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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545 0047

Department of the Treasury

inter	nai Reveni	ie Service		- The organiz			by of this return to s	atisty state repor				Landina in teleforer	<u> </u>
	For the	2009 calen	dar year,	or tax year b	eginning 7	/01	, 20	09, and endi	ng 6	/30	, 20	10	
В	Check if a	pplicable	Olasas vas	C						D Employ	er Identification	n Number	
	Addre	ess change	Please use IRS label	BEND ATS			TION BUREA	U		71-0	0874661		
	Name	e change	or print or type.		SIT BEND				E Telephone number				
	Initia	l return	See specific		HARRIMAN	STREE		541	-382-804	48			
	Term	ination	instruc- tions.	BEND, OF	(9//01				,	_			
	Amended return									G Gross re	eceipts \$	910,12	7.
	Appli	cation pending	F Name	and address of pri	ncipal officer				H(a) Is th	is a group return		Yes X	
	_ ··		SAME	AS C ABOV	/E					all affiliates incl		Tyes T	No
$\overline{}$	Tax-e	xempt statu)◀ (insert no	5	4947(a)(1) or	527	If 'N	o,' attach a list	(see instruction	is)	
J	Webs			TBEND.OR			10 70 //		H(c) Grou	up exemption nu	mber ►		
K			X Corpor		Association	Oth	er ►	L Year of Forma			tate of legal do	omicile OR	_
Pa	intal see	Summa		<u> </u>								· · · · · · · · · · · · · · · · · · ·	_
	1 B	riefly descril	e the or	ganization's n	nission or mo:	st signifi	cant activities.	DEVELOP	TOURI	SM INDU	STRY IN		_
ø	_	END, ORE											
anc	_												_
Ē	_	 _		 _				- -	-				
Š	2 C			-			operations or di	sposed of m	ore than	25% of its	_ 1		_
∞	3 N			nbers of the g							3		
98	4 N			_		overning	body (Part VI, I	ine ID)			5		$\frac{7}{12}$
en \	6 T		-	oyees (Part V teers (estimat		Δ)					6		
Q &	7a T						lumn (C), line 1:	2 .			7a	32,66	2 .
>	b N			s taxable inco							7 b		0.
GENNACS Le Activities & Governance										Prior Year		Current Year	
Ш	8 C	ontributions	and gran	nts (Part VIII,	line 1h)					688,0		856,19	6.
enve	9 P			nue (Part VIII,						269,0		53,35	
Ţ \$				art VIII, colun		, 4, and	7d).			1,0	14.	57	4.
Reve	11 0	ther revenu	e (Part V	III, column (A), lines 5, 6d,	8c, 9c,	10c, and 11e)		L				
. .	12 T	otal revenue	– add I	ines 8 through	n 11 (must eq	ual Part	VIII, column (A)	, line 12)	_	958,0	45.	910,12	<u>7.</u>
A	13 G	rants and si	ımılar am	iounts paid (P	art IX, colum	n (A), lın	es 1-3)						
၁	14 B	enefits paid	to or for	members (Pa	art IX, column	ı (A), line	e 4)						
204g	15 S	alaries, othe	er compe	nsation, empl	loyee benefits	(Part IX	(, column (A), lır	nes 5-10)	ļ	277,7	01.	348,78	<u>1.</u>
) USe	16a P	rofessional	fundraisii	ng fees (Part	IX, column (A), line 1	1e)						
<i>b</i> . Expenses	Б Т	otal fundrais	sing expe	enses (Part IX	, column (D),	line 25)	•						76.
Ü	17 0	ther expens	es (Part	IX column (A	(A) lines 11a-1	16 1113	241)- 0 - 1	-5	-	761,8	35.	575,39	1.
	18 T	otal expens	es Add I	ines 13-17 (m	ust equal Par	tIIX. col	Bint (a) Line 25	₹ D }		1,039,5		924,17	
	19 R	evenue less	expense	s Subtract III	ne 18 from lin	e 42				-81,4		-14,04	
8 \$						8	FEB 02 20		Red	ginning of Y	ear	End of Year	_
Assets or Balances	20 T	otal assets	(Part X I	ine 16)			120 02 20	II RS-O		185,7		157,61	4.
8 8	1	otal liabilitie			•	-	0051	<u>.</u> ! <u>-</u> !		55,4		41,35	
Net C	l		•	ances Subtra	act line 21 fro	$\int_{\text{line}} C$	IGDEN.	UI^-		130,3		116,25	
P	THE STATE OF				act line 21 no	عسلاللله!	<u> </u>		!		,02.1	110,23	<u> </u>
F-AC	<u> </u>				avamend the	return incl	uding accompanying	schedules and st	atements s	and to the best o	f my knowledge	e and belief it is	_
		true, correct, a	ind complete	Declaration of p	reparer (other than	n officer) is	uding accompanying based on all informa	tion of which prep	parer has a	ny knowledge	/ Iny Morneugh	s and belief, it is	
Sig	n	ىيە 🖊	//		1	_				1/2	9/11		
He	re	Signature	of officer	900						Date	7.		
		▶ 1	Drut.	12/1	NA								
		Type or pi	int name an	nd title						·			
					7	1		Date		Check if	Preparer	's identifying number	er
Pa	id	.	1				1.14	N 4 0	2044		X (see misu	ructions)	
Pr		Preparer's signature		my		~ 0Z	» 'J <i>A</i>	AIV I & .	ZUH	` _	<u> </u>	51001	
pa	rer's	Firm's name (or HAR	RIGAN PR	ICE FRON	K & CC). LLP	•			<u> </u>		_
Us		yours if self- employed),		SW COLO			TE 200			EIN ► 9	3-06202	:14	
Or	ıly	address, and ZIP + 4		ID, OR 97		. 204.	<u>-</u>					382-4791	
Ma	v the IR					hove? (s	ee instructions)				<u> </u>		0
_							ne separate inst	ructions.		TEEA01131	12/29/09	Form 990 (20	
~	- · · · ·					, (,			

