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Form **990-EZ**

Department of the Treasury

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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

OMB No 1545-1150

2009

Open to Public Inspection

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Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 930-EZ). H. Check ► If the organization is not required in the state of the charitable trusts must attach a completed Schedule A (Form 990 or 930-EZ). H. Check ► If the organization is not required to the state Schedule B (Form 990, 990-EZ) or 930-FP.	Ħ.	Amended	return	•	City, town, or c	ountry St	ate Zi	P+4	F Grou	p Exem	otion
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K Check ▶ If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses to the a return, be sure to the a complete return. Local intensity of the section of the action of the											e B (Form 990,
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14 Occupancy, removificible, hydrobintenance 14 11,6 15 Printing, publications, postage, and stunding 15 16 Other expenses (describe 15 See Attached Statement 17 Total expenses. Additions of through 66 17 267,9 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 15,6 19 Net assets or fund palances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure regarded on prior year's return) 19 128,7 20 Other changes in net assets or fund balances (attach explanation) 20 17,2 21 Net assets or fund balances at end of year. Combine lines 18 through 20 161,6 Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part III.) 22 Cash, savings, and investments 125,278 22 155,4 23 Land and buildings 23 24 10,5 24 Other assets (describe See Attached Statement) 3,423 24 10,5 25 Total assets (describe Accrued payables) 0 26 4,4	Ĕ	13 F	rofession	al fees ar	nd other paymer	nts to independent contr	actors		L	13	3,3
15 Printing, publications, postage, and stipping 16 Other expenses (describe) See Attached Statement 17 Total expenses. Additions 10 through (6). 18 Excess or (deficit) for the year (Subtract line 17 from line 9). 19 Net assets or fund belances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return). 19 128,7 20 Other changes in net assets or fund balances (attach explanation). 21 Net assets or fund balances at end of year. Combine lines 18 through 20. Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.) (A) Beginning of year (B) End of year 23. 22 Cash, savings, and investments. 23 Land and buildings. 24 Other assets (describe See Attached Statement). 25 Total assets. 26 Total liabilities (describe Accrued payables). 27 Otal liabilities (describe Accrued payables).	ĕ	14 (Occupan e y	7, rentout	ultiee, abulmain	tenarice			. L	14	11,6
16 Other expenses (describe	<u> </u>	15 F	Printing, թխ	ubl <u>icatub</u> h	s , postage, and	shippling			. [15	
17 Total expenses. Add Jines 16 through 166.		16 C	Other expe	ensles (de	scribe 📐 See .	Aftached Statement			- \ \ F	16	79.4
18 Excess or (deficit) for the year (Subtract line 17 from line 9). 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return). 20 Other changes in net assets or fund balances (attach explanation). 21 Net assets or fund balances at end of year. Combine lines 18 through 20. Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.) (See the instructions for Part III.) (A) Beginning of year (B) End of year 23. 24 Other assets (describe See Attached Statement) 3,423 24 10,5 Total assets. 25 Total assets. 3 Accrued payables Accrued payables) 0 26 4,44		17 T	otal exp	enses. Ad	ARTHURS TO THIROT	194 Hbl					
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure repended on prior year's return). 20 Other changes in net assets or fund balances (attach explanation). 21 Net assets or fund balances at end of year. Combine lines 18 through 20 Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.) (A) Beginning of year (B) End of year (B) End of year (Cash, savings, and investments	4	18 E	xcess or	(déficit) fo	or the year (Sub	tract line 17 from line 9)	· · · · · · · · · · · · · · · · · · ·				
20 Other changes in net assets or fund balances (attach explanation)	ë	19 N	let assets	or fund t	elences at bedi	dning of year (from line		uet agree with	· · -		10,0
20 Other changes in net assets or fund balances (attach explanation) . ▶ 20 17,2 21 Net assets or fund balances at end of year. Combine lines 18 through 20 . ▶ 21 161,6 Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.) (A) Beginning of year (B) End of year (B) End of year (Cash, savings, and investments	SSI		nd-of-vea	r figure	and and on brior	year's return)	-7, Oolalliii (71)) (iiii	ust agree with	-		100.7
Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.	2	20 0	Other char	nos in no	at accord on phon	thalanca (attach avala			· · -		
Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.	윈	21 1	Jat accete	or fund b	st assets of full	of uses Combined to a	auon)		·. ⊦		
(See the instructions for Part II.) (A) Beginning of year (B) End of year 125,278 22 155,4 23 Land and buildings 23 24 Other assets (describe ► See Attached Statement) 3,423 24 10,5 25 Total assets . 128,701 25 166,0 26 Total liabilities (describe ► Accrued payables) 0 26 4,4			Polones	Chasta	M Tatal assets	or year. Combine lines	8 inrough 20		<u></u> ►	21_	161,6
22 Cash, savings, and investments 125,278 22 155,4 23 Land and buildings 23 24 Other assets (describe ► See Attached Statement) 3,423 24 10,5 25 Total assets . . 128,701 25 166,0 26 Total liabilities (describe ► Accrued payables) 0 26 4,4	ГС	inalia e	Salance .				\$1,250,000 or mo				
23 23 24 Other assets (describe ► See Attached Statement) 3,423 24 10,5 25 Total assets	~~	•	•								(B) End of year
23 Land and buildings . 23 24 Other assets (describe ► See Attached Statement) 3,423 24 10,5 25 Total assets . 128,701 25 166,0 26 Total liabilities (describe ► Accrued payables) 0 26 4,4									125,27	8 22	155,4
24 Other assets (describe See Attached Statement) 3,423 24 10,5 25 Total assets <										23	
25 Total assets	24)		3.42		10.5
26 Total liabilities (describe Accrued payables) 0 26 4,4	25										
O7 Alek enceke en front helen vir (1) O7 A en la (1)	26	Total li	abilities (describe	Accrued pa	ivables	١				
<u>-:</u>							with line 21\				
For Privacy Act and December 1 Polymer Act Notice and the second Line 11.							vith line 21)		128,70	1 27	<u> </u>

and Paperwork Reduction Act Notice, see the separate instructions. (HTA)

, , , , , , , , , , , , , , , , , , , ,					
Part III Statement of Program Service Acc	omplishments (See the	instructions for Pa	art III.)]	Expenses
What is the organization's primary exempt purpose?	EDUCATION & SERVICES	TO PROTECT OP	<u>EN LANDS</u>		ired for section
Describe what was achieved in carrying out the organize	zation's exempt purposes. In	n a clear and concis	e)(3) and 501(c)(4)
manner, describe the services provided, the number of					zations and section a)(1) trusts, optional
each program title.	percent demands, and our			for oth	
28 EDUCATION AND OUTREACH - CONFERENCES	S. WORKSHOPS, INFORM	ATION, BEST PRA	CTICES.		··
ORGANIZATIONAL DEVELOPMENT & CAPACIT				 	
BULLETINS, EXHIBITS, NEWSLETTERS, OTHER		· • • • • • • • • • • • • • • • • • • •	*********		
	nt includes foreign grants, cl			28a	79,921
29 PUBLIC POLICY - PARTNERSHIPS; JOINT WOF					
COMMITTEES; LEGISLATIVE UPDATES, TESTIN	MONY AND LOBBYING; ST	AKEHOLDER INPL	<u>!T;</u>		
MEETINGS AND TECHNICAL ASSISTANCE.					
(Grants \$ 0) If this amoun	nt includes foreign grants, c	heck here	. ▶ □	29a	107,253
ALL OTHER PROOPAN CERVICES					107,200
(Cranto ©	et includes foreign grants of				
	nt includes foreign grants, c			30a	25,890
31 Other program services (attach schedule)					
(Grants \$ 0) If this amoun	nt includes foreign grants, c	heck here	. ▶ 🔲	31a	i c
32 Total program service expenses. (add lines 28a	through 31a)		•	32	213,064
Part IV List of Officers, Directors, Trustees, a					
List of Officers, Directors, Trustees, a	(b) Title and average	(c) Compensation	(d) Contribut		(e) Expense
(a) Name and address	hours per week	(if not paid,	employee bene		account and
	devoted to position	enter -0)	deferred comp	ensation	other allowances
K-Lynn Cameron	Title Director				
1245 E. Colfax Ave., Ste. 203 Denver CO 80218	Hr/WK 1.00	0		0	i c
Scott Campbell	Title Director				
1245 E. Colfax Ave., Ste. 203 Denver CO 80218	Hr/WK 1.00	ol o		0	
Martha Cochran	Title Director	′ †	 		
				_	_
1245 E. Colfax Ave., Ste. 203 Denver CO 80218	Hr/WK 1.00	0	ļ	0	
Buck Frederickson	Title Director				
1245 E. Colfax Ave., Ste. 203 Denver CO 80218	Hr/WK 1.00	00		. 0	
Deborah Froeb	Title Director				
1245 E. Colfax Ave., Ste. 203 Denver CO 80218	Hr/WK 1.00	o l		0	(
Ken Mirr	Title Board President				
1245 E. Colfax Ave., Ste. 203 Denver CO 80218	Hr/WK 1.00			ام	_
		0	 	0	
David Nıchols	Title Director				
1245 E. Colfax Ave., Ste. 203 Denver CO 80218	Hr/WK 1.00	0		0	
Dan Pike	Title Board Vice Pres.				
1245 E. Colfax Ave., Ste. 203 Denver CO 80218	Hr/WK 1.00	ol o		o	
Brian Ross	Title Director				
1245 E. Colfax Ave., Ste. 203 Denver CO 80218	Hr/WK 1.00		ŀ	۸	,
Kevin Shea	Title Board Treasurer	<u>'</u>		0	
1245 E. Colfax Ave., Ste. 203 Denver CO 80218	Hr/WK 1.00	0		0	C
Greg Vallın	Title Board Secretary				
1245 E. Colfax Ave., Ste. 203 Denver CO 80218	Hr/WK 1.00	ol o		o	C
Janis Whisman	Title Director				
1245 E. Colfax Ave., Ste. 203 Denver CO 80218	Hr/WK 1.00			^	٠, ٠
John Swartout		<u> </u>		0	<u> </u>
	Title Exec. Director				
1245 E. Colfax Ave., Ste. 203 Denver CO 80218	Hr/WK 40.00	60,416		0	<u>_</u>
	Title				
	Hr/WK .00	o o		ol	ı c
	Title				
	Hr/WK .00			ام	
		0		9	
	Title			- 1	
	Hr/WK .00	0		0	0
	Title			ļ	
	Hr/WK .00	0		0	0
	Title				<u>_</u>
	Hr/WK .00	ا		0	0
		<u> </u>	ı	· ·	U

