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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. A For the 2010 calendar year, or tax year beginning and ending

\sim	01 (11)	2010 Guiding your or tax your boginning		
В	Check if	C Name of organization	D Employer identifi	cation number
Г	Addre			
片	lchang Name chang	Borne Business As	82-0	417200
F	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/s		•••
F	Termi	,)472-5250
F	⊒ated]Amen _return		G Gross receipts \$	759,068.
	Applic		H(a) is this a group re	
	pendi	F Name and address of principal officer KAREN SANDER	for affiliates?	Yes X No
		720 W IDAHO STREET, BOISE, ID 83702	H(b) Are all affiliates inc	luded? Yes No
	Гах-ех	empt status 501(c)(3)X 501(c)(6) ◀ (insert no.) 4947(a)(1) or	527 If "No," attach a	list (see instructions)
J	N ebsi	e: > WWW.DOWNTOWNBOISE.ORG	H(c) Group exemptio	n number 🕨
		organization: X Corporation	ear of formation: 1987 N	A State of legal domicile: ID
Pá	art I	Summary		
a)	1	Briefly describe the organization's mission or most significant activities PROMOTE	AND MAINTAIN	THE
Š		DOWNTOWN BUSINESS DISTRICT		
ř	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of n	nore than 25% of its net as	ssets
Š	3	Number of voting members of the governing body (Part VI, line 1a)	3	34
<u>ග</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	33
es	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	16
Activities & Governance	6	Total number of volunteers (estimate if necessary)	6	0
	7 a	Total unrelated business revenue from Pan VIII, coppe Coping 2	7a	0.
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
		Contributions and grants (Part VIII, line 1h) (MAY 16 201)	Prior Year	Current Year
ē	8	Contributions and grants (Part VIII, line 1h) က MAY 1 6 2011 ပို	76,567.	32,927.
Revenue		Program service revenue (Part VIII, line 2g)	690,446.	639,105.
		Investment income (Part VIII, column (A), lihes 3, 17 17 17	956.	704.
	l .	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	69,008.	86,332.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	836,977.	759,068.
	l	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	l	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
ses	l	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	194,874.	190,842.
Expenses	1	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
×	I	Total fundraising expenses (Part IX, column (D), line 25)	C12 401	
_	I	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	613,401.	590,045.
	I	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	808,275.	780,887.
- <u>ss</u>		Revenue less expenses Subtract line 18 from line 12	28,702.	-21,819.
Net 4556ts or Fund Balances		Total access (Dally L. 40)	Beginning of Current Year	End of Year
Baile	20	Total assets (Part X, line 16)	274,523.	259,116.
a se	21	Total liabilities (Part X, line 26)	34,544. 239,979.	40,956. 218,160.
	ırt II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block	433,313.	210,100.
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements and to the hest of my	knowledge and helief it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of which prep		A Kilowieuge alla Dellei, it is
<u></u>	COLLEC	t and complete. Declaration of preparer (other than officer) is based on an information of which prep	5-10-2	2011
<u>)</u> Sigi		Signature of officer	Date	1 1
Her		KAREN SANDER, EXECUTIVE DIRECTOR		
		Type or print name and title		
Paid		Print/Type preparer's name Preparer's signature	Date Check	PTIN
D Paid		KELLY D. SONNICHSEN, CPA MILL Sonnice	self-employer	<u>-</u>
	arer	Firm's name TRAVIS JEFFRIES, P.M.	Firm's EIN	
	Only	Firm's address 590 W WASHINGTON SX		
-	-	BOISE, ID 83702-5953	Phone no (208)345-5383
Mav	the IF	S discuss this return with the preparer shown above? (see instructions)	,	X Yes No
	01 02-2		613	Form 990 (2010)
			015	`
			(J

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Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission PROMOTE AND MAINTAIN THE DOWNTOWN BUSINESS DISTRICT.		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O	. Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
4	If "Yes," describe these changes on Schedule O Describe the exempt purpose achievements for each of the organization's three largest program services by ex Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a		evenue \$	'N)
4b	(Code) (Expenses \$276,259. including grants of \$) (RODE ASSOCIATION'S SECONDARY PROGRAM SERVICE IS TO ASSISTIMPROVEMENTS AND MAINTENANCE PROJECTS FOR THE BUSINESS DISTRICT.)
		-	
1c	(Code) (Expenses \$ including grants of \$) (Re	evenue \$)
	Other recovery control (December & School de O.)		
	Other program services. (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	
l e	Total program service expenses ► 534, 297.	Form 9 9	90 (2010)

