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Form • 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except black lung

benefit trust or private foundation)

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

2010
Open to Public Inspection

7	r the 2010 ca	endar year, or tax year beginning , and ending						
_	ck if applicable	C Name of organization		D	Emplo	yer iden	tification	number
ır	ress change	ROCK SPRINGS RENEWAL FUND, INC.		1				
n	ne change	Doing Business As		▙		5196	_	
a	al return	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E		one numb		A
m	nınated	233 C STREET	<u> </u>	╀	307	-352	-143	4
	ended return	City or town, state or country, and ZIP + 4 ROCK SPRINGS WY 82901		١.	^		Ω	3,577
		F Name and address of principal officer		160	Gross rece	ipis \$		
)	lication pending	Triance and dadress of principal officer	H(a) is this a	group	return for a	affiliates?	Yes	X No
			H(b) Are all	affilia	tes ınclu	ded?	Yes	No
			1f "N	lo," a	ttach a li	st (see in	structions)
x	k-exempt statu	X 501(c)(3) 501(c) () 4 (insert no) 4947(a)(1) or 527						
е	ebsite: 🕨 🚶	/A	H(c) Group	exem	ption nu	mber 🕨		
	m of organization	X Corporation Trust Association Other ► L	Year of formation			M State o	of legal domic	cile
~		mmary						
		scribe the organization's mission or most significant activities						
	See	Schedule O						
	2 Check th		25% of its net as	sets	1 1			
		of voting members of the governing body (Part VI, line 1a)			3			
		of independent voting members of the governing body (Part VI, line 1b)			4	0		
		nber of individuals employed in calendar year 2010 (Part V, line 2a)			5			
		nber of volunteers (estimate if necessary)			6			
		elated business revenue from Part VIII, column (C), line 12 ated business taxable income from Form 990-T, line 34			7a 7b			0
	D Net unite	ared business taxable income from Form 990-1, line 34	Prior Ye	ar			Current Yea	
	8 Contribu	ions and grants (Part VIII, line 1h)	8	3,	008		12	,750
	9 Program	service revenue (Part VIII, line 2g)		1,	553		24	,149
1	10 Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)			352			173
1	11 Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			392		46	,505
1	12 Total rev	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8	2,	521		83	,577
1	13 Grants a	nd similar amounts paid (Part IX, column (A), lines 1–3)						
1	14 Benefits	paid to or for members (Part IX, column (A), line 4)						
		other compensation, employee benefits (Part IX, column (A), lines 5–10)	ļ					
		nal fundraising fees (Part IX, column (A), line 11e)						
	b Total fun	draising expenses (Part IX, column (D), line 25) PECEIVED penses (Part IX, column (A), lines 11a-11d 11f-24f)			001		1.	
		enses (Part IX, column (A), lines 11a-11d, 11f-24f)			281			143
	· · · · · · · · · · · · · · · · · · ·	enses Add lines 13–17 (must equal Part IX Column (A), line 25) less expenses Subtract line 18 from line 12— MAY 1/3 2011			281 240			,143 ,434
7	19 Revenue	less expenses Subtract line 18 from line 12. MAY 1/3 2011	Beginning of Ci				End of Year	
2	20 Total ass	ets (Part X line 16)			290			,941
		Illities (Part X, line 26)			0			0
2	22 Net asse	ts or fund balances Subtract line 21 from line 20	19	6,	290		269	,941
		gnature Block						
er	r penalties of p	erjury, I declare that I have examined this return, including accompanying schedules and statemen	ts, and to the best	of my	knowled	ige and b	ehef, it is	
c	correct, and co	mplete Declaration of preparer (other than officer) is based on all information of which preparer ha	s any knowledge					
		ignature of officer			Date			
		Hallale broacolo			X	<u>5-1</u>	0 - //	
_	F	ype or print name and litle				 _		
	Print/Ty	pe preparer's name Preparer's signature	Date		Check	-	PTIN	
		. Radakovich				nployed	P001447	27
	FIIIIS			Firm'	s EIN 🕨			
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_				Phon	e no	301.	T1	
_								
r	Firm's a	1575 Dewar Dr Ste 200				<u> </u>		307-382- Yes

	ROCK SPRINGS RENE		·5196877	Page 2
	tatement of Program Service	ce Accomplishments s a response to any question in this	· Part III	X
	ribe the organization's mission	s a response to any question in this	o r ait iii	
See Sch				
_		rogram services during the year which were i	not listed on the	
If "Yes," des	90 or 990-EZ? cribe these new services on Schedi			Yes X No
services?	inization cease conducting, or make cribe these changes on Schedule C	significant changes in how it conducts, any p	orogram	Yes X No
Describe the 501(c)(3) an	e exempt purpose achievements for	each of the organization's three largest progon 4947(a)(1) trusts are required to report the		
a (Code PROVIDE)(Expenses \$ FUNDING TO THE RO	3,897 including grants of \$ DCK SPRINGS RENEWAL AG) (Revenue \$	
1110 1 101				
b (Code) (Expenses \$	including grants of \$) (Revenue \$	
c (Code) (Expenses \$	including grants of \$) (Revenue \$	
d Other progra	am services (Describe in Schedule	0)		
(Expenses	\$ 8,594 inclu	ding grants of \$)	(Revenue \$)
	am service expenses ▶	12,491		Form 990 (201
A				\201

