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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

<u>A</u>	For the	e 2009 calendar year, or tax year beginning JUL 1, 2009 and	enaing J	UN 30, 2010					
В	Check if applicable	Please C Name of organization		D Employer identific	cation number				
Г	Addre	ss label or Colorado Proadcastors Association							
Ē	Name chang	Nos C. D.	· · · · ·	84-6	059736				
Initial return See Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number									
	Terminated Specific 17543 Road 49 970-547-1388								
	Amended return City or town, state or country, and ZIP + 4 G Gross receipts \$								
L	Application pendl	Bullington, co occo,		H(a) Is this a group re					
	•	F Name and address of principal officer: Marilyn C. Hogan PO Box 2607, 2042 Boreas Pass Rd Brecke	onrido	for affiliates?	Yes X No				
	Tay-ay	empt status: X 501(c) (6)	enridg	1	luded? Yes No				
		te: Nww.coloradobroadcasters.org		H(c) Group exemptio					
		forganization: Corporation Trust X Association Other	L Year		A State of legal domicile. CO				
	art I	Summary	1		- out of logal dolling.				
9	1	Briefly describe the organization's mission or most significant activities: To p:	romote	and develo	p the art				
Activities & Governance	1	of radio and Tv broadcasting.							
Ĕ	2	Check this box if the organization discontinued its operations or dispositions.	sed of more	than 25% of its net as	1				
300	3	Number of voting members of the governing body (Part VI, line 1a)		3	13				
જ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	13				
ities	5	Total number of employees (Part V, line 2a)		5	0				
₹:	7a	Total number of volunteers (estimate if necessary) Total gross unrelated business revenue from Part VIII, column (C), line 12		6 7a	0.				
Ă		Net unrelated business taxable income from Form 990-T, line 34	•••••	7b	-932.				
_	1	The difficulties becomes taxable modifier from 500 1, mile 54	·	Prior Year	Current Year				
ø	8	Contributions and grants (Part VIII, line 1h)		205,982.	75,338.				
euc	9	Program service revenue (Part VIII, line 2g)		298,136.	298,114.				
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		18,109.	41,245.				
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,590.	2,162.				
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		525,817. 8,698.	416,859.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4)		0,090.	10,076.				
s	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	·	142,129.	149,203.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	.	112/1236	113/2031				
Ď	b	Total fundraising expenses (Part IX, column (D), line 25)							
Û	17	Other expenses (Part IX, column (A), lines 11a-11c 11f-24f)		220,656.	223,238.				
		Total expenses. Add lines 13-17 (must equal Part X, column (A) line 25)		371,483.	382,517.				
	19	Revenue less expenses. Subtract line 18 from line 12		154,334.	34,342.				
Net Assets or		DEC 2 8 2010	Be	ginning of Current Year	End of Year				
ASSE	20	Total lassets (Part X, line 16)	•	621,455.	684,149.				
Set	21	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from GDEN. UT		43,225. 578,230.	49,160. 634,989.				
P	art II	The state of the s		310,230.	034,509.				
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules an	nd statements,	and to the best of my knowleds	ge and belief, it is true, correct,				
		and complete Declaration of preparer (other than officer) is based on all Information of which preparer has a	any knowledge.	/	/				
Sig	ın	Just Jans		12/2	23/2010				
He	re	Signature of officer		Date /	<i>(</i>				
		Mayilyn C. Hogan, President JUSTIN	L SA	SSO , CHAI	RMAN				
			l Ch	eck ifPrepare	er's identifying number				
Pai		Preparer's signature Julie Id/IL	Sel sel		structions)				
	parer's	Firm's name (or Lucke & Associates CPA's	/ · - 1 em	EIN >					
USE	Only	self-employed), PO Box 3609			,				
		address, and ZIP+4 Breckenridge, CO 80424		Phone no. ▶ 9	70-453-4302				
Ma	y the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No				
932	932001 02-04-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2009)								

	Briefly describe the o	of Program Service A			
	To promote	& develop the	art of radio & tv b	roadcasting	
					
	<u> </u>			·	
	_		ogram services during the year which we	ere not listed on	Yes X
	the prior Form 990 or	990-E27 se new services on Schedul		•	LYes A_F
			signıfıcant changes in how it conducts, a	any program services?	Yes X
		se changes on Schedule O.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Section 501(c)(3) and	501(c)(4) organizations and	each of the organization's three largest p I section 4947(a)(1) trusts are required to enue, if any, for each program service re	report the amount of grants and	
<u> </u>	(Code: To promote)(Expenses \$ 31 & develop the	12,254. including grants of \$ art of radio and tv	5,000.)(Revenue\$ broadcasting	341,521
	(Code:) (Expenses \$	including grants of \$) (Revenue \$	
	(Code:) (Expenses \$	including grants of \$) (Revenue \$	
	Other program service	es. (Describe in Schedule O	·)		
I	(Expenses \$	including gra	rants of \$) (Rever		