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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?	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			۱
	public office? If "Yes," complete Schedule C, Part I	3		X
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		
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 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		X_
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	 		Δ_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete 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	-		
9	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?	<u> </u>		_ _
10	If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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," complete Schedule D,			
_	Part VI	11a	X	
ь	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	11b		X
С	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	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 reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
f	· · · · · · · · · · · · · · · · · · ·			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		. ,	
_	Schedule D, Parts XI, XII, and XIII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	406		X
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		$\frac{x}{x}$
13 140	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,	140		
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	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			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		ļ	
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		<u> X</u>
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		

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Part IV Checklist of Required Schedules (continued)

			res	NO
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations 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 on Part IX,			7.7
	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	00		Х
04-	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
248	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	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		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			_
Ŭ	any tax-exempt bonds?	24c		
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		
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		
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			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete		Ì	
	Schedule L, Part III	27		_ <u>X</u> _
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)			v
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	28b		
С	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	ļ	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	}	Х
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	ı		
	Schedule N, Part II	32		<u>X</u> _
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		<u> X</u>
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		<u> </u>
35	is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	-	<u>X</u>
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
00	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes X No	']		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	26		
27	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36	-+	
37	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 19?	<u> </u>		
~	Note. All Form 990 filers are required to complete Schedule O	38	\mathbf{x}	
		Form		2010)

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		1,00	1
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
·	(gambling) winnings to prize winners?	1c		
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	,,,		
20	filed for the calendar year ending with or within the year covered by this return 2a 16			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions)			
32	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	00		
74	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
h	If "Yes," enter the name of the foreign country:	7.0		
-	See instructions for 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
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		ŀ	
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 Occasional production of Form CCO. Part VIII, line 12 for multiple use of plub facilities.		ļ	
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	!	i	
1	Section 501(c)(12) organizations. Enter	Ì		
_	Gross income from members or shareholders Cross income from members or shareholders Line in the contract of		ļ	
D	Gross income from other sources (Do not net amounts due or paid to other sources against	l		
0-	amounts due or received from them) [11b] Canting 4047(-V4) and a property of the property of	40-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		
3	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
a	Note. See the instructions for additional information the organization must report on Schedule O.	154		
	Enter the amount of reserves the organization is required to maintain by the states in which the		ŀ	
J	organization is licensed to issue qualified health plans		- 1	
_	Enter the amount of reserves on hand	İ		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	\dashv	X
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14a		-41

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.

	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 1a 34	1		
b	Enter the number of voting members included in line 1a, above, who are independent 1b 3	3		
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	Does the organization have members or stockholders?	_6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
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 the year		i i	
	by the following			
а	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	1		
	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 Revenue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		<u>X</u>
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		37
	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40-	· •	
	Does the organization have a written conflict of interest policy? If "No," go to line 13 Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	12a	Х	
U	to conflicts?	12b	х	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120	<u> </u>	
	in Schedule O how this is done	12c		Х
13	Does the organization have a written whistleblower policy?	13	7	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		<u> </u>
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		<u>X</u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation		1	
	ın joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	1	
Sec.	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			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, ar	id finai	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 of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	ion. 🕨	_	
	KAREN SANDER - (208)472-5250	_		
	720 W IDAHO STREET, BOISE, ID 83702			

~		(0040)	
rom.	990	(2010)	

DOWNTOWN BOISE ASSOCIATION, INC.