	990 (2009) BEND VISITOR & CONVENTION BUREAU	71-0874661	Page 2
Par	Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission: DEVELOP_TOURISM_INDUSTRY_IN_BEND,OREGON		
			-
2	Did the organization undertake any significant program services during the year which were not listed on	the prior	
	Form 990 or 990-EZ?		X No
	If 'Yes,' describe these new services on Schedule O.		_
3	Did the organization cease conducting, or make significant changes in how it conducts, any program ser	vices? Yes	X No
	If 'Yes,' describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest program services and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants an expenses, and revenue, if any, for each program service reported.	s by expenses. Section 50 d allocations to others, the	1 (c) (3) e total
4 a	a (Code) (Expenses \$ including grants of \$)	(Revenue \$)
		 -	-
Δ H	(Code. (Code.) (Expenses \$ including grants of \$)	(Revenue \$)
7.	Toode	(1.01011d0 +	
4	c (Code:) (Expenses \$ including grants of \$)	(Revenue \$)
4	d Other program services. (Describe in Schedule O)		
•	(Expenses \$ including grants of \$) (Revenue	\$)
_4	e Total program service expenses ►		

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III.	5		<u>x</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part L	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		<u>x</u>
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Χ	4.4204
•	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			
•	PDId the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part IX</i>			
•	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			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		X
12 /	AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional Yes No			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I.	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		Χ_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X

contributions? If 'Yes,' complete Schedule M

Ran IV Checklist of Required Schedules (continued) Yes No 21 X 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III 22 Х 23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J 23 Х 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25..... Х 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 to defease 24c . . . d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d **25 a 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* 25 a **b** Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If 'Yes,' complete* 25b Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II Х 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If Yes, complete Schedule L, Part III. 27 X 28 Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions). a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV Χ 28a **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28b Х Schedule L, Part IV c 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, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I
 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II
 32 X
 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I
 33 X

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, III, IV, and V,

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2

37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI.

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 Note. All Form 990 filers are required to complete Schedule O....

Form 990 (2009)

Х

Х

X

Х

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38

12a

12b

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 1 a b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b n c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming Х (gambling) winnings to prize winners?. 1 c 2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 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 this return? 3 a Х b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? Δa **b** If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Х 5 b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5с 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? 6 a Х b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not 6b deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7 a provided to the payor? b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 70 d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7 e benefit contract? 7 f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7 g 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 93 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a 9 b **b** Did the organization make any distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter 10 a a Initiation fees and capital contributions included on Part VIII, line 12 b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b 11 Section 501(c)(12) organizations. Enter 11 a a Gross income from other members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11 b

BAA Form 990 (2009)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

71-0874661 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 Ma	nagement					
							Yes	No
1 a	Enter the	number of voting members of t	he governing body		1a	7		G 7
b	Enter the	number of voting members that	are independent		1 b	7		4.
2	Did any o	fficer, director, trustee, or key e rector, trustee or key employee	mployee have a family	relationship or a business re	elationship with any other	2		X
3	Did the o	ganization delegate control ove , directors or trustees, or key e	r management duties o mployees to a manager	ustomarily performed by or ument company or other personal	under the direct supervis on?	on 3		Х
4		ganization make any significani prior Form 990 was filed?	changes to its organiz	ational documents		4		X
5		ganization become aware durin	o the vear of a material	Ldiversion of the organizatio	nn's assets?	5		Х
6		organization have members or	• •	rational of the organization		6		X
7 a		organization have members, sto		rsons who may elect one or	more members of the	7a		Х
b	•	ecisions of the governing body	subject to approval by r	members, stockholders, or o	ther persons?	7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.								
		ning body?				8a	_	
b	Each cor	mittee with authority to act on I	pehalf of the governing	body?		8b		Х
	organiza	ny officer, director or trustee, or on's mailing address? If 'Yes,'	provide the names and	addresses in Schedule O		9		<u>x</u>
		Policies (This Section i	3 requests informa	tion about policies not .	required by the Inter	rnal		
Reve	nue Code)					V	No.
10 a	Does the	organization have local chapter	s, branches, or affiliates	s?		10a	Yes	No X
	If 'Yes.'	oes the organization have writte thes to ensure their operations	en policies and procedu	res governing the activities of	of such chapters, affiliate	s, 10b		
11		rganization provided a copy of			before filing the form?	11		X
		in Schedule O the process, if a			-	0		
12 a	Does the	organization have a written con	flict of interest policy?	If 'No,' go to line 13		12 a		X
t	Are office to conflic	rs, directors or trustees, and ke s?	y employees required t	o disclose annually interests	s that could give rise	12 b		
C	Does the	organization regularly and cons O how this is done	istently monitor and en	force compliance with the po	olicy? <i>If 'Yes,' describe ii</i>	120		
		organization have a written whi	•			13	ļ	X
		organization have a written doc				14	-000000000	X
		rocess for determining compens comparability data, and contem						
		nization's CEO, Executive Direc		t official SEE SCHEDULE	· O	15a		v
		cers of key employees of the or line 15a or 15b, describe the p	-	(Coo instructions)	•	15 b		X
16 a	Did the c	ganization invest in, contribute	,	•	r arrangement with a tax	able 16 a		X
ł	olf 'Yes.' I	ing the year? as the organization adopted a v	 vritten policy or procedi	ure requiring the organization	n to evaluate its participa	tion		Â
	status w	nture arrangements under appl h respect to such arrangements	icable federal tax law, a	and taken steps to safeguard	d the organization's exen	16b		
		Disclosures	000 ·	he filed a NOME				
		tates with which a copy of this f	·					
18	inspection	104 requires an organization to Indicate how you make these	available. Check all the	or 1024 if applicable), 990, a at apply. Upon request	and 990-T (501(c)(3)s on	y) avaılat	ole for	public
19	Describe	website Another's in Schedule O whether (and if s			ments, conflict of interes	t policy, a	nd fina	ancial
 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and statements available to the public. SEE SCHEDULE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization. 								
		GREENSTONE 377 SW C	· · · · · · · · · · · · · · · · · · ·					