Part 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	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		_ <u>X</u> _
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-197 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,"	_		7,
_	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		77
_	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,"	_		77
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	_		3,7
_	complete Schedule D, Part IV	9		X
0	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-	4.0		.
	endowments? If "Yes," complete Schedule D, Part V	10		X
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
_	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	440	х	
	complete Schedule D, Part VI	11a	^	
D	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	11h		x
_	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	11b		
С	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	116	 	
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	\vdash	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
•	the organization's slability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
22	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
Lu	Schedule D, Parts XI, XII, and XIII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
~	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		х
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X
5	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, Parts II and IV	15		X
6	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, Parts III and IV	16		X
7	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 (see instructions)	17		X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
9	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	<u> </u>	X
:0a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some		}	
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	L	

19? Note. All Form 990 filers are required to complete Schedule O

	1 990 (2010) ROCK SERINGS RENEWAL FOND, INC. 20-31968//		P	age 4
Pi	art IV Checklist of Required Schedules (continued)			
0.4	Dettination of the state of the	1	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			37
22	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			37
22	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			7.
24-	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			3.7
.	through 24d and complete Schedule K. If "No," go to line 25	24a	-	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	-	
·	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
a	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			37
h	with a disqualified person during the year? If "Yes," complete Schedule L, Part I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	25a	<u> </u>	X
J				
	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	056		₹.
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	25b		X
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II			X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	26		
_,	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	27	\vdash	~
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b		204		
-	Schedule L, Part IV	28b		X
С		200		
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
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? 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	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,			
	Part V, line 2			
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	1		

Pa	ırt V `	Statements Regarding Other IRS Filings and Tax Compliance					
		Check if Schedule O contains a response to any question in this Part V					
٠.	=	A constant of Day 2 of Francisco Conference of the Conference of t	ا ۔ ا	1		Yes	No
1a		number reported in Box 3 of Form 1096 Enter -0- if not applicable number of Forms W-2G included in line 1a Enter -0- if not applicable	1a 1b	0			
b c		rganization comply with backup withholding rules for reportable payments to vendors and	ַנוו	0			ĺ
·		e gaming (gambling) winnings to prize winners?			1c		х
2a	•	number of employees reported on Form W-3, Transmittal of Wage and Tax					
		nts, filed for the calendar year ending with or within the year covered by this return	2a	0			
b		t one is reported on line 2a, did the organization file all required federal employment tax returi	าร?		2b		
	Note. If t	he sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
3a	Did the c	rganization have unrelated business gross income of \$1,000 or more during the year?			3a		X
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 tır	me during the calendar year, did the organization have an interest in, or a signature or other a	uthori	ty		1	
		nancial account in a foreign country (such as a bank account, securities account, or other fin	ancial				
	account)				4a		X
b		enter the name of the foreign country	_				
		ructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial	Accou	ints	1_	1	v
5a		organization a party to a prohibited tax shelter transaction at any time during the tax year?	tion?		5a	 	X
b c	-	axable party notify the organization that it was or is a party to a prohibited tax shelter transac o line 5a or 5b, did the organization file Form 8886-T?	lion		5b	<u> </u>	
6a		e organization have annual gross receipts that are normally greater than \$100,000, and did th	_		5c	 	
va		tion solicit any contributions that were not tax deductible?	-		6a		x
b	-	did the organization include with every solicitation an express statement that such contribution	ns or		Ju		
		e not tax deductible?			6ь		
7	-	ations that may receive deductible contributions under section 170(c).					
а		organization receive a payment in excess of \$75 made partly as a contribution and partly for g	oods				
	and serv	ices provided to the payor?			_7a		
b	If "Yes,"	did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the c	organization sell, exchange, or otherwise dispose of tangible personal property for which it wa	s				
		to file Form 8282?	ı	1	7c	ļ	ļ
d		indicate the number of Forms 8282 filed during the year	7d				
e		organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		t?	7e	├	
f		organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		00	7f	<u> </u>	
g	-	anization received a contribution of qualified intellectual property, did the organization file Fo			7g	 -	-
h 8	_	anization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza ring organizations maintaining donor advised funds and section 509(a)(3) supporting	uon m	e a Foim 1096-C7	7h	 	
0		ations. Did the supporting organization, or a donor advised fund maintained by a sponsoring					
		tion, have excess business holdings at any time during the year?			8		
9	•	ring organizations maintaining donor advised funds.				<u> </u>	
а	•	organization make any taxable distributions under section 4966?			9a	1	
b		organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section	501(c)(7) organizations. Enter					
а	Initiation	fees and capital contributions included on Part VIII, line 12	10a		_		
b	Gross re	ceipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		_		
11	Section	501(c)(12) organizations. Enter	1	ı			
а	Gross in	come from members or shareholders	11a		_		
b	Gross in	come from other sources (Do not net amounts due or paid to other sources					
	~	amounts due or received from them)	11b		⊢ ,,	1	
12a		4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		, 	12a	-	
b		enter the amount of tax-exempt interest received or accrued during the year	12b	<u></u>			
13		501(c)(29) qualified nonprofit health insurance issuers			13a	 	
а		ganization licensed to issue qualified health plans in more than one state? The the instructions for additional information the organization must report on Schedule O			134	 	
b		e amount of reserves the organization is required to maintain by the states in which					
Ŋ		nization is licensed to issue qualified health plans	13b				
С		e amount of reserves on hand	13c				
14a		organization receive any payments for indoor tanning services during the tax year?			14a		X
b		has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	<u> 0</u>		14b		
DAA	,				Forr	ո 990	(2010)