	990 (2009) Colorado Broadcasters Association 84-605	<u> 9736</u>	. P	age 3
Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	+	Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	1	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	†	1	
_	Schedule D. Part III	8		х
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	_ <u>_</u> _		
•	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	İ	Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X	'0	 	-
• •	as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		1	
	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	İ		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	1		
-	Schedule D, Parts XI, XII, and XIII.	10		Х
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	12	-	
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X	-		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	170		<u> </u>
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		- 25
-	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	13		
	located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
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 11e2 If "Von " complete Schodule G. Port 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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	- 1	1	1	1

Form 990 (2009)

complete Schedule G, Part III

...

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

<u> </u>	· · · · · · · · · · · · · · · · · · ·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		163	1.10
21	United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,		-	
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			l
	Schedule K. If "No", go to line 25	24a		Х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		l
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		L
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			ĺ
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			l
	Schedule L, Part III	27		X.
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
Ь		28b		Х
С	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	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			.,
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
20	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	-		х
33	Schedule N, Part II	32		
00	2017701 2 and 2017701 22 K EVan B annulate Cabadula D. Dart I	33		х
34	Was the organization related to any tax-exempt or taxable entity?	33		
•	If "Ves " complete Schedule P. Parte II. III. IV, and V. line 1	34		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	-		<u> </u>
J -	If "Yes," complete Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	i	х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O.	38	Х	
			000	2000)

, 41,	VV Otatements regulating other the Linings and Tax Compliance		1	T
_ `			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	,		
L	U.S. Information Returns. Enter -0- if not applicable	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
C	(gambling) winnings to prize winners?	1c		
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	<u> </u>		
24	filed for the calendar year ending with or within the year covered by this return			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2ь	•	1
•	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		3a	Х	1
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
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?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	_		
	provided to the payor?	7a		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82827	7.		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7c		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1		
·	benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
a	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the	1		
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings	1		
	at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		L
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9Ь		
10	Section 501(c)(7) organizations. Enter:		,	
а	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	-		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from 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.)	1		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ.,,	ļ
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	<u> </u>	000	
		Form	990 ((2009)

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

Sec	tion A. Governing Body and Management		Ves	NI-
10	Enter the number of voting members of the governing body	3	Yes	No
ıa b	Enter the number of voting members of the governing body Enter the number of voting members that are independent 15 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
4	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	- <u>-</u> -		
•	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members of stockholders, or other persons who may elect one or more members of the			
/ a		7a		Y
L	governing body?	7b		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	10		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:		v	
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	_X_	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> X</u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a		10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent	100.00		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		Х
b		15b		X
b	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	130		
16.				
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	140		v
	taxable entity during the year?	16a		X
þ	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► None			-
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	ınd fina	ncial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ation:	-	
	Colorado Broadcasters Association - 970-547-1388			
	PO Box 2607, 2042 Boreas Pass Road, Breckenridge, CO 80424			
		Form	990 (2009

932006 02-04-10

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours	l (cl		Pos		n app	IV)	Reportable compensation	Reportable compensation	Estimated amount of
-	per week	Individual trustee or director	Institutional frustee	Officer		rsated		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensatio from the organization and related organizations
ee Attached								_	_	
		X		-	_			0.	0.	(
		-	-	-		-				
						-				· · · · · · · · · · · · · · · · · · ·
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Form 990 (2009)