BAA

Form 990 (2009)

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 organizations'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 employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did no		isate a	iny o			oπicer	, air	·	/ E\	
(A)	(B)	Pos	ition (C)	hat appl	lνλ	(D)	(E)	(F)
Name and Title	Average hours per week	or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
JODIE BARRAM										
DIRECTOR	5	X					L	0.	0.	0.
DAVE NISSEN					i			:		
DIRECTOR	5	X			<u> </u>			0.	0.	0.
NOELLE FREDLAND	_									
DIRECTOR	5	X		,				0.	0.	0.
JADE MAYER			1							
DIRECTOR	5	X			<u> </u>			0.	0.	0.
CHUCK ARNOLD		1								_
DIRECTOR	5	X	ļ	X			<u> </u>	0.	0.	0.
BEN PERLE	1									_
DIRECTOR	5	X	<u> </u>	X				0.	0.	0.
ERIC KING									_	
DIRECTOR	5	X	ļ				<u> </u>	0.	0.	0 <u>.</u>
DOUG LAPLACA	4			١.,	١			01 007		•
PRESIDENT & CEO	40	-	-	X	Х			91,287.	0.	0.
	<u> </u>								_	
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TEEA0107L 11/10/09

(A)	(B) Average	Poer	lon /	(check	•	hat a	ועומם	(D)	(E)	(F)
Name and Title	hours per week	_	Institutional trustee	Officer		Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
		İ								
								-		
1 b Total .		1		ما ساس		\l	>	91,287.	\$100,000 in report	table companyation
2 Total number of individuals (including but not limite from the organization ► 0			SIE	u au	ove) WI	10 16		#100,000 III Tepoi	
 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such the organization and related organizations greater individual 5 Did any person listed on line 1a receive or accrue. 	individua eportable than \$15	al e co 50,0	mpe	ensa If '\	ition /es′	and con	d oth nplet	ner compensation te Schedule J for	from such	Yes No.
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete So Section B. Independent Contractors	hedule	J for	suc	ch p	erso	on				. 5 X
Complete this table for your five highest compensation from the organization.	ted inde	pen	den	t co	ntra	ctor	s tha	at received more	than \$100,000 of	
(A) Name and business addre								Description	of Services	(C) Compensation
DVA ADVERTISING & PUBLIC RELATIONS 109 NW G	REENWOO	D,_	SUI	TE	101	BE	ND,	PUBLIC RELAT:	ONS/ADV	190,546
		<u>.</u>								
										<u> </u>
2 Total number of independent contractors (including		t lım	ıted	l to t	hos	e lis	ted	above) who recer	ved more than	. :

Pa	t VIII Statement of Revenue					
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns. b Membership dues c Fundraising events d Related organizations. e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contribns included in lns 1a-1f: \$	856,196.				
PROGRAM SERVICE REVENUE	h Total. Add lines 1a-1f 2a ADVERTISING REVENUE b PROGRAM SERVICE REVENUE c d e f All other program service revenue	Business Code	856,196. 32,662. 20,695.	20,695.	32,662.	
PROC	 g Total. Add lines 2a-2f 3 Investment income (including dividend other similar amounts) 4 Income from investment of tax-exempt 	►	53,357. 574.			574.
	6 a Gross Rents	(ii) Personal				
OTHER REVENUE	8a Gross income from fundraising events (not including \$\frac{5}{2}\$ of contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming act	a b events				
	10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inv Miscellaneous Revenue 11 a	a b				
	b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions .			20,695.	32,662.	574.

Partix 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).