Form	990 (2010) ROCK SPRINGS RENEWAL FUND, INC. 20-5196877		_	.a. c
	ift VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b be	low ar		age 6
ГС	"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change			
	O. See instructions.	3 111 00	<i>i</i> ncut	ii.C
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
_	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 7a	Does the organization have members or stockholders?	6		
1 a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		¥
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	1.5		
	the year by the following			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reveni	ie Coc	le.)_	
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	<u> </u>	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such		ĺ	
44-	chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
та	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	144	x	
b	form? Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a	^	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		x
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	124	_	
-	rise to conflicts?	12b	ĺ	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes."	1		
	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b	ļ	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	1		.
	with a taxable entity during the year?	16a		X
ь	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		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available			
	for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,			
	and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ LISA MUELLER 450 SOUTH MAIN STREET			

307-352-1434 Form 990 (2010)

WY 82901

ROCK SPRINGS

organization > LISA MUELLER

DAA

Form 990 (2010) ROCK SPRINGS RENEWAL FUND, INC.

20-5196877

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Form 990 (2010)

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

Check if Schedule O contains a response to any question in this Part VII

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.
- 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, if any 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

K Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee (A) (C) (F) (B) (D) (E) Name and Title Position (check all that apply) Estimated Average Reportable Reportable compensation from hours per compensation amount of Хeу nstitutional week from related other ighest compensated ividual trustee lirector compensation the organizations (describe employee organization (W-2/1099-MISC) from the hours for (W-2/1099-MISC) organization related organizations and related trustee ın Schedule organizations 01 (1) JOHN NOOTZ BOARD MEMBER 0.00 0 0 0 (2) PAULA WONNACOTT 0.00 0 0 TREASURER n (3) JANA PASTOR 0.00 0 0 0 PRESIDENT (4) RENNARD JENSEN BOARD MEMBER 0.00 0 0 0 (5) JACK COSTANTINO 0 0 0 BOARD MEMBER 0.00 (6) (7) (8) (9) (10)(11)(12)(13)(14)(15)(16)

ra	rt VII Section A. Officers	, Directors, Trus	stees	5, NE	y Ei	при	yees	, ar	id Highest Compensated	Employees (continued)				
(A) Name and Title		(B) (C) Average Position (check all that apply hours per							(D) Reportable compensation	(E) Reportable compensation from		(F) Estimated amount of		
		week (describe hours for related organizations in Schedule O)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations)	
(17)														
(18)														
(19)				:										
(20)			-		-	-								
(21)														
(22)														
(23)														
(24)							\vdash							
(25)			-											
(26)			-											
(27)							-							
(28)														
1b	Sub-total	<u> </u>	<u></u>	<u></u>			<u> </u>							
c	Total from continuation shee	ets to Part VII, S	ectio	on A				>						
d 2	Total (add lines 1b and 1c) Total number of individuals (in	actuding but not	ımıtc	ed to	thos	عرا م	ted s	hov	e) who received more than	\$100 000 in				
	reportable compensation from	_			1103	JC 113	ncu a	DOV	c) who received more than	\$100,000 M				
												Ye	s No	
3	Did the organization list any for employee on line 1a? If "Yes,"								oyee, or highest compensa	ted		3	x	
4	For any individual listed on lin	e 1a, is the sum	of re	port	able	con	npens	atio						
	organization and related organization	nizations greater	thar	1 \$15	50,00	007	If "Ye	s," (complete Schedule J for su	ch		4	x	
5	Did any person listed on line 1									r ındıvıdua l			32	
	for services rendered to the o		es,"	com	plet	e Sc	hedu	ie J	for such person			5	X	
1	Complete this table for your fi compensation from the organ	ve highest comp	ensa	ited	ınde	pend	dent o	cont	ractors that received more	than \$100,000 of				
		(A) i business address							Descrip	(B) blion of services		(C Comper) nsation	
								_						
										. <u>.</u>				
2	Total number of independent received more than \$100,000		_						se listed above) who	0				
DAA	TOUCHEG THOIC HAIL \$100,000	iii compensatioi	, 1101	(116	JOIL	, u 1112	.aciOi					Form 95	(2010)	