Form 990 (2009) Colorado									84-60	<u>597</u>	736	Pa	ge 8
Part VII Section A. Officers, Directors, Tru (A) Name and title	ustees, Key Ei (B) Average	mplo			C)		est	(D) Reportable	rees (continued) (E) Reportable		(i Estim	F)	d
	hours per week	Individual trustee or director		Officer	that		Ī	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISO		amou oth compe	unt o her nsat n the izatio	ion on on ed
							ļ <u>-</u>			\perp			
		<u> </u>		_			<u> </u>			_			
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					-					-			
				-	-		-						
							-						
1b Total	at limited to the		linte		.	>		0.	000 in resentable	0.			0.
compensation from the organization		1056	IIST			e) w		eceived more than \$100				es	1 No
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s			, ke	y en	olqr	yee,	or I	nighest compensated e	mployee on	ſ	3		x
4 For any individual listed on line 1a, is the si and related organizations greater than \$15	um of reportab	le co						· ·	the organization		4		X
5 Did any person listed on line 1a receive or the organization? If "Yes," complete Sched	accrue compe	nsati	ion f						rices rendered to		5		X
Section B. Independent Contractors 1 Complete this table for your five highest co				ent c	onti	racto	ors t	hat received more than	\$100,000 of comp	pensa	ation from	m	
the organization. NONE (A)								(B)			(C)		
Name and business	address						_	Description of s	services		ompensa	ation	
			_										<u> </u>
								· · · · · · · · · · · · · · · · · · ·					
	<u> </u>			_				`			-		
Total number of independent contractors (\$100,000 in compensation from the organi		ot li	mite	d to		se li O	stec	i above) who received n	nore than				
										ſ	Form 99	0 (2)	nnai

Part VIII Statement of Revenue (A) Total revenue exempt function Contributions, gifts, grants and other similar amounts 1 a Federated campaigns 1a 70,338. 1b Membership dues Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and 5,000. similar amounts not included above 9 Noncash contributions included in lines 1a-1f \$ 75,338. h Total. Add lines 1a-1f **Business Code** 515100 2 a Press Cred/NCSA/EM 209,464 Program Service Revenue 46,430. 515100 Meetings 515100 42,220. c Program Income f All other program service revenue 298,114. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 41,245. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (II) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ _ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold . c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 1,735. 1,735 11 a Directory Sales 515100 ь Other 515100 427. d All other revenue $2,\overline{162}$. e Total. Add lines 11a-11d 416,859. 341,521 0 0. Total revenue. See instructions Form 990 (2009) Part IX Statement of Functional Expenses

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

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).							
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1	Grants and other assistance to governments and							
	organizations in the U.S. See Part IV, line 21							
2	Grants and other assistance to individuals in	·						
	the U.S. See Part IV, line 22	10,076.	10,076.					
3	Grants and other assistance to governments,							
	organizations, and individuals outside the U.S.			Į.				
	See Part IV, lines 15 and 16			····				
4	Benefits paid to or for members							
5	Compensation of current officers, directors,							
	trustees, and key employees	146,212.	107,760.	38,452.				
6	Compensation not included above, to disqualified							
	persons (as defined under section 4958(f)(1)) and							
	persons described in section 4958(c)(3)(B)							
, 7	Other salaries and wages							
8	Pension plan contributions (include section 401(k)	2 001	1 074	1 015				
_	and section 403(b) employer contributions)	2,991.	1,974.	1,017.				
9	Other employee benefits							
10	Payroll taxes .							
11	Fees for services (non-employees):							
a	Management							
D	Legal							
ر د	Accounting							
a	Lobbying See Bert IV line 47							
•	Professional fundraising services. See Part IV, line 17 Investment management fees		`					
'	Other	30,956.	28,554.	2,402.				
9 12	Advertising and promotion	6,947.	2,667.	4,280.				
13	Office expenses	20,016.	13,847.	6,169.	·			
14	Information technology	20,010.	13,047.	0,109.				
15	Royalties							
16	Occupancy	8,484.	5,684.	2,800.				
17	Travel	24,218.	18,164.	6,054.				
18	Payments of travel or entertainment expenses	21/2200	10/1016	0/0311				
	for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	93,727.	88,378.	5,349.				
20	Interest			3,313.				
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	532.	351.	181.				
23	Insurance	2,813.	1,856.	957.				
24	Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)							
а	Program Expense	27,673.	27,673.					
b	Other	7,872.	5,270.	2,602.				
c			-,					
d								
е								
f	All other expenses							
25	Total functional expenses. Add lines_1 through 24f	382,517.	312,254.	70,263.	0.			
26	Joint costs. Check here If following	,						
			-					
	reported in column (B) joint costs from a combined							
	educational campaign and fundraising solicitation							
c d e f 25	All other expenses Total functional expenses. Add lines 1 through 24f Joint costs. Check here Inf following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined			70,263.	0.			