Section Sect		not include amounts reported on lines	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
and organizations in the U.S. See Part IV, Inc. 2 the U.S. See Part IV, Inc. 23 Grahts and other assistance to individuals in the U.S. See Part IV, Inc. 23 Grahts and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, Inc. 15 and 16. 4 Benefits paid to or for members Compensation of current officers, directors, furcises, and key employees or the control of compensation of current officers, directors, furcises, and key employees or section 4968(n)(1) and persons described above, in section 4968(n)(1) and persons described assection 4968(n)(1) and persons described in section 4968(n)(1) and section 403(b) employer online to the control of the control			1 1 ta / 0 / p 0 / 10 0 0		general expenses	
2 Grants and other assistance to orderwides in the U.S. See Part IV, Ine 2 3 Grants and other assistance to governments, organizations, and individuals outside the organization of current offers, directors, trastees, and key employees 1 Compensation of current offers, directors, trastees, and key employees 1 Compensation of current offers, directors, trastees, and key employees 1 Compensation of current offers, directors, trastees, and key employees 1 Compensation of current offers, directors, trastees, and key employees 1 Compensation of current offers, directors, trastees, and key employees 1 Compensation of control of trastees, and key employees 1 Compensation of control of trastees, and key employees 1 Control of t	1	and organizations in the U.S. See Part IV,				
organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 seems of the property of the prop	2	Grants and other assistance to individuals in				
5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as detherd under section 4958(n)(1) and persons described in section 4958(n)(1) and person 4958(n)(1) and	3	organizations, and individuals outside the				
trustées, and key employees (4	Benefits paid to or for members .			3.00	
dissipatified persons (as defined under section 4958(c)(13) (d) persons described in section 4958(c)(3)(8)) 7 Other salaries and wages 8 Pension plan contributions (include section 401(k) and section 4	5		91,287.			
8 Penson plan contributions (include section 401(k) and section 403(t) employer contributions) 10 Other employee benefits 65, 227. 11 Fees for services (non-employees) a Management b Legal c Accounting d Lobbying e Prof fundraising svcs. See Part IV, In 17 finvestment management fees g Other 2 Advertising and promotion 13 Office expenses 4 Information technology 16 Royalties 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 273. 11 Payments to affiliates 2 Depreciation, depletion, and amortization 23 Insurance 24 Aff, 677. b YISTTOR CENTER EXPENSES 2 ALOSENSE SUBSCRIPTIONS b YISTTOR CENTER EXPENSES 2 Diott costs. Check here *	6	disqualified persons (as defined under section 4958(f)(1) and persons described in	0.			
## A01 (k) and section ## 402 (t) contributions 10 , 021 ## 50 (ther employee benefits 55 , 227 50 ## 50 (the expenses 55 , 277 50 ## 50 (the expenses 50 50 50 ## 50 (the e	7	Other salaries and wages .	156,479.			
9 Other employee benefits 65, 227. 10 Payroll taxes	8	401(k) and section 403(b) employer	10.021			
10 Payroll taxes 11 Fees for services (non-employees) a Management b Legal c Accounting d Lobbying e Prof fundraising svcs. See Part IV, in 17 f Investment management fees g Other 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses literatze expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed So of total expenses shown on line 25 a ADVERTISING & MARKETING b VISITOR CENTER EXPENSES 20, 1777. c DUES & SUBSCRIPTIONS 7, 6,606. e OTHER OPERATING EXPENSES 3,543. f All other expenses 5 Idla functional expenses. Add lines 1 through 244 26 Joint costs. Check here ►	9					
11 Fees for services (non-employees) a Management b Legal c Accounting d Lobbying e Prof fundraising svcs. See Part IV, In 17 f Investment management fees g Other 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses shown on line 25 below) a ADVERTISING & MARKETING b VISITOR CENTER EXPENSES 20,1777. c DUES & SUBSCRIPTIONS 9,610. d TELEPHONE & UTILITIES 6,606. e OTHER OPERATING EXPENSES 1,543. f All other expenses. Add line 1 through 24t 50 P98-2 Complete this line only if the organization and combined educational campaign and fundraising solicitation constitution of the proper of the proper of the propagation of the proper of the proper of the propagation of the proper of the propagation of column (8) pint cogsts from a combined educational campaign and fundraising solicitation						
a Management b Legal c Accounting d Lobbying e Prof fundraising svcs. See Part IV, In 17 f Investment management fees g Other 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses literrize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a ADVERTISTING & MARKETING b VISTING CENTER EXPENSES c DIES & SUBSCRIPTIONS d TELEPHONE & UTILITIES 6, 6, 60.6. c OTHER OPERATING EXPENSES 1, All other expenses 4, 870. 25 Total functional expenses. Add lines 1 through 244 26 Joint costs. Check here b following SOP 98-2. Complete its line only if the organization and undergroup and fundraising solicitation 2 combined on the column (B) pint costs from a combined educational campaign and fundraising solicitation			25,101.			
b Legal c Accounting d Lobbying e Prof fundraising svcs. See Part IV, In 17 f Investment management fees g Other 12 Advertising and promotion 13 Office expenses 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officals 19 Conferences, conventions, and meetings 10 Interest 27 Payments to affiliates 22 Depreciation, depletion, and amortization 13 insurance 24 Other expenses llemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a ADVERTISING & MARKETING b VISITOR CENTER EXPENSES c DUES & SUBSCRIPTIONS 9, 610. d TELEPHONE & UTILITIES 6, 6, 606. e OTHER OPERATING EXPENSES 1 All other expenses. Add lines 1 through 24t 5 Joint costs, Check here						
d Lobbying e Prof fundrasing svcs. See Part IV, In 17 f Investment management fees g Other 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses lternize expenses not covered above (Expenses grouped together and labeled miscellaneus may not exceed below) 2 ADVERTISING & MARKETING b VISITOR CENTER EXPENSES 2 O ITT. c DIES & SUBSCRIPTIONS 4 AFFORM 447,677. b VISITOR CENTER EXPENSES 5 O, 177. c DIES & SUBSCRIPTIONS 9,610. d TELEPHONE UTILITIES 6,606. e OTHER OPERATING EXPENSES 1,3,543. f All other expenses. Add lins 1 through 24f 25 Joint costs, Check here		•				
d Lobbying e Prof fundraising svcs. See Part IV, In 17 f Investment management fees g Other 12 Advertising and promotion 13 Office expenses 13, 852. 14 Information technology 15 Royalities 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 2 ADVERTISING & MARKETING 447, 677. b VISITOR CENTER EXPENSES 20,177. c DUES & SUBSCRIPTIONS 9,610. d TELEPHONE & UTILITIES 6,660. e OTHER OPERATING EXPENSES 3,543. f All other expenses. Add lines 1 through 24f 25 Joint costs. Check here * in following SOP 98.2. Complete this line only if the organization arombined educational campaign and fundraising solicitation		-	24 701			
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f Investment management fees g Other 2 Advertising and promotion 3 Office expenses 3,852. 14 Information technology 15 Royalties 6 Occupancy 41,403. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) a ADVERTISING & MARKETING 447, 677. b VISITOR CENTER EXPENSES 20,177. c DUES & SUBSCRIPTIONS 9,610. d TELEPHONE & UTILITIES 6,606. e OTHER OPERATING EXPENSES 3,543. f All other expenses 4,870. 25 Joint costs. Check here □ if following SOP 98-2. Complete this line only if the organization reported in column (B) pont costs from a combined educational campaign and fundrasing solicitation		, ,				
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12 Advertising and promotion 13 Office expenses 13,852. 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 2 ADVERTISING & MARKETING 3 ADVERTISING & MARKETING 447,677. b VISITOR CENTER EXPENSES 20,177. c DUES & SUBSCRIPTIONS 9,610. d TELEPHONE & UTILITIES 6,606. e OTHER OPERATING EXPENSES 3,543. f All other expenses. Add lines I through 24 50P 98-2. Complete this line only if the organization reported in column (B) point costs from a combined educational campaign and fundraising solicitation		•				
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21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 24 Other expenses litemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) a ADVERTISING & MARKETING 447,677. b VISITOR CENTER EXPENSES 20,177. c DUES & SUBSCRIPTIONS 9,610. d TELEPHONE & UTILITIES 6,606. e OTHER OPERATING EXPENSES 3,543. f All other expenses. Add lines 1 through 24f. 25 Joint costs. Check here ▶ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	19	Conferences, conventions, and meetings				
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23 Insurance 24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) a ADVERTISING & MARKETING 447,677. 447,677. 447,677. 5 VISITOR CENTER EXPENSES 20,177. 20,177. 20,177.	21	Payments to affiliates				
Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) a ADVERTISING & MARKETING b VISITOR CENTER EXPENSES c DUES & SUBSCRIPTIONS d TELEPHONE & UTILITIES e OTHER OPERATING EXPENSES f All other expenses. Add lines 1 through 24f 25 Joint costs. Check here I if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	22	Depreciation, depletion, and amortization	10,731.	4		
and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) a ADVERTISING & MARKETING 447,677. b VISITOR CENTER EXPENSES 20,177. c DUES & SUBSCRIPTIONS 9,610. d TELEPHONE & UTILITIES 6,606. e OTHER OPERATING EXPENSES 3,543. f All other expenses 4,870. 25 Total functional expenses. Add lines 1 through 24f. 924,172. 26 Joint costs. Check here ► if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation						
b VISITOR CENTER EXPENSES 20,177. c DUES & SUBSCRIPTIONS 9,610. d TELEPHONE & UTILITIES 6,606. e OTHER OPERATING EXPENSES 3,543. f All other expenses 4,870. 25 Total functional expenses. Add lines 1 through 24f. 924,172. 26 Joint costs. Check here ▶ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	24	5% of total expenses shown on line 25				
c DUES & SUBSCRIPTIONS 9, 610. d TELEPHONE & UTILITIES 6, 606. e OTHER OPERATING EXPENSES 3, 543. f All other expenses 4, 870. 25 Total functional expenses. Add lines 1 through 24f 924, 172. 26 Joint costs. Check here □ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	i	ADVERTISING & MARKETING	447,677.			
d TELEPHONE & UTILITIES 6, 606. e OTHER OPERATING EXPENSES 3, 543. f All other expenses. 25 Total functional expenses. Add lines 1 through 24f 924, 172. 26 Joint costs. Check here □ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	1	VISITOR CENTER EXPENSES	20,177.			
e OTHER OPERATING EXPENSES f All other expenses. 25 Total functional expenses. Add lines 1 through 24f. 26 Joint costs. Check here □ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	(DUES & SUBSCRIPTIONS	9,610.			
e OTHER OPERATING EXPENSES f All other expenses. 25 Total functional expenses. Add lines 1 through 24f. 26 Joint costs. Check here □ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	(TELEPHONE & UTILITIES	6,606.			
f All other expenses. 25 Total functional expenses. Add lines 1 through 24f. 26 Joint costs. Check here ► ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	(OTHER OPERATING EXPENSES	3,543.			
25 Total functional expenses. Add lines 1 through 24f. 924, 172. 26 Joint costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	1	All other expenses.				
26 Joint costs. Check here □ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation						
	26	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational				
	BAA				1	Form 990 (2009)