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Form **990-EZ** (2009)

Part \	Section 501(c)(3) organizations and							
	501(c)(3) organizations and section 4		empt charitab	ole trusts must a	nswer questions	46–49	<i>I</i> b	
	and complete the tables for lines 50 a						·	N
	Did the organization engage in direct or indirect						Yes	No
(candidates for public office? If "Yes," complete	Schedule C, Part I				46		_X
	Did the organization engage in lobbying activitie					47 48	X	х
	s the organization a school as described in sec Did the organization make any transfers to an e					49a		x
	f "Yes," was the related organization a section					49b		 ^
50	Complete this table for the organization's five hemployees) who each received more than \$100	ighest compensate	ed employees	(other than officer	s, directors, truste	es and		
	employees) who each received more than \$100	(b) Title and		(c) Compensation	(d) Contributions to) Expens	<u></u>
	(a) Name and address of each employee paid more than \$100,000	hours per devoted to	week	(e) companion	employee benefit plans & deferred compensation	àc	count a	nd
Name	None Şır	Title			_			
City	ST ZIP	Hr/WK	.00	0	0			0
<u>Name</u>		Title						
City	ST ZIP	Hr/WK	.00	0	0			0
Name .		Title	.00	اه	0			^
City	ST ZIP	Hr/WK	.00	U	0			0
Name	Str ST ZIP	Title Hr/WK	.00	o	0			0
City Name	Str Str	Title		<u>~</u>				
City	ST Z(P	Hr/WK	.00	o	0			0
	Total number of other employees paid over \$10		<u></u>	0				
	(a) Name and address of each independent contra	ctor paid more than \$100	,000	(b) Typ	e of service	(c) Co	mpensat	lion
Name	None Str							
City	ST	ZIP						
Name	Str							
City	ST	ZIP				_		
Name					İ			
City	ST.	ZIP						
Name City	Ştr ST	ZIP						
Name	Str							
City	ST	ZIP						
d	Total number of other independent contractors	each receiving ove	er \$100,000 .	· · · · •	<u> </u>			0
Sign Here	Under penalties of perjury, I declare that I have exam and belief, it struct correct, and complete Declaration Signature of officer	on of preparer (other than	g accompanying so n officer) is based of	on all information of whi	is, and to the best of my ch preparer has any kno 7-9-10 Date	knowled wledge	ge	
	Type or print name and title		· • · · · · · · · · · · · · · · · · · ·					
Paid	Preparer's signature		Date	Check if self-	Preparer's identif	ying numi	Der (See in	istructions)
Prepa	rer's Symis pama (or yours	mr_	1 7/7/2	2010 employed				
Use O	nly if self-employed), Hull & Associates,		0.00401		EIN ▶ 84-12			
May	address, and ZIP + 4 780 Simms St., Step IRS discuss this return with the property sho				Phone no ► (303)			1
ividy li	ne IRS discuss this return with the preparer sho	mii anove: See IN	structions			X Ye	≥ S	No

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Open to Public Inspection

Name	of the	organization							Employe	r Identificat	ion numb	3 £	
			N OF LAND TE						L		355809		
Par				arity Status (All org						nstructio	ns.		
	orgar			ation because it is: (Forches, or association o						i\			
1	H	•		on 170(b)(1)(A)(ii). (At			eu III sec	11011 170(, -	17.			
2	님			nospital service organi.		-	caction	170/6\/1\	/A\/iii\				
3	님	•	•							3/L\/4\/A\	/!!!\ .		
4		hospital's na	me, city, and sta								· ·		
5	Ш			r the benefit of a collect (Complete Part II.)	ge or un i v	ersity owr	ned or op	erated by	a govern	mental u	nit descr	ibed	
6		A federal, sta	ate, or local gov	ernment or governme	ntal unit d	lescribed	ın sectio ı	170(b)(1)(A)(v).				
7	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)											
8	\Box	A community	trust described	in section 170(b)(1)	(A)(vi) . (C	omplete F	Part II.)						
9	同	An organizat	ion that normall	y receives: (1) more th	nan 33 1/3	3 % of its	support fi	om contr	butions,	members	hip fees	, and g	ross
				ed to its exempt function and income and unrelated the come and unre									S
		• •	•	after June 30, 1975.				•		,			
10		An organizat	tion organized a	nd operated exclusive	ly to test	for public	safety. S	ee sectio	n 509(a)	(4).			
11				nd operated exclusive									
				blicly supported organ								section	on
			_	at describes the type of \mathbf{r}				•	te lines 1	`	*		
		a Type		Type II c		• III–Fund	-	•			Type III-		
е	Ш			y that the organization on managers and othe									
		509(a)(1) or	section 509(a)(2	2).					_			1 Secu	on
f		organization	, check this box							e III supp · · · ·	orting		
g		Since Augus following per		the organization acce	pted any	gift or con	tribution	from any	of the				
				or indirectly controls,								Yes	No
				verning body of the su							11g(i)		
				person described in (i y of a person describe							11g(ii)		
h				ation about the suppor							11g(iii)		
(i)	Name	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	organization	(v) Did y	ou notify		ts the		Amount	of
		anization		(described on lines 1–9 above or IRC section		sted in your document?		nization in of your		tion in col ized in the	1	support	
				(see instructions))			sup	port?	U	S?			
					Yes	No	Yes	No	Yes	No	 		
													0
			<u> </u>			ļ				ļ	<u> </u>		0
					ĺ		!		ļ				0
										 	 		
					 	ļ			<u> </u>		 		0
					1								0
Tota	 I												

Schedule A (Form 990 or 990-EZ) 2009 COLORADO COALITION OF LAND TRUSTS Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Secti	on A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	88,233	158,654	193,667	225,742	196,989	863,285
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	88,233	158,654	193,667	225,742	196,989	863,285
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the						
_	amount shown on line 11, column (f)		, ,	The second of the			47,492
<u>6</u>	Public support. Subtract line 5 from line 4.			, ,	1	3. 1	815,793
	ion B. Total Support ndar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 4	88,233					
7 8	Gross income from interest, dividends,	00,233	156,054	193,667	225,742	196,989	863,285
	payments received on securities loans, rents, royalties and income from similar sources	50	963	3,249	1,606	1,672	7,540
9	Net income from unrelated business activities, whether or not the business is regularly carried on			-,		,,,,,,,	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	2,410					2,410
11	Total support. Add lines 7 through 10.		•				873,235
12	Gross receipts from related activities, etc. (s	ee instructions	s)			12	181,067
13	First five years. If the Form 990 is for the or organization, check this box and stop here	rganization's fi	rst, second, thi	ird, fourth, or fil	th tax year as a	a section 501(c)(3) ▶ □
	ion C. Computation of Public Support						
14	Public support percentage for 2009 (line 6, c					14	93.42%
15	Public support percentage from 2008 Sched					15	0.00%
	33 1/3% support test-2009. If the organiza and stop here. The organization qualifies as	s a publicly su _l	pported organi	zation			▶ 🛚
b	box and stop here . The organization qualifies as a publicly supported organization						
17a b							
18	Private foundation. If the organization did not ch					-	