932010 02-04-10

Part X **Balance Sheet** (A) (B) Beginning of year End of year 180,754. 163,417 1 Cash · non-interest-bearing 439,907. 488,652. 2 2 Savings and temporary cash investments. Pledges and grants receivable, net 3 12,429. 15,935, Accounts receivable, net 4 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 Notes and loans receivable, net 7 Inventories for sale or use 904. 1,554. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 12,609 basis. Complete Part VI of Schedule D 10a 11,849 1,292. 760. b Less: accumulated depreciation Investments - publicly traded securities 11 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments · program-related. See Part IV, line 11 13 14 Intangible assets 14 15 15 Other assets. See Part IV, line 11 621,455. 684,149. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 15, 192.17 17 Accounts payable and accrued expenses 18 Grants payable 18 21,600. 24,500. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 6,433. 9,881. 25 Other liabilities. Complete Part X of Schedule D 43,225. 49,160. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 578,230. 27 634,989. Unrestricted net assets 27 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31

> 684,149. Form 990 (2009)

634,989.

32

33

578,230.

621,455.

32

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

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

Form 990 (2009)

3b

Schedule D

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Colorado Broadcasters Association

Employer identification number 84-6059736

Par	t Organizations Maintaining Donor Advise		Is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year Did the organization inform all donors and donor advisors in v	uniting that the appets hold in depart adv	lood funds
5			
_	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor ac		
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpos	
	impermissible private benefit?		Yes No
Pa	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or p		istorically important land area
	Protection of natural habitat	Preservation of a ce	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		pro-ming
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		. 2b
C	Number of conservation easements on a certified historic stru	ucture included ın (a)	. 2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06	. 2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by tl	he organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling o	f
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		during the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservati	on easements in its revenue and expens	
Ū	include, if applicable, the text of the footnote to the organization	·	
	conservation easements.	ion s interioral statements that describe	s the organization s accounting to
Pa	rt III Organizations Maintaining Collections of	f Art. Historical Treasures, or (Other Similar Assets
L.E	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and	halance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	the footnote to its financial statements that describes these i		dollo service, provide, in rait XIV, the text of
			anno about warks of art, biotorical transures
U	If the organization elected, as permitted under SFAS 116, to or other similar assets held for public exhibition, education, o		
	-	r research in furtherance of public servi	ce, provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		. 💆 💲
			• \$
2	If the organization received or held works of art, historical tre-		al gain, provide
	the following amounts required to be reported under SFAS-1	16 relating to these items:	
			. • \$
b	Assets included in Form 990, Part X		> \$

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932051 02-01-10

Schedule D (Form 990) 2009

Sche	dule D (Form 990) 2009 Colorado Broadcasters As	soc	iat	ion		8	34-6	059736	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 99	0 to /	Audit	ed Fina	incial S	Stater	nents	3	
1	Total revenue (Form 990, Part VIII, column (A), line 12)				. 1			416	,859.
2	Total expenses (Form 990, Part IX, column (A), line 25)				. 2			382	,517.
3	Excess or (deficit) for the year. Subtract line 2 from line 1				. 3			34	,342.
4	Net unrealized gains (losses) on investments				4			22	,417.
5	Donated services and use of facilities				5				
6	Investment expenses				6				
7	Prior period adjustments				7				
8	Other (Describe in Part XIV.)				8				
9	Total adjustments (net). Add lines 4 through 8			-	9				,417.
10	Excess or (deficit) for the year per audited financial statements. Combine lines				10			<u>56</u>	,759.
Par	t XII Reconciliation of Revenue per Audited Financial State	emen	its W	ith Rev	enue p	er Re	turn		
1	Total revenue, gains, and other support per audited financial statements					-	1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			ì					
а	Net unrealized gains on investments		2a			\longrightarrow			
ь	Donated services and use of facilities		2b						
C	Recoveries of prior year grants		2c						
d	Other (Describe in Part XIV.)		2d				İ		
_	Add lines 2a through 2d					. -	2e		
3	Subtract line 2e from line 1	•		• •••		. -	3		· · · · · · · · ·
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		1 . 1	ı					
a	Investment expenses not included on Form 990, Part VIII, line 7b		4a						
b	Other (Describe in Part XIV.)		4b	<u></u>					
	Add lines 4a and 4b				•	·	4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) * XIII Reconciliation of Expenses per Audited Financial State	· omo	nts V	With Ex	200000		5 Dotum		
1	Total expenses and losses per audited financial statements	CITIE	IIIS ¥	VIUI EA	Je11262	per i			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	• •		•		 	1		
a	Donated services and use of facilities		2a			}			
b	Prior year adjustments	•	2b			-			
c	Other losses		2c						
d	Other (Describe in Part XIV.)	• • • • • • • • • • • • • • • • • • • •	2d	· · · · · ·		$\neg \neg$			
e	Add lines 2a through 2d			 , "			2e		
3	Subtract line 2e from line 1	٠		• • •		r	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	•	•	• • •		`			
а	Investment expenses not included on Form 990, Part VIII, line 7b		4a			į			
_	Other (Describe in Part XIV.)		4b						
С	Add lines 4a and 4b						4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			•		.	5		
-	t XIV Supplemental Information								
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; P	art III,	lines 1	ia and 4;	Part IV, li	nes 1b	and 2b	; Part V, line	4; Part
X, lın	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also o	comple	ete this	s part to p	rovide ar	ny addi	tional ır	nformation.	
									