Pa	rt V	III Statement of Reve	nue						
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
र र	1a	Federated campaigns	1a				70701140		
ran		Membership dues	1b				1		
BE S		Fundraising events	1c						
# al		Related organizations	1d						
S,E		Government grants (contributions)	1e		11,050		1		
Por		All other contributions, gifts, grants,							
ğ		and similar amounts not included above	1f		1,700				
E S	a	Noncash contributions included in lines 1a-		 \$					
SP	_	Total. Add lines 1a-1f			▶	12,750			
Program Service Revenue Contributions, gifts, grants		n Total. Add lines Ta-Ti							
le l	2a	SERVICE CONTRACT-CI	TY OF	RS		23,748	23,748		
8	b	SALES OF MERCHANDIS	E, AD	VERTI		401	401		
je	С		•						
Ser	d								
a	е								
g	f	All other program service reve	nue						
٩	g	Total Add lines 2a-2f			▶	24,149			<u> </u>
	3	Investment income (including	dıvıder	nds, intere	est,			1	
		and other similar amounts)			>	173	173	<u> </u>	
	4	Income from investment of tax	-exem	pt bond p	roceeds 🕨				
	5	Royalties			•				
		(ı) Real		(H) F	Personal				
	6a	Gross Rents							
	b	Less rental exps							
	С	Rental inc or (loss)							
	d 7a	Net rental income or (loss) Gross amount from (1) Security							
	10	sales of assets (i) Securities	S	(11)	Other				
		other than inventory							
	b	Less cost or other							
		basis & sales exps		ļ. ———					
		Gain or (loss)				}			
	d	Net gain or (loss)					:	···	
ne	8a	Gross income from fundraising eve	nts						
le/		(not including \$							
Re		of contributions reported on line 1c							
Other Revenu		See Part IV, line 18 Less direct expenses	a b						
₹		Net income or (loss) from fund		L	•				
		Gross income from gaming activities		y CYCINS					
	34	See Part IV, line 19	a						
	ь	Less direct expenses	b						
		Net income or (loss) from gan		tivities	>				
	l	Gross sales of inventory, less			· · ·				
	,	returns and allowances	а						
	ь	Less cost of goods sold	b						
		Net income or (loss) from sale	s of in	ventory	•				
		Miscellaneous Revenue			Busn Code				
	11a	RENEWAL BALL/CHOC FE	STIVA	L		44,807	44,807		
	b	REIMBURSEMENTS				1,698	1,698		
	С								
	d	All other revenue							
	е	Total. Add lines 11a-11d			•	46,505			
	12	Total revenue. See instruction	ns		>	83,577	70,827	0	0

Form 990 (2010)

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)

Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	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	İ			
3	Grants and other assistance to governments,				······································
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				·
8	Pension plan contributions (include section 401(k)		-		
	and section 403(b) employer contributions)		ĺ		
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				,
	Management				
b	Legal	550		550	
	Accounting	1,817		1,817	
d	Lobbying	_ / ·			
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	2,000	2,000		
12	Advertising and promotion	1,752	1,752		
13	Office expenses	4,027	4,027		
14	Information technology	7			
15	Royalties				
16	Occupancy				-
17	Travel	793		793	**
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	99	99		
23	Insurance	716	716		
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24f If				
	line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O)				
а	PRIZES, GRANTS TO OTHERS	1,843	1,843		
b	SUPPLIES	1,185	1,185		
С	FACILITY EXPENSES	861	861		
d	STAFF DEVELOPMENT	362		362	
e	LICENSES, PERMITS	130		130	
f	All other expenses	8	8		
25	Total functional expenses. Add lines 1 through 24f	16,143	12,491	3,652	0
26	Joint costs. Check here ▶ ☐ If following	1			
	SOP 98-2 (ASC 958-720) Complete this line				
	only if the organization reported in column				
	(B) joint costs from a combined educational campaign and fundraising solicitation				
	F - 19 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	·			000