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

	(Complete only if you checked tr	le pox on line	9 UI Fait I.)				
Sec	ion A. Public Support	- ()	<u>"\\ 0000</u>	(-) 0007	(4) 0000	(-) 0000	(A) Takal
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					···	0
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the						
3	organization's tax-exempt purpose						0
3	unrelated trade or business under section 513					<u> </u>	<u>.</u> 0
4	Tax revenues levied for the organization's benefit and either paid to or expended on						
_	its behalf						0
5	furnished by a governmental unit to the						
	organization without charge						C
6	Total. Add lines 1 through 5	0	0	0	0	0	C
7a	Amounts included on lines 1, 2, and 3						_
	received from disqualified persons					_	0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						l c
С	Add lines 7a and 7b	0	0	0	0	0	C
8	Public support (Subtract line 7c from		, '		54 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, ,	
	line 6.)	,	£ ,, 7_	· ·	y 9 "	* =	<u> </u>
	tion B. Total Support						· · · · · · · · · · · · · · · · · · ·
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	o	o	l o	o	l o	ا ا
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses			i			_
_	acquired after June 30, 1975 Add lines 10a and 10b	0	0				
11	Net income from unrelated business	- 9	<u> </u>	0	0	0	<u> </u>
• •	activities not included in line 10b,						
	whether or not the business is regularly						
	carried on						ا ر
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part IV.)		ļ				
13	Total support. (Add lines 9, 10c, 11,					_	_
14	and 12.)	0	-			0	
14	organization check the box and ston boro	yanızanon s ilis	st, second, iniit	u, iourin, or illi	n tax year as a	section 501(c	(3)
800	organization, check this box and stop here.		• • • •		· · · · · ·	<u> </u>	· · · <u>•</u> _
	tion C. Computation of Public Support						
15	Public support percentage for 2009 (line 8, c					15	0.00%
16	Public support percentage from 2008 Schedu	ule A, Part III, II	ine 15	· · · · · · ·	<u> </u>	16	0.00%
	tion D. Computation of Investment Inc						
17	Investment income percentage for 2009 (line					17	0.00%
18	Investment income percentage from 2008 Sc					18	0.00%
19a		uion did not chi	eck ine box on	iine 14, and lir	ie io is more ti	nan 33 1/3% a	na line 17 is
h	not more than 33 1/3%, check this box and s 33 1/3% support tests-2008. If the organization d	iop nere. The	organization qu	uaillies as a pl	ibliciy supporte	a organization	▶ [_
IJ	line 18 is not more than 33 1/3%, check this box at						<u>, </u>
	Private foundation. If the organization did no					_	▶ ⊨
20							

Schedule A (Form	990 or 990-EZ) 2009	COLORADO	COALITION O	F LAND TRUSTS		84-1355809	Page 4
Part IV	Supplemental	Information.	Complete this	part to provide the e	xplanations required	by Part II, line	10;
	Part II, line 17a	or 17b; and F	art III, line 12.	Provide any other ac	ditional information.	See instruction	ıs.
							*
					• • • • • • • • • • • • • • • • • • • •		
				•••••			
		· • • • • • • • • • • • • • • • • • • •			• • • • • • • • • • • • • • • • • • • •		
	•••••						

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organization is described below.

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

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

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

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

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

	•	s," to Form 990, Part IV, line 5 (Proxy anizations. Complete Part III.	Tax), then		·
Naı	me of organization ORADO COALITION OF L			Employe	r Identification number 84-1355809
	t I-A Complete if t	he organization is exempt und	er section 501/	c) or is a section 527	
1 2 3	Provide a description of to Political expenditures .	he organization's direct and indirect	political campaig	n activities in Part IV.	
Par		he organization is exempt und			
1	Enter the amount of any	excise tax incurred by the organizati	ion under section	4955 ▶ \$	(
2	Enter the amount of any	excise tax incurred by organization i	managers under s	section 4955 🕨 \$	
3	▼	ed a section 4955 tax, did it file Forn	•		
4a					Yes No
b	If "Yes," describe in Part				
		he organization is exempt und			l(c)(3).
1		expended by the filing organization			
2		filing organization's funds contribute unction activities	_	ations	***************************************
3	Total exempt function ex line 17b	penditures. Add lines 1 and 2. Enter	here and on For	m 1120-POI	
4	Did the filing organization	n file Form 1120-POL for this year?			Yes No
5	payments were made. Fe amount of political contri	ses and employer identification num or each organization listed, enter the butions received that were promptly and or a political action committee (F	amount paid from and directly deliver	m the filing organization's ered to a separate politica	funds. Also enter the al organization, such as
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
			·	0	(
	· · · · · · · · · · · · · · · · · · ·			о	
				0	
				0	
				0	

Ρ	Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).								
A	· · · · · · · · · · · · · · · · · · ·	belongs to an affiliated group.							
	Check ▶ if the filing organization checked box A and "limited control" provisions apply.								
		bying Expenditures leans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals					
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)									
b	Total lobbying expenditures to influence	16,250	0						
С	, ,	a and 1b)	16,250	0					
d		· · · · · · · · · · · · · · · · · · ·	271,134	0					
е	Total exempt purpose expenditures (add	287,384	0						
f Lobbying nontaxable amount. Enter the amount from the following table in both									
	columns.	·	57,477	0					
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	-						
	Not over \$500,000	20% of the amount on line 1e.	1. 3 1.	,					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.							
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.							
i	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.							
	Over \$17,000,000	\$1,000,000.							
g		i% of line 1f)	14,369	0					
h		ess, enter -0	0	0					
i		ss, enter -0	0	0					
j	If there is an amount other than zero on section 4911 tax for this year?	either line 1h or line 1i, did the organization file Fo	rm 4720 reporting	Yes No					
	4-\ (Some organizations that n	Year Averaging Period Under Section 501(h) hade a section 501(h) election do not have to co	mplete all of the fiv						

	Lo	bbying Expenditure	s During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying nontaxable amount	30,752	44,038	53,981	57,477	186,248
	Lobbying ceiling amount (150% of line 2a, column(e))		t	- '	. /	279,372
c	Total lobbying expenditures	9,206	10,000	20,822	16,250	56,278
d	Grassroots nontaxable amount	7,688	11,010	13,495	14,369	46,562
е 	Grassroots ceiling amount (150% of line 2d, column (e))					69,843
f	Grassroots lobbying expenditures				0	0

Schedule C (Form 990 or 990-EZ) 2009

	t II-B Complete if the organization is exempt under section 501(c)(3) and has N	OT file	ed Fo	rm 5768
	(election under section 501(h)).	(4	a)	(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	* , ;	· .	
a b	Volunteers?			
c d e f	Media advertisements?			
g h i	Other activities? If "Yes," describe in Part IV			
þ	Total. Add lines 1c through 11		, , , , , , , , , , , , , , , , , , ,	0
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912. If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? till-A Complete if the organization is exempt under section 501(c)(4), section 5	01(c)(5), or	section
	501(c)(6).			
1 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members?	01(c)(5), or	section
1	Dues, assessments and similar amounts from members		1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	•	, .	
b	Current year		2a 2b	
3 4	Total	es .	2c 3	0
-7	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4	
5	Taxable amount of lobbying and political expenditures (see instructions)		5	0
Par				
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line, complete this part for any additional information.	Ť		II-B, line 1i.
		• • • • • • •		

COL	DRADO COALITION OF LAND TRUSTS		84-1355809
Part IV	orm 990 or 990-EZ) 2009 Supplemental Information (continue)	<u></u>	Page 4
, are iv	Cuppioniental internation (communication)		
·			
			•
		• • • • • • • • • • • • • • • • • • • •	
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		•••••	
	••••••	•••••	•

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

es <u>20</u>

Employer identification number

OMB No 1545-0047
2009

Department of the Treasury Internal Revenue Service Name of the organization Complete If the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