									
									
					 -		chedu	le D (Form 9	90) 2009

% ⊠ Schedule I (Form 990) 2009 **Employer identification number** 84-6059736 OMB No 1545-0047 Open to Public Inspection (h) Purpose of grant or assistance ____ ____ recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ► Attach to Form 990. (d) Amount of cash grant LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Colorado Broadcasters Association (c) IRC section f applicable Enter total number of section 501(c)(3) and government organizations General Information on Grants and Assistance (P) EIN criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization or government Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part II Part

Page 2 Schedule I (Form 990) 2009 (f) Description of non-cash assistance 84-6059736 (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (d) Amount of non-cash assistance 。 Colorado Broadcasters Association 10,076. 18 (c) Amount of cash grant (b) Number of recipients 27 Continuing Education Scholarships: 9426 (a) Type of grant or assistance Schedule I (Form 990) 2009 Donations: 650 932102 02-02-10 Part IV Part III

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

2009 Open to Public Inspection

Name of the organization Colorado Broadcasters Association	Employer identification number 84-6059736
Form 990, Part VI, Section B, line 11: Presidnet/CEO review	ewed 990 before
it was filed	
Form 990, Part VI, Section C, Line 19: Upon request	
<u></u>	

Form **8868**(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

If you are	filing for an Automatic 3-Month Extension, complete only Part I and check this bo filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II plete Part II unless you have already been granted an automatic 3-month extension on a	(on page 2	of this form).	3	
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies nee	eded).		_	
A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only					
	rporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form income tax returns.	7004 to re	quest an extension	of	
one of the electronicall returns, or a	Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month at returns noted below (6 months for a corporation required to file Form 990-T). Howey if (1) you want the additional (not automatic) 3-month extension or (2) you file Form composite or consolidated Form 990-T. Instead, you must submit the fully completed at ore details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file	ever, you c ns 990-BL, nd signed p	annot file Form 88 6069, or 8870, gro age 2 (Part II) of For	868 UD	
Type or print	Name of Exempt Organization	Employer	identification number	er	
	Colorado Broadcasters Association	84	6059736		
File by the due date for filing your	Number, street, and room or suite no. If a P O box, see instructions. PO Box 3609				
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions Breckenridge, CO 80424			_	
Check type	of return to be filed (file a separate application for each return):				
☑ Form 990 ☑ Form 990-T (corporation)			Form 4720		
☐ Form 990-BL ☐ Form 990-T (sec. 401(a) or 408(a) trust)			☐ Form 5227		
☐ Form 990-EZ ☐ Form 990-T (trust other than above)			☐ Form 6069		
☐ Form 990-PF ☐ Form 1041-A			Form 8870		
Telephone If the orga If this is for the whole	No. ► (970) 547-1388 FAX No. ► () Initialization does not have an office or place of business in the United States, check this or a Group Return, enter the organization's four digit Group Exemption Number (GEN) e group, check this box ► □ . If it is for part of the group, check this box e names and EINs of all members the extension will cover.	s box .	▶ □ If this is	ם	
1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until February 15 , 20_11, to file the exempt organization return for the organization named above. The extension is for the organization's return for: ▶ □ calendar year 20 or ▶ ☑ tax year beginning 07/01 , 20_09 , and ending 06/30 , 20_10					
2 If this t	ax year is for less than 12 months, check reason: Initial return Final return	☐ Change	in accounting perio	od	
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tally nonrefundable credits. See instructions.	х,	\$ 0.0	—)0	
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.				_	
c Baland deposi	te Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required twith FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment). See instructions.	d, and 3b)0	
Caution. If y for payment	ou are going to make an electronic fund withdrawal with this Form 8868, see Form 84 instructions.			_	
For Privacy Act and Paperwork Reduction Act Notice, see Instructions. Cat No 27916D Form 8868 (Rev 4-2009)					