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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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average		(C) Position			(D) Reportable	(E) Reportable	(F) Estimated		
Traine and Thie	hours per week (describe hours for related organizations in Schedule O)	rustee or director			that			compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
CHARLIE SCHMOEGER				X				0.	0.	0
PRESIDENT		Х		Δ.	H	-	-	0.	U •	0.
LEANN SANNES		X		x		İ		0.	0.	0.
IMMEDIATE PAST PRESIDENT		Α		^	\vdash			0.		<u>U•</u>
JOHN BERRYHILL		х		Х				0.	0.	0.
PRESIDENT-ELECT		Λ		Λ	\vdash			0.	0.	<u> </u>
KAREN SANDER EXECUTIVE DIRECTOR	40.00	x		X				70,974.	0.	7,160.
DAN WATTS	1000					_		, , , , , , , , , , , , , , , , , , , ,		7,2001
TREASURER		x		x				o.	0.	0.
KEN HOWELL										
LEGAL COUNSEL		x				İ		0.	0.	0.
LIL KUREK										
DIRECTOR AND EXECUTIVE COUNCIL		X						0.	0.	0.
JOHN CUNNINGHAM										
DIRECTOR AND EXECUTIVE COUNCIL		Х	<u> </u>					0.	0.	0.
ROCCI JOHNSON										
DIRECTOR AND EXECUTIVE COUNCIL		X						0.	0.	0.
SCOTT SCHOENHERR				l					_	_
DIRECTOR AND EXECUTIVE COUNCIL		Х						0.	0.	0.
GARY BENOIT										_
DIRECTOR	ļ	X			\blacksquare	_	\Box	0.	0.	0.
JEREMY MALONE										•
DIRECTOR		Х			\dashv			0.	0.	0.
GLEN SCHUMACHER, CPA		.						0	0	0
DIRECTOR		Х	-		\dashv	-	\dashv	0.	0.	0.
MARYANNE JORDAN		$ \mathbf{x} $		j				0.	о.	0.
ADVISOR MEMBER		Λ	一		_				0.	<u> </u>
VIC CONRAD		$ \mathbf{x} $						0.	0.	0.
DIRECTOR DUTT VICUIAN		21	\dashv	\dashv	\dashv		\dashv	<u></u>		
PHIL KUSHLAN EX-OFFICIO DIRECTOR		$ \mathbf{x} $						0.	0.	0.
JAN MILLER	 				\dashv					
EX-OFFICIO DIRECTOR		x	Ì	Ì				0.	0.	0.
DA SIFICIO DIRECTOR								<u> </u>		Form 990 (2010)

Part VII Section A. Officers, Directors, Tru	<u>ıstees, Key Eı</u>	mplo	oyee	s, a	nd l	High	<u>iest</u>	Compensated Employ	ees (continued)				
(A) (B)					C)			(D)	(E)			(F)	
Name and title	Average	Position (check all that apply)						Reportable Reportable				tımate	
	hours per	(C	heck	(all	that	app	oly)	compensation	compensation	ר		nount (of
	week (describe	ية			1			from	from related			other	4
	hours for	gie		İ		8		the organization	organizations (W-2/1099-MIS			pensa om the	
	related	lee or	ustee			ensati		(W-2/1099-MISC)	(44-27 1033-14110	~		anızatı	
	organizations	trus	nal tr		oyee	g	1	(2 /00000)			_	d relate	
	in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key emptoyee	Highest compensated employee	Former				orga	anızatı	ons
BILL CONNORS	, , , , , , , , , , , , , , , , , , ,												
EX-OFFICIO DIRECTOR		X			<u> </u>			0.		0.			0.
GREGG MIZUTA	ļ												
DIRECTOR		X		<u> </u>		_		0.		0.			0.
DAVID WALI													_
DIRECTOR		X	<u> </u>		_	_		0.		0.			0.
OFFICER KELLEY CLARK													_
ADVISOR MEMBER		X				-	_	0.		0.			0.
JOHN FRANDEN										ا ۾			_
ADVISOR MEMBER		X					<u> </u>	0.		0.			0.
CECE GASSNER		٦,											^
ADVISOR MEMBER		X		-		\vdash		0.		0.			0.
BRIAN BALLARD		x						0.		0.			0.
ADVISOR MEMBER		_				\vdash		0.		•			<u> </u>
MARGARET JOHNSON EX-OFFICIO DIRECTOR		x						0.		0.			0.
PATRICK RICE						-						-	
EX-OFFICIO DIRECTOR		x						0.		0.			0.
1b Sub-total								70,974.		0.		7,10	<u>50.</u>
c Total from continuation sheets to Part VI	I, Section A							0.		0.			0.
d Total (add lines 1b and 1c)						<u> </u>		70,974.		0.		7,10	<u> 50.</u>
2 Total number of individuals (including but n	ot limited to th	ose	liste	d at	oove	e) wh	no re	eceived more than \$100	,000 ın reportable				
compensation from the organization												1	<u>. 0</u>
										Г		Yes	No
3 Did the organization list any former officer,		stee	, key	em/	plo	yee,	or h	ighest compensated en	nployee on			ĺ	v
line 1a? If "Yes," complete Schedule J for s		ام م					4 ~+1-	or companyation from t	ha arganization	ŀ	3	-	<u>X</u>
4 For any individual listed on line 1a, is the su and related organizations greater than \$150	•		•					•	ne organization		4		х
5 Did any person listed on line 1a receive or a									dual for services	ŀ	-		
rendered to the organization? If "Yes," com					_		J.a.	ou organization or many	344, 10, 03, 1,003	İ	5		X
Section B. Independent Contractors			-										
Complete this table for your five highest continue to the stable pensated inc	depe	nde	nt c	ontr	acto	ors th	hat received more than	\$100,000 of comp	ensa	ition fr	om		
the organization NONE (A)	· · · · · · · · · · · · · · · · · · ·						Τ	(B)	····		(C	`	
Name and business	address							Description of se	ervices	Co		nsation	1
							\dashv						
			_										
							\top						
2 Total number of independent contractors (ii	ncluding but n	ot lir	nited	d to	thos	se lis	ted	above) who received m	ore than				
\$100,000 in compensation from the organiz)		·					