Open To Public Inspection

COL	DRADO COALITION OF LAND TRUS	TS				84-135	
Par	Fundraising Activities. Co				red "Yes" to Form	990, Part IV, line	e 17.
1	Indicate whether the organization rai				ng activities. Check	all that apply.	
а	X Mail solicitations				of non-government		
b	Internet and email solicitations		f 🔲 S	olicitation (of government gran	ts	
c	Phone solicitations		g 🗓 S	pecial fund	draising events		
d	In-person solicitations						
2a	Did the organization have a written or key employees listed in Form 990	or oral agreeme , Part VII) or er	ent with any	individual nection witl	(including officers, h professional fund	directors, trustees raising services?	Yes X No
b	If "Yes," list the ten highest paid indito be compensated at least \$5,000 b			sers) pursi	uant to agreements	under which the fu	undraiser is
	(i) Name of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have r control of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		~~~	Yes	No			
					0	0	0
					0	0	0
	<u></u>				0	0	0
			<u>.</u>		0	0	0
	<u></u>		<u> </u>		0	0	0
					0	0	0
					0	0	0
_					0	0	0
					0	0	0
				<u> </u>	0	0	0
Tota	II			▶	o	o	0
3 CO	List all states in which the organizat registration or licensing.						
	•						
					••••••		

Schedule G (Form 990 or 990-EZ) 2009

Pa	rt <u>II</u>			nization answered "Yes a. List events with gros			r repoi	ted
		more than \$15,000	(a) Event #1 ocial fundraising ever	(b) Event #2	(c) Other events NONE	(d) Tot (add col	al events (a) throu	
Revenue	1	Gross receipts	(event type) 66,006	(event type)	(total number)			6,006
Rev	3	Less: Charitable contributions Gross income (line 1	0	0	0			0
		minus line 2)	66,006 0	0	0		6	6,006 0
	<b>4</b> 5	Cash prizes	11,041	0		<del></del>	1	1,041
ses	6	Rent/facility costs	6,750		0			6,750
Direct Expenses	7	Food and beverages .	0		0			0
Irect E	8	Entertainment	0	0	0	<u>-</u> -		0
u	9	Other direct expenses .	1,679	o	0			1,679
	11		mbine line 3, column (d),	and line 10	<u> </u>	(	4	9,470) 6,536
Pa	rt III	Gaming. Complete than \$15,000 on Fo	_	wered "Yes" to Form 99	90, Part IV, line 19, or r	eported m	ore	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total (col (a) three		
	1	Gross revenue						0
ses	2	Cash prizes						0
rect Expenses	3	Noncash prizes					_	0
	4	Rent/facility costs						0
<u> </u>	5	Other direct expenses .	Yes %	Yes %	□ <b>v</b> •• ~			0
	6	Volunteer labor	No No	Yes % No	Yes %			
	7	Direct expense summary.	Add lines 2 through 5 in	column (d)				0)
	8	Net gaming income sumn	nary. Combine line 1, colu	ımn d, and line 7	<u>.</u> <u>.</u>			0
9 ;	a Is	inter the state(s) in which the state organization licensed to "No," explain:	o operate gaming activitie	es in each of these states		. 9a	Yes	No
		Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  If "Yes," explain:						
11	 D							
12	ls	s the organization a grantor, ormed to administer charital	beneficiary or trustee of	a trust or a member of a p	partnership or other entity			

## COLORADO COALITION OF LAND TRUSTS

Schedule G (Form 990 or 990-EZ) 2009 Page 3 No Indicate the percentage of gaming activity operated in: Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name ▶ 15a Does the organization have a contract with a third party from whom the organization receives gaming 15a b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ _____. c If "Yes," enter name and address of the third party: Name ▶ ..... Address ▶ Gaming manager information: Name ▶ Gaming manager compensation ▶ \$ 0 Description of services provided Director/officer **Employee** Independent contractor Mandatory distributions: 17 a Is the organization required under state law to make charitable distributions from the gaming proceeds to 17a

b Enter the amount of distributions required under state law to be distributed to other exempt organizations

or spent in the organization's own exempt activities during the tax year > \$

Schedule G (Form 990 or 990-EZ) 2009

Form **3115**(Rev December 2009)

# **Application for Change in Accounting Method**

OMB No 1545-0152

	Revenue Service							
		nt corporation if a consolidate	ed group) (see instructions)		Identification number (see in	nstructions)		
					84-1355809  Principal business activity cod	a number (can unatrustion		
0010	DADO COALIT	ION OF LAND TRUST	re		rincipal business activity cod	e number (see msuuction	9)	
		suite no If a P O box, see t			Tax year of change begins (M	WDD/YYYY) 01	/01/2009	
		E., Room No. 203			Tax year of change ends (MM			
	town, state, and ZIP of			,	Name of contact person (see	instructions)		
DENV	/ER		CO 80218	<u>,                                     </u>	JOHN SWARTOUT	011		
Name o	of applicant(s) (it diffe	rent than filer) and identificat	tion number(s) (see instructions)	·)		Contact person's tele (303) 271-1577	pnone numi	ber
16 41		ombor of a consolidat	ad group, shock this hav	<u> </u>			<b>N</b>	1
			ed group, check this box					<u> </u>
	-	-	ration of Representative,					1
				• • • •				
		dicate the type of app			Check the appropriate			
∐ lr	ndividual		Cooperative (Sec.	1381)	accounting method cl (see instructions)	nange being reque	sieu.	
	Corporation		Partnership		(see instructions)			
	Controlled foreign	n corporation	S corporation		Depreciation or A	mortization		
(8	Sec. 957)		Insurance co. (Sec.	:. 816(a))		s and/or Financial A	ctivities	
	0/50 corporation	n (Sec. 904(d)(2)(E))	Insurance co. (Sec.	:. 831)	of Financial Instit	utions		
	Qualified personation (Sec.		Other (specify) ▶_		X Other (specify) ▶	cash to accrual		
	•	tion. Enter Code sect	ion > 501/c)/3)					
			sted change in method of a	accounting,	the taxpayer must provide	all information that is re	elevant to	the
taxpay	yer or to the taxpa	yer's requested change i	in method of accounting. Th	ns includes				
			at is not specifically request					
			pplemental statements re	equestea ti	rougnout this form.	<u> </u>		
Par 1		ation For Automatic	c accounting method chang	na number f	or the requested automatic	change Enter	Yes	No
•			g method change number, e			-	163	110
	,		gnated automatic accountin		_ ,	•	ŀ	
	both a description of the change and citation of the IRS guidance providing the automatic change. See instructions.						1 1	
	► (a) Change	No. <u>122</u> (	(b) Other 🔲 Descriptio	on <b>▶</b>				
2	Do any of the s	scope limitations descr	ribed in section 4.02 of F	Rev. Proc.	2008-52 cause automat	ic consent to be	⁻	
	-	*	sted change? If "Yes," at					X
Note.			t IV, and also Schedules			able).		
Pari	t II Informa	ation For All Reque	ests				Yes	No
3			page in the trade or busin		-	•		
			ar of change (see instruc					LX,
4 -			o make the change unde				l	1 1
4 a			r former consolidated gro eral income tax return(s)				ļ	1
	If "No," go to lir		erai income tax retum(s)	, under ex	ammadon (see mstructio	ліs)?		X
ь	_		licant is requesting to cha	ange an is	ssue (with respect to eith	er the applicant or		1
_			group in which the applica					
			laced in suspense (see i				<u> </u>	X
			Signature (se	ee instruc	tions)			
the app	plication contains all t	the relevant facts relating to t	d this application, including according to the application, and it is true, con	companying so errect, and co	chedules and statements, and to mplete Declaration of preparer	o the best of my knowledg (other than applicant) is ba	e and belief ased on all	•
information of which preparer has any knowledge								
A	Preparer (other than filer/applicant)							
+7	Signature and date  Signature of individual preparing the application and date							
V	John K.	100Lma 1	C 0'C		-	paring the application an	o date	
	Name and title (print or type)  Name of individual preparing the application (print or type)							
	NE	ame and title (print or type)	•		Name of individual preparin	g the application (print o	or type)	
				Hull & A	ssociates, P.C.			
					Name of firm prep	paring the application		

