tees	, Ke	y Em	ploy	ees,	, an	d Highest Compensated E	mployees (continued)			
•	(A) Name and Title	(B) Average	Pos	ition (C) k all t	hat ap	oply)	(D) Reportable	(E) Reportable		(F) stimated	
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	com fr org an	nount of other pensation om the anization directions anizations anizations	
	.,												
	- 0- 0-												
													
		1								······································			
												· · · · · · · · · · · · · · · · · · ·	
	Tatal								2,500				
2	Total Total number of individuals (inc	-		_	ose	isted	abo	ve)					
	reportable compensation from			0		<u>-</u>						Yes	No No
3 4	Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line the organization and related organization	complete Schedu	ile J	for so	uch i le co	ndıvi mpe	dual ensat	ion a	and other compensation froi	m uch		3	x
5	individual Did any person listed on line 1a services rendered to the organ											5	X
Sec	ction B. Independent Contracto	ors									<u> </u>		
	Complete this table for your five compensation from the organization	ation	nsate	d inc	depe	nder	nt cor	ntrac				(C)	
	Name and	(A) business address							Descrip	(B) tion of services		(C) Compen	sation
									_				
								-					
								<u> </u>		<u> </u>			
2	Total number of independent c	•	-				to th	ose	listed above) who received				· A
DAA	more than \$100,000 in comper	nsation from the o	orgar	ıızatı	on 🕨	•						0 Form 99	0 (2009)

Pa	rt V	III Statement of Reve	nue			·			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
SS	10	Federated campaigns	1a			······································	Tevenue		312, 310, 01 314
Contributions, gifts, grants and other similar amounts	Id L	, •	1b					1	
PE	D	Membership dues						1	
ra Ia	ت د	Fundraising events	1c 1d						
96	a	Related organizations	-						
Sis	θ	Government grants (contributions)	1e						
ĘĘ.	t	All other contributions, gifts, grants, and similar amounts not included above			700				
들핑			1f		700				
0 5	g	Noncash contributions included in lines 1a-	lf :	₿	_				
5	h	Total. Add lines 1a-1f			, 	700			
į					Busn. Code				
Ş	2a	DUES AND MEALS			ļļ.	46,680	46,680		
20	b				<u> </u>			-:·	
اڅ	С				ļ				
Se	d								
ä	е								
Program Service Revenue	f	All other program service reven	ue		L			,	
ے	9	Total. Add lines 2a-2f			<u> </u>	46,680			
	3	Investment income (including d	ividend	s, interes	t, and				
		other similar amounts)			▶ _	798			798
	4	Income from investment of tax-	exemp	t bond pro	ceeds 🕨 📙				
	5	Royalties							
		(ı) Real		(II) F	Personal				
	6a	Gross Rents							
	b	Less rental exps							
	C	Rental inc or (loss)				1			
	_d	Net rental income or (loss)			•				
	7a	Gross amount from sales of assets (i) Securities	3	(n)	Other				
		other than inventory							
	b	Less cost or other							
		basis & sales exps				1			
	С	Gain or (loss)							
	d	Net gain or (loss)			>				
	8a	Gross income from fundraising even	ıts						
nue		(not including \$							
eve		of contributions reported on line 1c)							
Other Reven		See Part IV, line 18	а						
ţ.	b	Less: direct expenses	b			#			
0	C	Net income or (loss) from fundr	aising	events	•				
	9a	Gross income from gaming activities	3						
		See Part IV, line 19	а						
	b	Less. direct expenses	ь	·					
	С	Net income or (loss) from gami	ng acti	vities	•				2.073.100
	10a	Gross sales of inventory, less							
		returns and allowances	а						
	b	Less cost of goods sold	b						
	С	Net income or (loss) from sales	of inve	entory	>				
		Miscellaneous Revenue			Busn. Code				
	11a	GOLF TOURNAMENT			900004	-843		-843	
	b								
	С								
	d	All other revenue							
i	е	Total. Add lines 11a-11d			>	-843			
	12	Total Revenue. See instruction	าร	-	▶	47,335	46,680	-843	798

Form' 990 (2009)

Part IX Statement of Functional Expenses

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

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

		(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b,	Total expenses	Program service	Management and	Fundraising
	, 8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and	14 000	14 000		
_	organizations in the U.S. See Part IV, line 21	14,000	14,000		
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	2,500		2,500	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)	,			
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
	Legal			·····	
	Accounting	675	- 1	675	··· <u>·</u>
	Lobbying				
е	Professional fundraising services See Part IV, line 17				Ŧ <u>.</u>
f	Investment management fees				
g	Other				'
12	Advertising and promotion				· .
13	Office expenses	672		672	·
14	Information technology	958	958		·
15	Royalties	, , , ,	750		
16	Occupancy		<u></u>		
17	Travel				
18		<u>-</u>			
.0	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	32,482	32,482		
20	Interest	32,702	34,704		
	• •				
21	Payments to affiliates				·-
22	Depreciation, depletion, and amortization	1,422		1,422	
23	Insurance	1,724		1,422	
24	Other evenence Hemire eveness at	1			
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed	1			
_	5% of total expenses shown on line 25 below) DUES	100		100	
a	D0EG	100		100	
b					
C					
d					
9	All offered and a second				
f	All other expenses	F0 000	AD 440	F 262	
25	Total functional expenses. Add lines 1 through 24f	52,809	47,440	5,369	
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				
D A A	fundraising solicitation	<u> </u>			