Pa	rt X	Balance Sheet		 		Т	(0)
	•				(A) Beginning of year	}	(B) End of year
	1	Cash—non-interest bearing				1	
		Savings and temporary cash investments		Ţ	119,485	2	93,343
		Pledges and grants receivable, net		Ī	, , , , , , , , , , , , , , , , , , ,	3	
		Accounts receivable, net		ſ		4	·
		Receivables from current and former officers, directors	, trustees, key	ſ			
		employees, and highest compensated employees. Con					
		Schedule L	•	İ		5	
	6	Receivables from other disqualified persons (as define	d under section				
		4958(f)(1)), persons described in section 4958(c)(3)(B)					
ĺ		employers and sponsoring organizations of section 50					
		employees' beneficiary organizations (see instructions]	6	
ets	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use			1,325	8	
₹	9	Prepaid expenses and deferred charges		Ī		9	
	10a	Land, buildings, and equipment cost or					
		other basis Complete Part VI of Schedule D	10a 176	5,795			
	b	Less accumulated depreciation	10b	197	75,480	10c	176,598
- 1		Investments—publicly traded securities				11	
Ì	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11		Ì		13	
ĺ	14	Intangible assets			14		
	15	Other assets See Part IV, line 11		•		15	
	16	Total assets. Add lines 1 through 15 (must equal line		196,290	16	269,941	
\neg	17	Accounts payable and accrued expenses				17	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
ဖွ	21	Escrow or custodial account liability Complete Part IV	of Schedule D			21	
:≝	22	Payables to current and former officers, directors, trus					
Liabilities		employees, highest compensated employees, and dis					
<u>.</u>		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrelated th	ird parties			23	
	24	Unsecured notes and loans payable to unrelated third				24	
	25	Other liabilities Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			0	26	0
ŝ		Organizations that follow SFAS 117, check here ▶	X and complete				
or Fund Balances		lines 27 through 29, and lines 33 and 34.					
<u> a</u>	27	Unrestricted net assets			31,290		77,928
B	28	Temporarily restricted net assets			90,000		117,013
pu	29	Permanently restricted net assets		75,000	29	75,000	
Fu		Organizations that do not follow SFAS 117, check h					
៑		complete lines 30 through 34.					
S	30	Capital stock or trust principal, or current funds				30	
set	31	Paid-in or capital surplus, or land, building, or equipme	ent fund			31	
ΑS	32	Retained earnings, endowment, accumulated income,				32	
Net Assets	33	Total net assets or fund balances			196,290		269,941
ž	34	Total liabilities and net assets/fund balances			196,290	34	269,941

Form **990** (2010)

orn	1 990 (2010) ROCK SPRINGS RENEWAL FUND, INC. 20-5196877			Page	e 12			
Pa	art XI. Reconciliation of Net Assets							
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>						
1	Total revenue (must equal Part VIII, column (A), line 12)	111	٤	33,5	77			
2	Total expenses (must equal Part IX, column (A), line 25)	2		16,143				
3	Revenue less expenses Subtract line 2 from line 1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		57,4 96,2				
5	Other changes in net assets or fund balances (explain in Schedule O)	5		6,2				
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,			<u> </u>	-			
Ū	column (B))	6	26	59,9	41			
Ps	art XII Financial Statements and Reporting			,,,	<u></u>			
	Check if Schedule O contains a response to any question in this Part XII							
	Officer in deficació de contains a response to any question in this i art XII			Yes	No			
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			163	-110			
•	If the organization changed its method of accounting from a prior year or checked "Other," explain in		-					
	Schedule O							
22	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	-	Х			
b			2b		$\frac{\mathbf{x}}{\mathbf{x}}$			
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		20					
·	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Ì				
	If the organization changed either its oversight process or selection process during the tax year, explain in		26					
	Schedule O							
	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were							
u	issued on a separate basis, consolidated basis, or both							
2-				İ				
Зa	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		3-	1				
L	the Single Audit Act and OMB Circular A-133?		3a	-+				
a	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b	1				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			000				
			Form	990 (2010)			

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

Reason for Public Charity Status (All organizations must complete this part) See instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

Part I

ROCK SPRINGS RENEWAL FUND, INC.

Employer identification number

20-5196877

The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). |X| An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4) 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c | Type III-Functionally integrated Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the a following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (III) below, the governing body of the supported organization? 11g(ı) (ii) A family member of a person described in (i) above? 11g(n) 11g(m) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (vi) Is the (VII) Amount of (v) Did you notify (I) Name of supported (II) EIN (III) Type of organization (IV) Is the organization the organization in organization in col (described on lines 1-9 in col (i) listed in your support organization col (I) of your (i) organized in the governing document? above or IRC section. support? US? (see instructions)) No Yes No (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2010

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support							-
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	,	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")		192,832	30,238	83,008	12	,750	318,828
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total Add lines 1 through 3		192,832	30,238	83,008	12	,750	318,828
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)			1				180,044
6	Public support. Subtract line 5 from line 4							···
	tion B. Total Support		·			··· -		138,784
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	$\overline{}$	(f) Total
7	Amounts from line 4	(4) 200	192,832	30,238	83,008	. , ,	,750	318,828
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		221	636	83,008		,730	857
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10			ŀ				319,685
12	Gross receipts from related activities, etc	(see instructions)	•				12	125,380
13	First five years If the Form 990 is for the	organization's first	, second, third, fou	rth, or fifth tax year	r as a section 501	(c)(3)		
	organization, check this box and stop here	e						•
Sec	tion C. Computation of Public Su	ipport Percent	tage					
14	Public support percentage for 2010 (line 6	, column (f) divided	d by line 11, columi	n (f))			14	43 41%
15	Public support percentage from 2009 Sche					Į	15	40 90%
16a	33 1/3% support test—2010. If the organi	zation did not ched	k the box on line 1	3, and line 14 is 33	3 1/3% or more, ch	neck this		_
	box and stop here The organization quali	fies as a publicly s	upported organizat	ion				▶ [X]
b	33 1/3% support test—2009. If the organi	zation did not ched	ck a box on line 13	or 16a, and line 15	is 33 1/3% or mo	re,		
	check this box and stop here. The organiz	ation qualifies as a	a publicly supported	d organization				▶ □
17a	10%-facts-and-circumstances test—201	-						
	10% or more, and if the organization meet							
	Part IV how the organization meets the "fa organization		·	·				▶ []
þ	10%-facts-and-circumstances test—200	•				line		
	15 is 10% or more, and if the organization			·	•			
	Explain in Part IV how the organization me supported organization	ets the "facts-and-	-circumstances" tes	st The organization	n qualifies as a pu	blicly		> []
18	Private foundation. If the organization did instructions	not check a box o	n line 13, 16a, 16b	, 17a, or 17b, chec	ck this box and see	e		▶ □