	•		
Form 3	115 (Rev. 12-2009) COLORADO COALITION OF LAND TRUSTS 84-1355809		Page 3
Pari		Yes	No
12 a	If the applicant is either (i) <b>not</b> changing its overall method of accounting, or (ii) is changing its overall method of accounting and also changing to a special method of accounting for one or more items, attach a detailed and complete description for each of the following:  The item(s) being changed.	1 3 3	- · ·
b	The applicant's present method for the item(s) being changed.	3	100 4
C	The applicant's proposed method for the item(s) being changed.	1, 20	۶
d	The applicant's present overall method of accounting (cash, accrual, or hybrid).		- 1
13	Attach a detailed and complete description of the applicant's trade(s) or business(es), and the principal business activity code for each. If the applicant has more than one trade or business as defined in Regulations section 1.446-1(d), describe: whether each trade or business is accounted for separately; the goods and services provided by each trade or business and any other types of activities engaged in that generate gross income; the overall method of accounting for each trade or business; and which trade or business is requesting to change its accounting method as part of this application or a separate application.	70	
14	Will the proposed method of accounting be used for the applicant's books and records and financial		ı,
15 a	statements? For insurance companies, see the instructions	X	
, o u	reorganization, merger, or liquidation) during the proposed tax year of change determined without regard to		
	any potential closing of the year under section 381(b)(1)?		Х
b	If "Yes," for the items of income and expense that are the subject of this application, attach a statement	,	· -
	identifying the methods of accounting used by the parties to the section 381(a) transaction immediately	'	
	before the date of distribution or transfer and the method(s) that would be required by section 381(c)(4) or	,	,
	(c)(5) absent consent to the change(s) requested in this application.	<u> </u>	
16	Does the applicant request a conference with the IRS National Office if the IRS proposes an adverse response?	ļ	X
17	If the applicant is changing to either the overall cash method, an overall accrual method, or is changing its method of accounting for any property subject to section 263A, any long-term contract subject to section 460, or inventories subject to section 474, enter the applicant's gross receipts for the 3 tax years preceding the tax year of change.		
	1st preceding year ended mo 12 yr 2008 2nd preceding year ended mo 12 yr 2007 2007 2007 2006	12	
Par	\$ 276,978 \$ 249,996 \$ 206,728 III Information For Advance Consent Request	<del></del>	<u> </u>
التكييا 18	Is the applicant's requested change described in any revenue procedure, revenue ruling, notice, regulation, or	Yes	No
	other published guidance as an automatic change request?	<u> </u>	-
19	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent procedures.  Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists.		. •
20 21 22	Attach a copy of all documents related to the proposed change (see instructions).  Attach a statement of the applicant's reasons for the proposed change.  If the applicant is a member of a consolidated group for the year of change, do all other members of the		
	consolidated group use the proposed method of accounting for the item being changed?	<u></u>	<u></u>
	If "No," attach an explanation.  Enter the amount of <b>user fee</b> attached to this application (see instructions).   \$	:	-
Par	Section 481(a) Adjustment	Yes	No
24	Does the applicable revenue procedure, revenue ruling, notice, regulation, or other published guidance require the applicant to		
0-	implement the requested change in method of accounting on a cut-off basis rather than a section 481(a) adjustment? If "Yes," do not complete lines 25, 26, and 27 below.		Х
25	Enter the section 481(a) adjustment. Indicate whether the adjustment is an increase (+) or a decrease (-) in income.   \$		,

methodology used to determine the section 481(a) adjustment. If it is based on more than one component, show the computation for each component. If more than one applicant is applying for the method change on the same application, attach a list of the name, identification number, principal business activity code (see

instructions), and the amount of the section 481(a) adjustment attributable to each applicant.