Pa	rt VI	II 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
ts t	1 a	Federated campaigns .	1a					
ran	b	Membership dues	1b					
s, g	С	Fundraising events	1c					
gift	d	Related organizations	1d					İ
s, imi	е	Government grants (contribut	tions) 1e					
itioi er s	f	All other contributions, gifts, gran	nts, and					
ib the		similar amounts not included abo	ove 1f	32,927.	1			
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in lines	s 1a-1f \$					
Co	h	Total. Add lines 1a-1f		<u> </u>	32,927.			1
				Business Code	220 007	220 007		
ice	2 a			900099	330,897.			
er.	b		<u> </u>	900099	294,233. 13,975.	294,233. 13,975.		
Program Service Revenue	C			900999	13,9/3.	13,9/3.		
gra	d			-				
Pro	e f	All other program service reve	enue	-				
	q			•	639,105.			
	3	Investment income (including	dıvıdends, ınt	erest, and				
		other similar amounts)		▶	704.	704.		
	4	Income from investment of ta	x-exempt bond	d proceeds 🕨				
	5	Royalties .		>				
			(i) Real	(ii) Personal				
	6 a							
	b	•						
	C	, ,						
	d -	, ,	(i) Consumting	. (v) Other				
	/ a	Gross amount from sales of assets other than inventory	(i) Securities	s (II) Other				
	ь	Less: cost or other basis						
		and sales expenses						
	С	Gain or (loss)			-			
		Net gain or (loss)		•	İ			
a	8 a	Gross income from fundraisin	g events (not					
nue		including \$	of	-				
3evi		contributions reported on line	1c). See					
Other Revenue		Part IV, line 18		a				
5	b	•		b				
	C	· · ·	=	•				
	9 a	Gross income from gaming ac Part IV, line 19	ctivities. See					
	b		•	а b				
	c		ning activities	D				
		Gross sales of inventory, less						
		and allowances		a				
Ì	b	Less: cost of goods sold		b				
	_ c	Net income or (loss) from sale	s of inventory	>				
		Miscellaneous Revenu		Business Code				
	11 a	CLEAN TEAM INCO		900099	46,224.	46,224.		
	ь		JKY	900099	12,375.	12,375.		
	C	ANNUAL MEETING	-	900099	9,830. 17,903.	9,830. 17,903.		
	d	All other revenue Total. Add lines 11a-11d	•	1 200033	86,332.	11,303.		
	40	Total severes Conjectivetions			759 068	726 141		

Form 990 (2010) DOWNTOWN BOIS Part IX Statement of Functional Expenses

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

	All other organizations must comp	olete column (A) but are			
	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				
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	78,134.		78,134.	
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	80,691.		80,691.	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	3,240.		3,240.	
9	Other employee benefits	14,049.		14,049.	
10	Payroll taxes	14,728.		14,728.	
11	Fees for services (non-employees).				
а	Management				
b	Legal	686.		686.	·····
С	Accounting	14,920.		14,920.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	11,678.		11,678.	
14	Information technology				
15	Royalties				
16	Occupancy	12,000.		12,000.	
17	Travel	3,361.		3,361.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials			1 645	
19	Conferences, conventions, and meetings	1,615.		1,615.	
20	Interest		_		
21	Payments to affiliates	F 70F		F 605	
22	Depreciation, depletion, and amortization	5,785.	-	5,785. 5,703.	
23	Insurance	5,703.		5,703.	
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 0.)				
а	CORE SERVICE EXPENSES	258,038.	258,038.		
b	EVENT EXPENSES	234,407.	234,407.		
С	GRANT EXPENSE	16,927.	16,927.		
d	GIFT CARDS	12,834.	12,834.		
е	PROGRAM EXPENSES	10,925.	10,925.		
f	All other expenses	1,166.	1,166.		
25	Total functional expenses. Add lines 1 through 24f	780,887.	534,297.	246,590.	0.
26	Joint costs. Check here ▶ ☐ If following 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				
	· · · · · · · · · · · · · · · · · · ·				Form 990 (2010)