Part X	Balance Sheet			
		(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing		_1	
2	Savings and temporary cash investments	21,159	2	14,754
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees	s, key	1	
	employees, and highest compensated employees. Complete Pa	nrt II of	I	
	Schedule L		5	
6	Receivables from other disqualified persons (as defined under s	section	ı	
	4958(f)(1)) and persons described in section 4958(c)(3)(B) Cor	nplete	-	
	Part II of Schedule L		6	
7	Notes and loans receivable, net		7	
7 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment cost or		1	
	other basis Complete Part VI of Schedule D 10a		1	
b	Less accumulated depreciation 10t		10c	
11	Investments—publicly traded securities	50,816	11	51,604
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 equal line 34)	71,975	16	66,358
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Sched	ule D	21	
22	Payables to current and former officers, directors, trustees, key		1	
5	employees, highest compensated employees, and disqualified		1	
21 22	persons Complete Part 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	143	25	
26	Total liabilities. Add lines 17 through 25	143	26	
?	Organizations that follow SFAS 117, check here ▶ X and	1	1	
ا <u>د</u>	complete lines 27 through 29, and lines 33 and 34.		1	
27 28 29 30 31 32 33 33 34	Unrestricted net assets	71,832	27	66,358
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
5	Organizations that do not follow SFAS 117, check here ▶		1	
	and complete lines 30 through 34.		1	
3 30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other		32	
33	Total net assets or fund balances	71,832	33	66,358
ž 34	Total liabilities and net assets/fund balances	71,975	34	66,358

Form **990** (2009)

Pa	art XI Financial Statements and Reporting			
			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			Ė
	Schedule O			É
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
ь	Were the organization's financial statements audited by an independent accountant?	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			ł
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		L
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			ĺ
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			Ĺ
	issued on a consolidated basis, separate basis, or both			Ė
	Separate basis Consolidated basis Both consolidated and separate basis			į
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	ŀ		l
	the Single Audit Act and OMB Circular A-133?	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			l
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		L
		Form	990	(2009)

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SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service
Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22. ► Attach to Form 990.

OMB No 1545-0047 2009

Open to Public Inspection

Name of the organization EL PASO COUNTY CONTRACTORS ' ASSOCIATION, INC.	FRACTORS '	·		:	Employer 84 - 08	Employer identification number 84 – 0865490		
	Assistance							
Does the organization maintain records to substantiate the amount of the grants the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant.	e amount of the grance?	ts or assistant Int funds in	or assistance, the grantees' eliginal funds in the United States	or assistance, the grantees' eligibility for the grants or assistance, and funds in the United States	assistance, and		☐ Yes	Š X
i iii	vernments and ecipient that rec if additional sp	1 Organize eived motace is ne	zations in the Un re than \$5,000. C	ited States. Comp Check this box if n	o one recipient	nization answer received more	red "Yes" to than \$5,000. Use	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	te
 2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations 	organizations							
For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	he Instructions for	Form 990.					Schedule I (Form 990) 2009	990) 2009

Page 2

Schedule I (Form 990) 2009 EL PASO COUNTY CONTRACTORS! 84-0865490

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(e) Method of valuation (book, FMV, appraisal, other)
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	omplete this part to p	rovide the informatio	n required in Part I, li	ne 2, and any other addition	nal information.

Schedule I (Form 990) 2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

2009

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.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

EL PASO COUNTY CONTRACTORS' ASSOCIATION, INC.

Employer identification number

84-0865490

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS THE ASSOCIATION'S OFFICERS AND BOARD OF DIRECTORS ARE ELECTED BY THE MEMBERS OF THE ASSOCIATION IN AN ANNUAL ELECTION.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS THE ASSOCIATION'S OFFICERS AND BOARD OF DIRECTORS ARE ELECTED BY THE MEMBERS OF THE ASSOCIATION IN AN ANNUAL ELECTION. THE MEMBERS HAVE THE RIGHT TO CONTINUE OR DISSOLVE THE ASSOCIATION IN A GENERAL VOTE.

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE FORM 990 IS REVIEWED IN DETAIL BY THE TREASURER AND PROVIDED TO THE BOARD OF DIRECTORS FOR THEIR REVIEW.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL THE BOARD OF DIRECTORS ANNUALLY APPROVES THE COMPENSATION OF THE ONLY COMPENSATED OFFICER, THE TREASURER,

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION ALL GOVERNING DOCUMENTS OF THE ORGANIZATION ARE AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST OF THE BOARD OF DIRECTORS.