Part IV Section 481(a) Adjustment (continued)  26	Form 31	15 (Rev 12-2009)	COLORADO COALITION OF LAND TRUSTS	84-1355809		Page 4
28 If the section 481(a) adjustment is an increase to income of less than \$25,000, does the applicant elect to take the entire amount of the adjustment attributable to transactions between members of an affiliated group, a consolidated group, a controlled group, or other related parties?  17 Is any part of the section 481(a) adjustment attributable to transactions between members of an affiliated group, a controlled group, or other related parties?  18 If "Yes," attach an explanation.  28 Schedule A—Change in Overall Method of Accounting (if Schedule A applies, Part I below must be completed.)  28 Inter the following amounts as of the close of the tax year preceding the year of change. If none, state "None." Also, attach a statement providing a breakdown of the amounts entered on lines 1a through 1g.  2 Income accrued but not received (such as accounts receivable).  3 Income received or reported before it was earned (such as advanced payments). Attach a description of the income and the legal basis for the proposed method.  4 Prepald expenses previously deducted.  5 Supplies on hand previously deducted and/or not previously reported.  6 Inventory on hand previously deducted and/or not previously reported.  7 Inventory on hand previously deducted and/or not previously reported.  8 Interest of the section 481(a) adjustment.  8 None.  9 Other amounts (spocity), Attach a description of the item and the legal basis for its inclusion in the calculation of the section 481(a) adjustment.  9 None.  9 Other amounts (spocity), Attach a description of the item and the legal basis for its inclusion in the calculation of the section 481(a) adjustment.  9 None.  9 Other amounts (spocity), Attach a description of the item and the legal basis for its inclusion in the calculation of the received of the control of the interest of the section 481(a) adjustment amount on Part IV, inc.  9 Other amoun					Yes	
entire amount of the adjustment into account in the year of change?  Is any part of the section 441(a) adjustment attributable to transactions betwean members of an affiliated group, a controlled group, or other related parties?  If "Yes," attach an explanation.  Schedule A—Change in Overall Method of Accounting (If Schedule A applies, Part I below must be completed.)  Part I Change in Overall Method (see instructions)  Enter the following amounts as of the close of the tax year preceding the year of change. If none, state "None." Also, attach a statement providing a breakdown of the amounts entered on lines 1a through 1g.  a income accrued but not received (such as accounts receivable).  b income received or reported before it was earned (such as advanced payments). Attach a description of the income and the legal basis for the proposed method.  c Expenses accrued but not paid (such as accounts payable).  b income received payments are also as a secount payable of the income and the legal basis for the proposed method.  c Expenses accrued but not paid (such as accounts payable).  b income and the legal basis for the proposed method.  c Expenses accrued but not paid (such as accounts reparable).  I where the paid of the paid (such as accounts payable).  I where the paid (such as accounts reparable).  I where the paid (such as accounts reparable) and the legal basis for its inclusion in the calculation of the section 481(a) adjustment (combine lines 1a-1g.) Indicate whether the adjustment is an increase (+) or decrease (-) in income. Also enter the net amount of this section 481(a) adjustment amount on Pan IV, in a 25.  2 is the applicant also requesting the recurring item exception under section 461(th)(3)?  3 Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet, if appl		If the section 481(a)	adjustment is an increase to income of less than \$25,000	, does the applicant elect to take the	·	
any part of the section 481(a) adjustment attributable to transactions between members of an affiliated group, a controlled group, or other related parties?		entire amount of the	adjustment into account in the year of change?		X	
consolidated group, a controlled group, or other related parties?  If "Yes," attach an exchangation.  Schedule A—Change in Overall Method (see instructions)  Enter the following amounts as of the loss of the tax year preceding the year of change. If none, state "None." Also, attach a statement providing a breakdown of the amounts entered on lines 1a through 1g.  Income accrued but not received (such as accounts receivable).  Income accrued but not received (such as accounts receivable).  Income accrued but not received (such as accounts receivable).  Income accrued but not paid (such as accounts receivable).  Income accrued but not paid (such as accounts receivable).  Income accrued but not paid (such as accounts receivable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but not paid (such as accounts payable).  Income accrued but payable payab	27	is any part of the se	en members of an affiliated group, a			
Schedule A—Change in Overall Method of Accounting (If Schedule A applies, Part I below must be completed.)		consolidated group,	a controlled group, or other related parties?			Х
Part I Change in Overall Method (see instructions)  1 Enter the following amounts as of the close of the lax year preceding the year of change. If none, state "None." Also, attach a statement providing a breakdown of the amounts entered on lines 1a through 1g.  a Income accrued but not received (such as accounts receivable).  5 None  b Income received or reported before it was earned (such as advanced payments). Attach a description of the Income and the legal basis for the proposed method.  6 Expenses accrued but not pard (such as accounts payable).  7 Propale dexpenses previously deducted on the previously reported.  8 Supplies on hand previously deducted and/or not previously reported.  9 Other amounts (specify). Attach a description of the tierm and the legal basis for its inclusion in the calculation of the section 481(a) adjustment.  9 None None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None  None			_		<u> </u>	
Enter the following amounts as of the close of the tax year preceding the year of change. If none, state "None." Also, attach a statement providing a breakdown of the amounts entered on lines 1a through 1g.  Income accrued but not received (such as accounts receivable).  Income accrued but not received (such as accounts receivable).  Income accrued but not received (such as accounts receivable).  Income accrued but not pad (such as accounts payable).  None  Prepaid expenses previously deducted and/or not previously reported.  None  Prepaid expenses previously deducted and/or not previously reported.  None  Inventory on hand previously deducted and/or not previously reported.  None  Inventory on hand previously deducted and/or not previously reported.  None	Sche	dule A—Change i	n Overall Method of Accounting (If Schedule A app	plies, Part I below must be complet	ed.)	
a Income accrued but not received (such as accounts receivable).  a Income received or reported before it was earned (such as advanced payments). Attach a description of the income and the legal basis for the proposed method.  b Income received or reported before it was earned (such as advanced payments). Attach a description of the income and the legal basis for the proposed method.  c Expenses accrued but not paid (such as accounts payable).  d Propatid expenses previously deducted and/or not previously reported.  None  Supplies on hand previously deducted and/or not previously reported.  Inventory on hand previously deducted and/or not previously reported Complete Schedule D, Part II.  Or decrease (-) in income. Also adjustment.  None  N	Pari	Change in C	Overall Method (see instructions)			
a Income accrued but not received (such as accounts receivable).  Shore  Income received or reported before it was earned (such as advanced payments). Attach a description of the income and the legal basis for the proposed method.  Expenses accrued but not paid (such as accounts payable).  None  None  None  None  None  None  None  None  Prepald expenses previously deducted and/or not previously reported.  None  Inventory on hand previously deducted and/or not previously reported.  Inventory on hand previously deducted and/or not previously reported.  Inventory on hand previously deducted and/or not previously reported.  Inventory on hand previously deducted and/or not previously reported.  None  Other amounts (specify). Attach a description of the liter and the legal basis for its inclusion in the calculation of the section 481(a) adjustment.  None  N	1				, attach a	1
a Income accrued but not received (such as accounts receivable).  b Income received or reported before it was earned (such as advanced payments). Attach a description of the income and the legal basis for the proposed method.  c Expenses accrued but not paid (such as accounts payable).  d Prepaid expenses previously deducted.  8 Supplies on hand previously deducted and/or not previously reported.  None  9 Other amounts (specify). Attach a description of the Item and the legal basis for its inclusion in the calculation of the section 481(a) adjustment. ►  Net section 481(a) adjustment (Combine lines 1 a-1g.) Indicate whether the adjustment is an increase (+) or decrease (-) in income. Also enter the net amount of this section 481(a) adjustment amount on Part IV, line 25.  2 Is the applicant also requesting the recurring item exception under section 481(a) adjustment mount on Part IV, line 25.  3 Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet, if applicable, as of the close of the tax year preceding the year of change. Also attach a statement specifying the accounting method used when preparing the balance sheet. If books of account are not kept, attach a copy of the business schedules submitted with the Federal income tax return or other return (e.g., tax-exempt organization returns) for that penod. If the amounts in Part I, lines 1 a through 1g, do not agree with those shown on both the profit and loss statement and the balance sheet, attach a statement explaining the differences.  Part III Change to the Cash Method For Advance Consent Request (see instructions)  Applicants requesting a change to the cash method must attach the following information:  1 A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials and supplies used in carrying out the business.  2 An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regulations. Sched		statement providing	a breakdown of the amounts entered on lines 1a through	1g		
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d Prepaid expenses previously deducted and/or not previously reported  Supplies on hand previously deducted and/or not previously reported  None  None  None  None  None  None  None  None  None  Other amounts (specify). Attach a description of the item and the legal basis for its inclusion in the calculation of the section 481(a) adjustment.  Port decrease (-) in income. Also enter the net amount of this section 481(a) adjustment is an increase (-) or decrease (-) in income. Also enter the net amount of this section 481(a) adjustment amount on Part IV, line 25.  2 is the applicant also requesting the recurring item exception under section 481(h)(3)?  Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet, if applicable, as of the close of the tax year preceding the year of change. Also attach a statement specifying the accounting method used when preparing the balance sheet. If books of account are not kept, attach a copy of the business schedules submitted with the Federal income tax return or other return (e.g., tax-exempt organization returns) for that period. If the amounts in Part I, lines to through 1g, do not agree with those shown on both the profit and loss statement and the balance sheet, attach a statement explaining the differences.  Part II Change to the Cash Method For Advance Consent Request (see instructions)  A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials and supplies used in carrying out the business.  A nexplanation as to whether the applicant is required to use the accrual method under any section of the Code or regulations.  Schedule B—Change to the Deferral Method for Advance Payments (see instructions)  1 If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 of Rev. Proc. 2004-34.  b If the applicant is fliing under the advance payments meet the definition in section 4.01 of Rev. Proc. 2004-34.  c If the applic						
Supplies on hand previously deducted and/or not previously reported  f Inventory on hand previously deducted and/or not previously reported Complete Schedule D, Part II  g Other amounts (specify). Attach a description of the item and the legal basis for its inclusion in the acticulation of the section 481(a) adjustment. ►  Net section 481(a) adjustment (Combine lines 1a-1g,) Indicate whether the adjustment is an increase (+) or decrease (-) in income. Also enter the net amount of this section 481(a) adjustment amount on Part IV, line 25.  2 Is the applicant also requesting the recurring item exception under section 461(h)(3)?  3 Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet, if applicable, as of the close of the tax year preceding the year of change. Also attach a statement specifying the accounting method used when preparing the balance sheet. If books of account are not kept, attach a copy of the business schedules submitted with the Federal income tax return or other return (e.g., tax-exempt organization returns) for that period. If the amounts in Part I, lines 1a through 1g, do not agree with those shown on both the profit and loss statement and the balance sheet, attach a statement explaining the differences.  Part II Change to the Cash Method For Advance Consent Request (see instructions)  Applicants requesting a change to the cash method must attach the following information:  1 A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials and supplies used in carrying out the business.  2 An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regulations.  Schedule B—Change to the Deferral Method for Advance Payments (see instructions)  If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 of Rev. Proc. 2004-34, 2004-1 C.B. 991, attach the following information:  a A stat	_					
f Inventory on hand previously deducted and/or not previously reported. Complete Schedule D, Part II						
g Other amounts (specify). Attach a description of the item and the legal basis for its inclusion in the calculation of the section 481(a) adjustment. ▶  Net section 481(a) adjustment. ▶  or decrease (-) in income. Also enter the net amount of this section 481(a) adjustment is an increase (+) or decrease (-) in income. Also enter the net amount of this section 481(a) adjustment amount on Part IV, line 25.  1 is the applicant also requesting the recurring item exception under section 461(h)(3)?	_					
calculation of the section 481(a) adjustment.    Net section 481(a) adjustment (Combine lines 1a–1g.) Indicate whether the adjustment is an increase (+) or decrease (-) in income. Also enter the net amount of this section 481(a) adjustment amount on Part IV, line 25.    1 is the applicant also requesting the recurring item exception under section 461(h)(3)?    2 is the applicant also requesting the recurring item exception under section 461(h)(3)?    3 Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet, if applicable, as of the close of the tax year preceding the year of change. Also attach a statement specifying the accounting method used when preparing the balance sheet. If books of account are not kept, attach a copy of the business schedules submitted with the Federal income tax return or other return (e.g., tax-exempt organization returns) for that period. If the amounts in Part I, lines 1 a through 1g, do not agree with those shown on both the profit and loss statement and the balance sheet, attach a statement explaining the differences.  Part III Change to the Cash Method For Advance Consent Request (see instructions)  Applicants requesting a change to the cash method must attach the following information:  1 A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials and supplies used in carrying out the business.  2 An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regulations.  Schedule B—Change to the Deferral Method for Advance Payments (see instructions)  1 If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 of Rev. Proc. 2004-34, 2004-1 C. B. 991, attach the following information:  a A statement explaining how the advance payments meet the definition in section 4.01 of Rev. Proc. 2004-34.  If the applicant is filling under the automatic change procedures of Rev.					16	
h Net section 481(a) adjustment (Combine lines 1a-1g.) Indicate whether the adjustment is an increase (+) or decrease (-) in income. Also enter the net amount of this section 481(a) adjustment amount on Part IV, line 25	g			or its inclusion in the		
or decrease (-) in income. Also enter the net amount of this section 481(a) adjustment amount on Part IV, line 25	<b>.</b>			adjustment is an increase (+)		
Is the applicant also requesting the recurring item exception under section 461(h)(3)?	11					
Is the applicant also requesting the recurring item exception under section 461(h)(3)?		• •		1.		0
Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet, if applicable, as of the close of the tax year preceding the year of change. Also attach a statement specifying the accounting method used when preparing the balance sheet. If books of account are not kept, attach a copy of the business schedules submitted with the Federal income tax return or other return (e.g., tax-exempt organization returns) for that period. If the amounts in Part I, lines 1 a through 1g, do not agree with those shown on both the profit and loss statement and the balance sheet, attach a statement explaining the differences.  Part II Change to the Cash Method For Advance Consent Request (see instructions)  Applicants requesting a change to the cash method must attach the following information:  1 A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials and supplies used in carrying out the business.  2 An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regulations.  Schedule B—Change to the Deferral Method for Advance Payments (see instructions)  1 If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 of Rev. Proc. 2004-34, 2004-1 C.B. 991, attach the following information:  a A statement explaining how the advance payments meet the definition in section 4.01 of Rev. Proc. 2004-34.  b If the applicant is filing under the automatic change procedures of Rev. Proc. 97-27, the information required by section 8.02(3)(a)-(c) of Rev. Proc. 2004-34.  c If the applicant is filing under the advance consent provisions of Rev. Proc. 97-27, the information required by section 8.03(2)(a)-(f) of Rev. Proc. 2004-34.  If the applicant is requesting to change to the deferral method for advance payments described in Regulations section 1.451-5(a)(1).  b A statement explaining how the advance payments meet the definition in R		IIIO 20				
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Federal income tax return or other return (e.g., tax-exempt organization returns) for that period. If the amounts in Part I, lines 1 ta through 1g, do not agree with those shown on both the profit and loss statement and the balance sheet, attach a statement explaining the differences.  Part II Change to the Cash Method For Advance Consent Request (see instructions)  Applicants requesting a change to the cash method must attach the following information:  1 A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials and supplies used in carrying out the business.  2 An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regulations.  Schedule B—Change to the Deferral Method for Advance Payments (see instructions)  1 If the applicant is requesting to change to the Deferral Method for advance payments described in section 5.02 of Rev. Proc. 2004-34, 2004-1 C.B. 991, attach the following information:  a A statement explaining how the advance payments meet the definition in section 4.01 of Rev. Proc. 2004-34.  b If the applicant is filing under the automatic change procedures of Rev. Proc. 2008-52, the information required by section 8.02(3)(a)-(c) of Rev. Proc. 2004-34.  c If the applicant is filing under the advance consent provisions of Rev. Proc. 97-27, the information required by section 8.03(2)(a)-(f) of Rev. Proc. 2004-34.  2 If the applicant is requesting to change to the deferral method for advance payments described in Regulations section 1.451-5(b)(1)(ii), attach the following  a A statement explaining what portions of the advance payments, if any, are attributable to services, whether such services are integral to the provisions of goods or items, and whether any portions of the advance payments that are attributable to non-integral services are less than five percent of the total contract prices. See Regulations section 1.451-5(a)(2)(i) and (3).  c A statement explaining what portions		the close of the tax	year preceding the year of change. Also attach a statement	nt specifying the accounting method us	sed wher	1
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# Schedule C—Changes Within the LIFO Inventory Method (see instructions)