Form **990** (2009)

			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	84,870.	1	95,049.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	4,281.	4	4,258.
	5	Receivables from current and former officers, directors, trustees, key employe and highest compensated employees. Complete Part II of Schedule L	ees,	5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)	(1))		
		and persons described in section 4958(c)(3)(B) Complete Part II of Schedule	L .	6	
A S E T S	7	Notes and loans receivable, net		7	
Ē	8	Inventories for sale or use		8	
s	9	Prepaid expenses and deferred charges	65,177.	9	29,249.
	10 a	Land, buildings, and equipment cost or other basis. 10a 111,88	83.		
[Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b 85, 5	51. 28,685.	10 c	26,332.
	11	Investments — publicly-traded securities		11	
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related See Part IV, line 11		13	
İ	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	2,726.	15	2,726.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	185,739.	16	157,614.
	17	Accounts payable and accrued expenses .	19,437.	17	41,358.
- 1	18	Grants payable		18	
	19	Deferred revenue		19	
- <u> </u>	20	Tax-exempt bond liabilities.		20	
B	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
L T	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II		-	
Ę		of Schedule L .		22	
S	23	, ,	36,000.	24	
	25	Unsecured notes and loans payable to unrelated third parties	30,000.	25	
	26	Other liabilities Complete Part X of Schedule D Total liabilities. Add lines 17 through 25	55,437.	26	41,358.
	20	Organizations that follow SFAS 117, check here ► X and complete lines		20	41,330.
N E T		27 through 29 and lines 33 and 34.			
	27	Unrestricted net assets	130,302.	27	116,256.
(MONTH)	28	Temporarily restricted net assets	130,302.	28	110/250.
Š	29	Permanently restricted net assets		29	
Q R		Organizations that do not follow SFAS 117, check here ► and complete	le l	1076	
		lines 30 through 34.	-	1	
OZCT	30	Capital stock or trust principal, or current funds.		30	
	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
Ŷ.	32	Determed corrupts and support accumulated income or other funds		32	
四人 上人 アントン田	33	Total net assets or fund balances.	130,302.	33	116,256.
Ē	34	Total liabilities and net assets/fund balances	185,739.	•	157,614.