Page 3

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support			<u> </u>	<u> </u>	,	
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")				<u>-</u>		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from				ŧ		
	line 6)		<u> </u>	<u> </u>	<u> </u>	<u> </u>	
	tion B. Total Support			T		1	
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6					 	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the	organization's firs	t, second, third, fo	urth, or fifth tax ye	ar as a section 50	1(c)(3)	
	organization, check this box and stop her	e					>
Sec	tion C. Computation of Public Su	upport Percen	tage				
15	Public support percentage for 2010 (line 8	, column (f) dıvıde	d by line 13, colun	nn (f))		15	%
16	Public support percentage from 2009 Sch					16	%%
<u>Sec</u>	tion D. Computation of Investme						
17	Investment income percentage for 2010 (I			3, column (f))		17	%
18	<u> </u>						%
19a	33 1/3% support tests—2010. If the organ						_
	17 is not more than 33 1/3%, check this be	•	-				
b	33 1/3% support tests—2009. If the organ						
20	line 18 is not more than 33 1/3%, check the Private foundation. If the organization did						
20	i i ivate iounudiion. Il tile oludiiization ulo	FINDL CHECK & DUX I	,,, m,,, i+, i3a, Ul	TOD, CHECK HIS DO	六 はいは さしし けらいびしし		- 1

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public

Inspection

Employer identification number Name of the organization 20-5196877 ROCK SPRINGS RENEWAL FUND, INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I 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) 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a 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 Tax Year Total number of conservation easements. 2a 2b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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 Yes No violations, and enforcement of the conservation easements it holds? 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 170(h)(4)(B) 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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 (ASC 958), 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 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Sche	dule D (Form 990) 2010 ROCK SPRIN	GS RENEWAL	FUND,	INC.		20-519	6877			Page 2
Pa	rt III Organizations Maintaining	Collections of Ar	t, Historic	al Treas	ures,	or Other S	imilar As	ssets ((continue	
3	3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)									
а	Public exhibition	d 📗 Loa	n or exchang	e programs	s					
b	Scholarly research	e 🗌 Otho	er							
С	Preservation for future generations									
4	Provide a description of the organization's colle XIV	ections and explain ho	w they furthe	r the organ	ization's	s exempt purp	ose in Par	t		
5	During the year, did the organization solicit or r	eceive donations of ar	t, historical ti	easures, o	r other	sımılar				
	assets to be sold to raise funds rather than to be								Yes	No
Pa	Int IV Escrow and Custodial Arrai line 9, or reported an amoun			_	ition a	nswered "`	Yes" to F	orm 9	90, Part I	V,
1a	Is the organization an agent, trustee, custodiar	or other intermediary	for contribut	ons or othe	er asset	s not				_
	included on Form 990, Part X?								Yes	No
b	If "Yes," explain the arrangement in Part XIV at	nd complete the follow	ing table						. <u>-</u> .	
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
	Did the organization include an amount on For	m 990, Part X, line 213	>						Yes	No
	If "Yes," explain the arrangement in Part XIV			1 41/ 21 -	<u> </u>	- 000 D- i	11.7	40		
Pa	ert V Endowment Funds. Comple					•	T			
		(a) Current year	(b) Pric	or year	(c) Iw	o years back	(d) Three ye	ars back	(e) Four yea	ars back
	Beginning of year balance	,								
b	Contributions									
С	Net investment earnings, gains, and									
4	losses Crapta or cabalarahan									
	Grants or scholarships									
E	Other expenditures for facilities and			ĺ						
f	programs Administrative expenses									
g	End of year balance						<u> </u>			
2	·	and halance hold as		·	····		L			
- а										
	Permanent endowment ▶ %	~~								
	Term endowment ▶ %									
	3a Are there endowment funds not in the possession of the organization that are held and administered for the									
	organization by Yes No									
	(i) unrelated organizations								3a(ı)	
	(ii) related organizations								3a(II)	
b	If "Yes" to 3a(ii), are the related organizations I	isted as required on S	chedule R?						3b	
4	Describe in Part XIV the intended uses of the c									
Pa	ert VI Land, Buildings, and Equip	ment. See Form	990, Part	X, line 10	0.					
	Description of investment	(a) Cost or other basis (investment)	s (b) Co	ost or other b (other)	oasis	(c) Accur deprec			(d) Book valu	ie
1a	Land									
b	Buildings			176,	217				176	,217
С	Leasehold improvements									
d	Equipment				578		19'	7		381
e	Other									
Total	I. Add lines 1a through 1e (Column (d) must equ	ual Form 990, Part X,	column (B), I	ine 10(c))			•	•	176	,598