#### Part I General LIFO Information

Complete this section if the requested change involves changes within the LIFO inventory method. Also, attach a copy of all **Forms 970**, Application To Use LIFO inventory Method, filed to adopt or expand the use of the LIFO method.

- 1 Attach a description of the applicant's present and proposed LIFO methods and submethods for each of the following items:
  - a Valuing inventory (e.g., unit method or dollar-value method).
  - **b** Pooling (e.g., by line or type or class of goods, natural business unit, multiple pools, raw material content, simplified dollar-value method, inventory price index computation (IPIC) pools, vehicle-pool method, etc.).
  - c Pricing dollar-value pools (e.g., double-extension, index, link-chain, link-chain index, IPIC method, etc.).
  - **d** Determining the current-year cost of goods in the ending inventory (i.e., most recent acquisitions, earliest acquisitions during the current year, average cost of current-year acquisitions, or other permitted method).
- 2 If any present method or submethod used by the applicant is not the same as indicated on Form(s) 970 filed to adopt or expand the use of the method, attach an explanation.
- 3 If the proposed change is not requested for all the LIFO inventory, attach a statement specifying the inventory to which the change is and is not applicable.
- 4 If the proposed change is not requested for all of the LIFO pools, attach a statement specifying the LIFO pool(s) to which the change is applicable.
- Attach a statement addressing whether the applicant values any of its LIFO inventory on a method other than cost. For example, if the applicant values some of its LIFO inventory at retail and the remainder at cost, identify which inventory items are valued under each method.
- 6 If changing to the IPIC method, attach a completed Form 970.

## Part II Change in Pooling Inventories

- 1 If the applicant is proposing to change its pooling method or the number of pools, attach a description of the contents of, and state the base year for, each dollar-value pool the applicant presently uses and proposes to use.
- If the applicant is proposing to use natural business unit (NBU) pools or requesting to change the number of NBU pools, attach the following information (to the extent not already provided) in sufficient detail to show that each proposed NBU was determined under Regulations section 1.472-8(b)(1) and (2):
  - a A description of the types of products produced by the applicant. If possible, attach a brochure.
  - **b** A description of the types of processes and raw materials used to produce the products in each proposed pool.
  - c If all of the products to be included in the proposed NBU pool(s) are not produced at one facility, state the reasons for the separate facilities, the location of each facility, and a description of the products each facility produces.
  - **d** A description of the natural business divisions adopted by the taxpayer. State whether separate cost centers are maintained and if separate profit and loss statements are prepared.
  - e A statement addressing whether the applicant has inventories of items purchased and held for resale that are not further processed by the applicant, including whether such items, if any, will be included in any proposed NBU pool.
  - f A statement addressing whether all items including raw materials, goods-in-process, and finished goods entering into the entire inventory investment for each proposed NBU pool are presently valued under the LIFO method. Describe any items that are not presently valued under the LIFO method that are to be included in each proposed pool.
  - g A statement addressing whether, within the proposed NBU pool(s), there are items both sold to unrelated parties and transferred to a different unit of the applicant to be used as a component part of another product prior to final processing.
- 3 If the applicant is engaged in manufacturing and is proposing to use the multiple pooling method or raw material content pools, attach information to show that each proposed pool will consist of a group of items that are substantially similar. See Regulations section 1.472-8(b)(3)
- If the applicant is engaged in the wholesaling or retailing of goods and is requesting to change the number of pools used, attach information to show that each of the proposed pools is based on customary business classifications of the applicant's trade or business. See Regulations section 1.472-8(c).

Proc. 2008-52 (or its successor).

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Schedule D—Change in the Treatment of Long-Term Contracts Under Section 460, Inventories, or Other									
	tion 263A Assets (see instructions)								
	Change in Reporting Income From Long-Term Contracts (Also co	omplete Part III	on pages 7 a	nd 8.)					
1	To the extent not already provided, attach a description of the applicant's present and proposed methods for reporting income								
	and expenses from long-term contracts. Also, attach a representative actual contract (without any deletion) for the requested								
	change. If the applicant is a construction contractor, attach a detailed description of	of its construction	activities.						
	Are the applicant's contracts long-term contracts as defined in section 460(f)(1) (see	ee instructions)?	[	Yes No					
2 a		If "Yes," do all the contracts qualify for the exception under section 460(e) (see instructions)?							
_	If line 2b is "No," attach an explanation.								
b	If line 2b is "No, attach an explanation.  If line 2b is "Yes," is the applicant requesting to use the percentage-of-completion method using cost-to-								
C	cost under Regulations section 1.460-4(b)?								
_		e-of-completion	L method	1 163 [ ] 110					
C	If line 2c is "No," is the applicant requesting to use the exempt-contract percentage			Yes No					
	under Regulations section 1.460-4(c)(2)?			Tes [] NO					
	If line 2d is "Yes," attach an explanation of what cost comparison the applicant will	use to determin	e a						
	contract's completion factor.	laa ayalaadiiy							
_	If line 2d is "No," attach an explanation of what method the applicant is using and t			Yes No					
3 a				Tes [] NO					
t	If "Yes," attach an explanation of the applicant's present and proposed method(s)	or accounting to	riong-						
	term manufacturing contracts.  Attach a description of the applicant's manufacturing activities, including any requi	rad installation a	f manufaaturad	acada					
	, and the second se		i manulaciuleu	goods.					
4	To determine a contract's completion factor using the percentage-of-completion m			Yes No					
_	<ul> <li>Will the applicant use the cost-to-cost method in Regulations section 1.460-4(b)?</li> <li>If line 4a is "No," is the applicant electing the simplified cost-to-cost method (see s</li> </ul>	ootion 460/b\/3\	· · · · L	J res No					
	If line 4a is "No," is the applicant electing the simplified cost-to-cost method (see s Regulations section 1.460-5(c))?			Yes No					
_	Attach a statement indicating whether any of the applicant's contracts are either co			Tes [ NO					
5		ost-plus long-ten	11						
	contracts or Federal long-term contracts.  Int II Change in Valuing Inventories Including Cost Allocation Change	S /Also somplet	o Dort III on no						
_	Attach a description of the inventory goods being changed.	A (Also complete	e Fait III OII pa	ges / and o.)					
1	Attach a description of the inventory goods being changed.  Attach a description of the inventory goods (if any) NOT being changed.								
2				Yes No					
3 8	· · · · · · · · · · · · · · · · · · ·			I res [ NO					
	b Is the applicant's present inventory valuation method in compliance with section 26	3	•	lvaa [] Na					
	If "No," attach a detailed explanation		· · · L_	Yes No					
		Inventory Be	ing Changed	Inventory Not					
4 :	a Check the appropriate boxes below.		<del>-</del>	Being Changed					
	Identification methods:	Present method	Proposed method	Present method					
	Specific identification	ļ							
	FIFO	<u></u>		<u> </u>					
	LIFO	ļ							
	Other (attach explanation)								
	Valuation methods:								
	Cost			<u></u>					
	Cost or market, whichever is lower								
	Detail and			1					
	Retail cost	<u> </u>		<u> </u>					
	Retail, lower of cost or market								
	Retail, lower of cost or market								
	Retail, lower of cost or market								
5	Retail, lower of cost or market	I, attach the folio	wing informatio	n (see					
	Retail, lower of cost or market	I, attach the folic	wing informatio	n (see					
	Retail, lower of cost or market		Ū	•					
5	Retail, lower of cost or market	ner the applicant	is changing to	•					
5	Retail, lower of cost or market	ner the applicant osing a different	is changing to method.	the method					