BAA

Rangking 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 Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Х	
b Were the organization's financial statements audited by an independent accountant?	2b		Х
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2 c	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
X Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3 b		

BAA

Form 990 (2009)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Employer Identification number

BEND VISITOR & CONVENTION BUREAU D.B.A VISIT BEND 71-0874661 Paritle Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete া the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit?? 限論測圖 Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2 c 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds? Yes No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year > Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section No 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 . . . (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 **b** Assets included in Form 990. Part X

. Schedule D (Form 990) 2009 BEND	VISITOR & COM	FNTTON BURFA	.TT	71-0874	.661	Page 2
Paralli Organizations Maintai						
3 Using the organization's acquisiti items (check all that apply). a Public exhibition		r records, check an				
b Scholarly research		e Other	onango programo			
c Preservation for future gener	ations					
4 Provide a description of the orga Part XIV.		nd explain how the	y further the organiza	tion's exempt purpos	e in	
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or receive d	lonations of art, his ained as part of the	torical treasures, or o	ther similar	Yes	No
Part W Escrow and Custodia						line
9, or reported an amo	unt on Form 990, f	Part X, line 21.	, and the contract of the cont		·, · · · · · ,	
1 a Is the organization an agent, trus included on Form 990, Part X?	itee, custodian, or othe	er intermediary for o	contributions or other	assets not	Yes	No
b If 'Yes,' explain the arrangement	in Part XIV and compl	lete the following ta	ble:			
					Amount	
c Beginning balance		• •		1 c		
d Additions during the year				1 d		
e Distributions during the year	•	• •		1 e		
f Ending balance			•	1f		
2a Did the organization include an a	imount on Form 990, P	art X, line 21?			Yes	No
b If 'Yes,' explain the arrangement	ın Part XIV					
Part V Endowment Funds Co	mplete if organizat	tion answered '	es' to Form 990,	Part IV, line 10.		
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four year	ars back
1 a Beginning of year balance						
b Contributions						
c Net Investment earnings, gains, and losses						
d Grants or scholarships				7 AUG 1873		
e Other expenditures for facilities and programs						
f Administrative expenses .					36277860	
g End of year balance						
2 Provide the estimated percentag	e of the year end balar	nce held as:				
a Board designated or quasi-endov	wment -	*				
b Permanent endowment ►	*	 				
c Term endowment ►	<u> </u>					
3a Are there endowment funds not organization by.	in the possession of th	e organization that	are held and adminis	tered for the	Yes	No
(i) unrelated organizations			•		3a(i)	
(ii) related organizations	••				3a(ii)	
b If 'Yes' to 3a(II), are the related		required on Schedi	ıle R?		3b	
4 Describe in Part XIV the intende	-			•		<u> </u>
Describe in all XIV the intelide				no 10		

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)
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Schedule D (Form 990) 2009

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Schedule D (Form 990) 2009 BEND VISITOR & COI	NVENTION BUREAU	J 71-	0874661 Page 3
REMAYIN Investments—Other Securities See Fo			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v Cost or end-of-year	aluation market value
Financial derivatives			
Closely-held equity interests			
Other			
			
		-	
Total. (Column (b) must equal Form 990 Part X, col. (B) line 12.)		True to State of the	
Part VIII Investments-Program Related (See I	Form 990, Part X, I	line 13) N/A	
(a) Description of investment type	(b) Book value	(c) Method of v	aluation
		Cost or end-of-year	market value
		 	
Total. (Column (b) must equal Form 990, Part X, Col. (B) line 13) ► Rational Other Assets (See Form 990, Part X,	line 15) N/A		
	escription	1	(b) Book value
(4) 00	Scription		(S) BOOK VAIGE
			
Total (California (h) mount agual Farm 2000 Bart V and (B) (1E)		-
Total. (Column (b) must equal Form 990, Part X, col (B), I Rart X Other Liabilities (See Form 990, Part		• • •	
(a) Description of Liability	(b) Amount		
Federal Income Taxes	(b) Amount		
	1		
Total (Column (b) must equal Form 990, Part X, col. (B) line 25)			