Schedule D (Form 990) 2010

DAA

Part VII	Form 990) 2010 ROCK SPRINGS RENEW. Investments—Other Securities. See Form		20-5196877 Page 3
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial	derivatives		
· ·	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D) (E)			
(E) (F)			
(G)			
(H)			
(1)			
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)	>	
Part VIII	Investments—Program Related. See For	m 990, Part X, line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6) (7)			
(8)		+	
(9)			
(10)			
	nn (b) must equal Form 990, Part X, col (B) line 13)	>	
Part IX	Other Assets. See Form 990, Part X, line	15	
	(a) Descripti	on	(b) Book value
(1)	- "Tender on a Blad"		
(2)			
(3)		··········	
(4)			
(5)			
(6)			
(8)			
(9)			
(10)			
	nn (b) must equal Form 990, Part X, col (B) line 15)		>
Part X	Other Liabilities. See Form 990, Part X, I	ine 25	
1.	(a) Description of liability	(b) Amount	
(1) Federa	I income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
<u>(9)</u>			
(10)			
(11)	nn (b) must equal Form 990, Part X, col (B) line 25)	>	
	SC 740) Footnote In Part XIV, provide the text of the foot		tatements that reports the
	s liability for uncertain tax positions under FIN 48 (ASC 7-		·
	4		

Sche	dule D (Form 990) 2010 ROCK SPRINGS RENEWAL FUND, I	NC.	20-519687	7	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 t	to Audite	d Financial Statem	ents	
1 ·	Total revenue (Form 990, Part VIII, column (A), line 12)			1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4 through 8			9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	d 9		10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statem	nents Wit	h Revenue per Ret	urn	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c		•	
d	Other (Describe in Part XIV)	2d		ļ	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return					
1	Total expenses and losses per audited financial statements		1	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)			5	

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 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 part to provide any additional information

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

ROCK SPRINGS RENEWAL FUND, INC.

Employer identification number 20-5196877

Form 990 - Organization's Mission or Most Significant Activities
TO SERVE AS A FUNDRAISING ORGANIZATION TO SOLELY BENEFIT
THE LAWFUL PRUPOSES AND GOALS OF THE ROCK SPRINGS RENEWAL
AGENCY, BY SUPPLEMENTING THE BUDGET OF THAT AGENCY TO ALLOW
IT TO COMPLETE ITS URBAN RENEWAL PLAN FOR THE CITY OF ROCK
SPRINGS, WYOMING.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 REVIEWED AT REGULAR BOARD MEETING.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Form **4562**

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions

► Attach to your tax return.

OMB No 1545-0172 **2010**

ZUIU

Name(s) shown on return Identifying number ROCK SPRINGS RENEWAL FUND, INC. 20-5196877 Business or activity to which this form relates Indirect Depreciation Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I 500,000 1 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2 2,000,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 6 (a) Description of property (b) Cost (business use only) (c) Elected cost Listed property. Enter the amount from line 29 7 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2009 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 13 Note. Do not use Part II or Part III below for listed property. Instead, use Part V Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election 15 99 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Do not include listed property) (See instructions) Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2010 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (f) Method (g) Depreciation deduction (a) Classification of property placed in (e) Convention (business/investment use period service only-see instructions) 19a 3-year property 5-year property С 7-year property 10-year property 15-year property 20-year property S/L 25 yrs 25-year property 27 5 yrs S/L h Residential rental MM property 27 5 yrs MM S/L MM S/L 39 yrs Nonresidential real property MM S/L Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs S/I b 12-year S/L 40 yrs MM 40-year Summary (See instructions) Part IV 21 21 Listed property Enter amount from line 28 Total, Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 22 22 and on 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

23

23

RSRF BOARD

Members

MCITIDEIS	
Jana Pastor, President	Glennise Wendorf, City Council Liaison
211 College Court	508 Independence Circle
Rock Springs, WY 82901	Rock Springs, WY 82901
307-382-1666	307-382-5555
jpastor@wwcc.wy edu	Wendorf@wyoming.com
Paula Wonnacott, Treasurer	Richard Leach, Ex-officio
711 C Street	P.O. Box 1907
Rock Springs, WY 82901	Rock Springs, WY 82901
307-362-7452	817-996-0825
Paulaace1@msn.com	raleach@wyoming com
Jack Costantino, Member	Open Seat, Ex-officio
1317 Virginia	Open Seat, Ex-onicio
Rock Springs, WY 82901	
307-352-0407	
Jack costantino@rsnb com	
dan costantino e i sino com	
Rennard Jensen, Member	Open Seat, Ex-officio
412 Soulsby Street	
Rock Springs, WY 82901	
307-362-7374	
randcjensen@sweetwaterhsa.com	
John Nootz, Member	
601 North Front Street	
Rock Springs, WY 82901	
307-362-5601	
<u>inootz@1stbank-online com</u>	

^{***} Board Meeting is scheduled the second Monday of every month at 5pm URA office 450 South Main Street

ARTICLES OF INCORPORATION

FOR

ROCK SPRINGS RENEWAL FUND, INC.