Part III Method of Cost Allocation (Complete this part if the requested change involves either property subject to section 263A or long-term contracts as described in section 460 (see instructions)).

### Section A—Allocation and Capitalization Methods

Attach a description (including sample computations) of the present and proposed method(s) the applicant uses to capitalize direct and indirect costs properly allocable to real or tangible personal property produced and property acquired for resale, or to allocate and, where appropriate, capitalize direct and indirect costs properly allocable to long-term contracts. Include a description of the method(s) used for allocating indirect costs to intermediate cost objectives such as departments or activities prior to the allocation of such costs to long-term contracts, real or tangible personal property produced, and property acquired for resale. The description must include the following:

- 1 The method of allocating direct and indirect costs (i.e., specific identification, burden rate, standard cost, or other reasonable allocation method).
- 2 The method of allocating mixed service costs (i.e., direct reallocation, step-allocation, simplified service cost using the labor-based allocation ratio, simplified service cost using the production cost allocation ratio, or other reasonable allocation method).
- 3 The method of capitalizing additional section 263A costs (i.e., simplified production with or without the historic absorption ratio election, simplified resale with or without the historic absorption ratio election including permissible variations, the U.S. ratio, or other reasonable allocation method).

### Section B—Direct and Indirect Costs Required To Be Allocated

Check the appropriate boxes showing the costs that are or will be fully included, to the extent required, in the cost of real or tangible personal property produced or property acquired for resale under section 263A or allocated to long-term contracts under section 460. Mark "N/A" in a box if those costs are not incurred by the applicant. If a box is not checked, it is assumed that those costs are not fully included to the extent required. Attach an explanation for boxes that are not checked.

		Present method	Proposea methoa
1	Direct material		
2	Direct labor		
3	Indirect labor		
4	Officers' compensation (not including selling activities)		
5	Pension and other related costs		
6	Employee benefits		
7	Indirect materials and supplies		
8	Purchasing costs		
9	Handling, processing, assembly, and repackaging costs		
10	Offsite storage and warehousing costs		
11	Depreciation, amortization, and cost recovery allowance for equipment and facilities		
	placed in service and not temporarily idle		
12	Depletion		
13	Rent		
14	Taxes other than state, local, and foreign income taxes		
15	Insurance		
16	Utilities		
17	Maintenance and repairs that relate to a production, resale, or long-term contract activity .		
18	Engineering and design costs (not including section 174 research and experimental		
	expenses)		
19	Rework labor, scrap, and spoilage		
20	Tools and equipment		- "
21	Quality control and inspection		
22	Bidding expenses incurred in the solicitation of contracts awarded to the applicant		
23	Licensing and franchise costs		
24	Capitalizable service costs (including mixed service costs)		
25	Administrative costs (not including any costs of selling or any return on capital)		
26	Research and experimental expenses attributable to long-term contracts		
27	Interest		
28	Other costs (Attach a list of these costs.)		

Method of Cost Allocation (see instructions) (continued)

	Method of Cost Allocation (see instructions) (continued)	i	
	on C—Other Costs Not Required To Be Allocated (Complete Section C only if the applicant	is requesting to	cnange its
metho 1	Marketing, selling, advertising, and distribution expenses	Present method	Proposed method
2	Research and experimental expenses not included in Section B, line 26	<u> </u>	-
3	Bidding expenses not included in Section B, line 22		<del> </del>
4	General and administrative costs not included in Section B		
5	Income taxes		
6	Cost of strikes		
7	Warranty and product liability costs	····	
8	Section 179 costs		1
9	On-site storage		
10	Depreciation, amortization, and cost recovery allowance not included in Section B,		
	line 11		
11_	Other costs (Attach a list of these costs.)		
	edule E—Change in Depreciation or Amortization (see instructions)		
	cants requesting approval to change their method of accounting for depreciation or amortization cants <i>must</i> provide this information for each item or class of property for which a change is rec		section.
Note	See the List of Automatic Accounting Method Changes in the instructions for information	regarding autor	matic changes
	r sections 56, 167, 168, 197, 1400l, 1400L, or former section 168. <b>Do not</b> file Form 3115 with		
	election revocations (see instructions).	respect to conta	in rate elections
			ı., m.,
1	Is depreciation for the property determined under Regulations section 1.167(a)-11 (CLADR)? If "Yes," the only changes permitted are under Regulations section 1 167(a)-11(c)(1)(iii).	· · · · L	] Yes [] No
2	Is any of the depreciation or amortization required to be capitalized under any Code section (e 263A)?		Yes No
	If "Yes," enter the applicable section ▶		] ies [
3	Has a depreciation, amortization, or expense election been made for the property (e.g., the elections 168(f)(1), 179, or 179C)?	ection under	Yes No
4 -			
4 a	To the extent not already provided, attach a statement describing the property being changed	Include in the	description the
	type of property, the year the property was placed in service, and the property's use in the app	olicant's trade o	r business or
	income-producing activity.	_	, ()
b	If the property is residential rental property, did the applicant live in the property before renting	ıt?	Yes No
C	Is the property public utility property?	[	Yes No
5	To the extent not already provided in the applicant's description of its present method, attach a	etatement evr	laining how the
	property is treated under the applicant's present method (e.g., depreciable property, inventory Regulations section 1.162-3, nondepreciable section 263(a) property, property deductible as a	property, suppl	lies under
6			•
6	If the property is not currently treated as depreciable or amortizable property, attach a statement proposed change to depreciate or amortize the property.	ent of the facts	supporting the
7	If the property is currently treated and/or will be treated as depreciable or amortizable property	, provide the fo	llowing
	information for both the present (if applicable) and proposed methods:		<b>3</b>
а	The Code section under which the property is or will be depreciated or amortized (e.g., section	168(a))	
b	The applicable asset class from Rev Proc. 87-56, 1987-2 C.B. 674, for each asset depreciate	d under section	168 (MACRS)
	or under section 1400L; the applicable asset class from Rev. Proc. 83-35, 1983-1 C.B. 745, fo	r oach accot de	propieted
	under former section 168 (ACRS); an explanation why no asset class is identified for each ass	et formbish or	eprecialeu
	has not been identified by the applicant.	et for which an	asset class
_	· · · · · · · · · · · · · · · · · · ·		
C	The facts to support the asset class for the proposed method.		
d	The depreciation or amortization method of the property, including the applicable Code section	n (e.g., 200% d	eclining
	balance method under section 168(b)(1)).		
е	The useful life, recovery period, or amortization period of the property.		
f	The applicable convention of the property.		
g	A statement of whether or not the additional first-year special depreciation allowance (for example 1997)	nple, as provide	ed by section
	168(k), 168(l), 168(m), 168(n), 1400L(b), or 1400N(d)) was or will be claimed for the property.	If not, also prov	ıde an
	explanation as to why no special depreciation allowance was or will be claimed.		