Cab.	odula'D (Form 000) 2000 DEND UTCTTOD C CONTIENTION DUDENU	1 00-	14661	
	edule'D (Form 990) 2009 BEND VISITOR & CONVENTION BUREAU 7 Reconciliation of Change in Net Assets from Form 990 to Financial Statements	1-087		Page 4
1	Total revenue (Form 990, Part VIII,column (A), line 12)		N/A	
2	Total expenses (Form 990, Part IX, column (A), line 25)			
3	Excess or (deficit) for the year Subtract line 2 from line 1	•		
4	Net unrealized gains (losses) on investments	•		
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net) Add lines 4 through 8	,		
	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9.			
	Reconciliation of Revenue per Audited Financial Statements With Revenue per F	teturn	N/A	
1	Total revenue, gains, and other support per audited financial statements .	1		
	Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments 2 a	,		
	a Net unrealized gains on investments Donated services and use of facilities 2a 2b			
	C Recoveries of prior year grants			
	e Add lines 2a through 2d	2e		
	Subtract line 2e from line 1	3		
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	Investments expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIV)			
	Add lines 4a and 4b	. 4c		
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5		
	TIXIIII Reconciliation of Expenses per Audited Financial Statements With Expenses pe	r Retu	ırn N/A	
1	Total expenses and losses per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
;	a Donated services and use of facilities .			
1	Prior year adjustments 2b			
	c Other losses 2c			
	d Other (Describe in Part XIV) . 2d	1960		
•	e Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3		
	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investments expenses not included on Form 990, Part VIII, line 7b			
	b Other (Describe in Part XIV) c Add lines 4a and 4b	4c		
_	Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5		
5 Pa	Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	, ,	L	
		\	15 and 25 Da	
line info	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part I 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this i rmation	v, lines part to p	orovide any ad	ditional
	PART X - FIN 48 FOOTNOTE		. 	-
	THE ORGANIZATION IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES UNDER	RINT	ERNAL	
	REVENUE CODE SECTION 501(C)(3) AND CLASSIFIED AS A PUBLIC CHARITY.			-
	ON JULY 1, 2009, THE ORGANIZATION ADOPTED NEW ACCOUNTING GUIDANCE RI	ELATE	D TO	
	UNCERTAIN INCOME TAX POSITIONS. THE ORGANIZATION WILL RECOGNIZE IN	_ITS_	FINANCIAL	
	STATEMENTS THE BENEFIT OF A TAX POSITION WHEN IT BELIEVES THAT TAX	POSIT	ION WILL	
	MORE LIKELY THAN NOT BE SUSTAINED ON AUDIT BASED ON THE TECHNICAL M	ERITS	OF THE	
BA			dule D (Form 9	990) 2009

Part XIV Supplemental Information (continued)	4001	Page 5
PART X - FIN 48 FOOTNOTE (CONTINUED)		
POSITION. FOR AN EXEMPT ORGANIZATION, UNCERTAIN TAX POSITIONS COULD RESU		
UNRELATED BUSINESS INCOME ACTIVITIES OR ACTIONS THAT JEOPARDIZE ITS STATU	S AS	
TAX-EXEMPT, SUCH AS POLITICAL ACTIVITY, SUBSTANTIAL LOBBYING EXPENDITURES	OR	-
EXCESSIVE UNRELATED BUSINESS ACTIVITIES. THE ORGANIZATION HAS CONCLUDED	THAT IT H	AD
NO UNRECOGNIZED INCOME TAX BENEFITS AT JULY 1, 2009, OR JUNE 30, 2010 AND	IT HAS N	0
TAX_POSITIONS FOR WHICH_IT_ESTIMATES_A SIGNIFICANT_CHANGE OVER THE NEXT_1	2 MONTHS.	
THE_COMPANY_IS_SUBJECT_TO_EXAMINATION_BY_STATE_AND_FEDERAL_TAX_AUTHORITIE	S. WITH	
FEW EXCEPTIONS, THE ORGANIZATION IS NO LONGER SUBJECT TO EXAMINATION BY M	AJOR TAXI	<u>NG</u>
AUTHORITIES FOR YEARS BEFORE 2006.	· 	
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Schedule D (Form 990) 2009 BEND VISITOR & CONVENTION BUREAU	/1-08/4661 Page 5
Part XIV Supplemental Information (continued)	
	
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TEEA3305L 07/10/09

Schedule **D** (Form 990) 2009

BAA

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

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.

on		2009
		ellthylolado holestedl
	Employer identifica	ation number

Name of the organization BEND VISITOR & CONVENTION BUREAU D.B.A VISIT BEND	Employer identification number 71-0874661
FORM COO. DADT VI. LINE 11. FORM COO DEVIEW DDG CECC	
DEVIEWED BY MANAGEMENT	
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVA	
THE BOARD OF DIRECTORS CONDUCTS ANNUAL PERFORMANCE REV	
DETERMINES ANNUAL COMPENSATION.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS P	
ALL GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEM	
OFFICE FOR PUBLIC INSPECTION	
	
	

Schedule O (Form 990) 2009	Page 2
Name of the organization BEND VISITOR & CONVENTION BUREAU D.B.A VISIT BEND	Employer identification number 71–0874661
D.B.A VISII BEND	[71-0874661
	-
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	·
	

Department of the Treasury Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return. OMB No 1545-0172