KNOW ALL MEN BY THESE PRESENTS: That we, the undersigned, desiring to form a non-profit corporation for the purposes hereinafter set forth and in conformity with the laws of the State of Wyoming, do hereby voluntarily associate ourselves together and make this written Articles of Incorporation in duplicate and do hereby certify:

ARTICLE I NAME

The name of the corporation shall be ROCK SPRINGS RENEWAL FUND, INC., a Wyoming non-profit organization.

ARTICLE II DURATION

The term of existence of said corporation shall be perpetual.

ARTICLE III PURPOSES AND POWERS

- A. This corporation is a public benefit corporation.
- B. The exclusive purposes for which the corporation is organized are to raise and spend funds for the development, redevelopment, and revitalization of projects and properties within the area of operations for the City of Rock Springs Urban Renewal Agency of Rock Springs, Wyoming, said area of operation being the City of Rock Springs plus five (5) miles in each direction. The corporation shall raise and spend funds for any purpose that can be done in conjunction with facilitating the goals and objectives of the City of Rock Springs Urban Renewal Agency.
- C. This corporation is expressly precluded from engaging in any activity that is not furtherance of the purposes set forth in paragraph B above and is expressly prohibited from operating to support or benefit any organization other than the publicly supported organization specified in paragraph B above.

ARTICLE IV CONDUCT OF BUSINESS

The organization and internal affairs of the corporation shall be controlled by and vested in the Board of Directors of said corporation, which Board shall consist of the number of Directors specific in the By-laws of said corporation, provided, however, said number shall not be exceed fifteen (15); and said Board of Directors shall be selected in the manner and for the terms provided in the By-laws of said corporation. No substantial part of the activities of the corporation shall be the carrying on of propaganda, nor otherwise attempting to influence legislation, and the corporation shall not participate in , nor intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office

ARTICLE V DISTRIBUTION OF ASSETS UPON DISSOLUTION

In the event of dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(iii) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the City of Rock Springs for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposed or to such organization or organization so as said Court shall determine which are organized and operated exclusively for such purposes.

ARTICLE VI NET EARNINGS

No part of the net earnings of the corporation shall inure to the benefit of, nor be distributable to its Directors or officers except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article III hereof. Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under section 501(c)(iii) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a corporation, contributions to which are deductible under Section 170(c)(iii) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

ARTICLE VII ACCEPTANCE OF PROPERTY

The directors may receive and accept property, whether real, personal or mixed, by way of gift, bequest, or devise, from any person, firm, trust, or corporation, to be held, administered, and disposed of in accordance with and pursuant to the provision of these Articles; but no gift, bequest or devise of any such property shall be received and accepted if it is conditions or limited in any manner.

ARTICLE VIII MEMBERSHIP

The corporation shall have no members.

ARTICLE IX INITIAL REGISTERED OFFICE AND AGENT

The address of the corporation's initial registered office shall be 450 South Main Street, Rock Springs, Wyoming, 82901, and its initial registered agent as such address shall be LISA MUELLER.

ARTICLE X NON-STOCK CORPORATION

This corporation is not organized for a pecuniary profit. It shall not have any power to issue certificates of stock or declare dividends, and no part of its net earnings shall inure to the benefit of any Director or individual. The corporation shall be authorized and empowered only to pay reasonable compensation for services rendered and to make payments and distributions on furtherance of the purposed set forth hereinabove. Notwithstanding any other provision of the these Articles, this corporation shall not, except to an insubstantial degree, engage in any activities or exercise any powers that are not in furtherance of the purposes of this corporation.

ARTICLE XI DIRECTORS

The directors of the corporation shall be the appointed members of the City of Rock Springs Urban Renewal Agency. The names and addresses of the initial Directors forming this corporation are:

NAME

ADDRESS

JANA PASTOR	211 College Court, Rock Springs, Wyoming 82901
LYNNE DEMSHAR	1552 Walnut Street, Rock Springs, Wyoming 82901
PAULA WONNACOTT	711 C Street, Rock Springs, Wyoming 82901
RENNARD JENSEN	412 Soulsby, Rock Springs, Wyoming 82901
JACK COSTANTINO	1317 Virginia, Rock Springs, Wyoming 82901

day of	this Articles of Incorporation this
JANA PASTOR	LYMNE DEMISHAR
Paula Wonnacott	Rennard Jensen RENNARD JENSEN