2009

Attachment Sequence No 67

Name(s) shown on return

BEND VISITOR & CONVENTION BUREAU

D.B.A VISIT BEND

Identifying number 71-0874661

	ess or activity to which this form rela	ies						
	M 990/990-PF					,		
ßa	Election To Exp	oense Certain I	Property Under Sec	tion 179)			
1			complete Part V before		art i.		1	\$250,000
2							2	\$230,000
3	Threshold cost of section	- ·	•	-	~1		3	\$800,000
4	Reduction in limitation. Su			•	5)		4	\$800,000
5	Dollar limitation for tax ye				married filing			
	separately, see instruction			255, enter -0- 11	married illing		5	
6	(a)	Description of property		(b) Cost (business	use only)	(C) Elected co	st	
7	Listed property. Enter the				7			
8	Total elected cost of section			(c), lines 6 and 7	,		8	
9	Tentative deduction. Enter			550			9	
10	Carryover of disallowed de		-		a) ar lina E (ai		10	
11 12	Business income limitation Section 179 expense dedu					ee msus)	12	
	Carryover of disallowed de				► 13		12	
	Do not use Part II or Part				1.4			
	Special Deprec				t include liste	d property.) (See in	istructions)
-	Special depreciation allow	ance for qualified					T	
15	tax year (see instructions)		_		•		15	
15	Property subject to section Other depreciation (included)		ı				16	10,713.
	MACRS Depre		actude listed property \	(Saa instructions	`		101	10,713.
i Figur	Cinst myora pepie	CIACION (DO NOCI	Section Sectio		,			
17	MACRS deductions for as	sets placed in sen		•			17	18.
		-				i		
18	If you are electing to grou asset accounts, check her	ip any assets place re	ed in service during the	tax year into one	e or more gen	eral ► 🗍		
		•	in Service During 2009	Tax Year Using	the General D	epreciation	System	1
	(a) Classification of property	(b) Month and year placed in service	(C) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Metho		(g) Depreciation deduction
19	3-year property							
	5-year property							
$\overline{}$	7-year property .							
- (10-year property							
	15-year property							
	20-year property							
	25-year property			25 yrs		S/I		
	n Residential rental			27.5 yrs	MM	S/I		
	property			27.5 yrs	MM	S/I		
i	Nonresidential real			39 yrs	MM	S/I	_	
	property .				MM	S/I	_	
	Section C -	- Assets Placed in	Service During 2009 T	ax Year Using th	e Alternative	Depreciation	on Syste	:m
20	a Class life					S/I	ا د	
	b 12-year			12 yrs		S/I		
	c 40-year			40 yrs	MM	S/I		
Pa	Summary (See	nstructions.)						

the appropriate lines of your return Partnerships and S corporations - see instructions

For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on

21 Listed property. Enter amount from line 28

10,731

21

22

Form 8868 (Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545 1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

Internal Revenue	Service		- File a Sepa	rate application for e	acn return.				
• If you are	filing for an a	Automatic 3-Month	Extension, comp	lete only Part I and o	heck this box			> X	
-	-			Extension, complete			s form).	_	
	_	·	•	an automatic 3-montl	-			8.	
Parallel I	Automatic	3-Month Extens	ion of Time.	Only submit origin	al (no copies	needed).			
				-				_	
A corporation	n required to f	lle Form 990-T and	requesting an au	tomatic 6-month exte	nsion - check	this box and	complete Part	I only ► X	
All other corp income tax r	porations (incl eturns.	udıng 1120-C filers,), partnerships, R	EMICS, and trusts mu	ust use Form 70	004 to reques	t an extension	of time to file	
the additiona Form 990-T.	il (not automa Instead, you r	enerally, you can e nths for a corporati tic) 3-month extens must submit the full //efile and click on a	ion or (2) you file y completed and	Form 8868 if you want Form 990-T). Howev Forms 990-BL, 6069 signed page 2 (Part I & & Nonprofits.	t a 3-month autorer, you cannot, or 8870, group	omatic extens file Form 886 o returns, or a 3. For more d	sion of time to 8 electronically a composite or etails on the e	file one of the y if (1) you want consolidated lectronic filing of	
	Name of Exempt	Organization	 				Employer identif	ication number	
Type or print	BEND VIS	ITOR & CONVE	NTION BURE	/U			71-0874661		
File by the due date for		and room or suite number	If a P O box, see inst	ructions					
filing your return See		ARRIMAN STRE							
instructions	1	t office, state, and ZIP co	de. For a foreign addre	ss, see instructions					
	BEND, OR			 					
_ ``		filed (file a separa	– ''			□ c 47	20		
Form 990		1	Form 990-T (c	•	-> 44>	Form 47			
Form 990		-	_ `	ection 401(a) or 408(a		Form 52:			
Form 990		}	Form 1041-A	ust other than above)		Form 88			
1 0111 330		<u>L</u>	110111110417						
The books	s are in the car	e of ► <u>SCOTT</u> C	GREENSTONE						
Telephone	e No. ► 541	-385-0888		FAX No. ►					
· ·			or place of busi	ness in the United Sta	ates, check this	box		. ▶ 🗍	
• If this is	for a Group R	eturn, enter the org	anızatıon's four o	igit Group Exemption	Number (GEN)) If	this is for the	whole group,	
check thi	s box ►	. If it is for part of	the group, check	this box ▶ ☐ and a	attach a list with	n the names a	and EINs of all	members	
	nsion will cove								
				on required to file Fo					
				nization return for the	e organization n	amed above.			
The ex		the organization's r	eturn for:						
	calendar yea	r 20 or	00 00		0 20	1.0			
X	tax year begi	nning _ <u>7/01</u> _	, 20 _09,	and ending6/3	<u>0 </u>	10			
2 If this t	ax year is for	less than 12 month	is, check reason:	Initial return	Final reti	urn (Change in acco	ounting period	
3a If this a nonrefu	application is f undable credit	for Form 990-BL, 99 s. See instructions.	90-PF, 990-T, 472	20, or 6069, enter the	tentative tax, le	ess any	3a\$	0.	
		for Form 990-PF or rior year overpaym		refundable credits ar credit	nd estimated tax		3b \$	0.	
c Balanc deposit See ins	e Due. Subtra t with FTD cou structions.	ct line 3b from line ipon or, if required,	3a. Include your by using EFTPS	payment with this for (Electronic Federal T	m, or, if require ax Payment Sy	ed, /stem).	3c \$	0.	
Caution. If y payment ins		to make an electror	nic fund withdraw	al with this Form 8868	8, see Form 845	53-EO and Fo	rm 8879-EO fo	or	
BAA For Pri	ivacy Act and	Paperwork Reduct	tion Act Notice. s	ee instructions.			Form 8	868 (Rev. 4-2009)	