Part X | Balance Sheet (B) End of year (A) Beginning of year 1 Cash - non-interest-bearing 1 116,047. 129,813. 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 3 126,434 129,368. Accounts receivable, net 4 4 Receivables from current and former officers, directors, trustees, key 5 employees, and highest compensated employees. Complete Part II 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 8 2,537. 1,327. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment, cost or other 148,079. 10a basis. Complete Part VI of Schedule D 136,915. 16,949. 11,164. 10b 10c b Less accumulated depreciation Investments - publicly traded securities 11 11 12 12 Investments - other securities. See Part IV, line 11 Investments - program-related See Part IV, line 11 13 13 Intangible assets 14 14 15 Other assets See Part IV, line 11 15 274,523. 259,116. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 28,441. 40,956 Accounts payable and accrued expenses 17 17 18 18 Grants payable 6,103. 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 iabilities 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 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities. Complete Part X of Schedule D 25 40,956. 34,544. 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 Bajances 234,062. 218,160. 27 27 Unrestricted net assets 5,917. Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 239,979. 33 218,160. Total net assets or fund balances 33 259,116. 274.523 Total liabilities and net assets/fund balances 34

Form **990** (2010)

Form	1990 (2010) DOWNTOWN BOISE ASSOCIATION, INC.	<u>82-</u>	<u>-041/200</u>	Pa	ge ı∠
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
		, ,			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>68.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>87.</u>
3	Revenue less expenses Subtract line 2 from line 1	3			<u> 19.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	23	<u>9,9</u>	<u>79.</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	21	<u>3,1</u>	<u>60.</u>
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response to any question in this Part XII .				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X_
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,	,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O).		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a	i l		
	separate basis, consolidated basis, or both		1 1		
	Separate basis X Consolidated basis Both consolidated and separate basis		1 1		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Aud	dit		
	Act and OMB Circular A·133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red aud	dit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		
			Form	∂90 (2010)

Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) (B) (C) (D) (E) (A) Position Reportable Reportable Estimated Name and title Average (check all that apply) compensation amount of hours compensation from related other from per organizations compensation the week Highest compensated employee (W-2/1099-MISC) from the individual trustee or director organization (W-2/1099-MISC) organization Institutional trustee and related Key employee organizations Former KIM THOMAS 0. 0. 0. Х EX-OFFICIO DIRECTOR BRUCE MACMAHON 0. 0. 0 DIRECTOR JENNIFER GRAVES 0. 0 0. X DIRECTOR PAULA FORNEY 0. 0. 0. DIRECTOR KELLEE SHARPLES 0 0. 0. DIRECTOR ALLEN IRELAND 0. 0. X 0 DIRECTOR KEVIN SETTLES 0. X 0 0. DIRECTOR JOEY PERRY 0. 0. 0. X DIRECTOR Total to Part VII, Section A, line 1c

SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form 990)

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.

2010
Open to Public Inspection

Name of the organization

Employer identification number

DOWNTOWN BOISE ASSOCIATION, INC. 82-0417200 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 Total number at end of year 1 Aggregate contributions to (during year) 2 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? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) 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 Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation 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)(i) Yes and section 170(h)(4)(B)(ii)? No 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. 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

		N BOISE AS) Page 2
Pa	rt III Organizations Maintaining (Collections of A	rt, His	storical Tr	easures,	or Oth	<u>er Simil</u>	ar Asse	ts (contin	nued)
3	Using the organization's acquisition, access	ion, and other recor	ds, ched	ck any of the	following th	nat are a s	ignificant	use of its	collection	items
	(check all that apply)									
а	Public exhibition	1	d 🖳	Loan or exc	hange prog	rams				
b	Scholarly research		e 🔲	Other						
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and expla	un how t	they further t	he organiza	tion's exe	mpt purpo	ose in Par	t XIV	
5	During the year, did the organization solicit of			-	=					
	to be sold to raise funds rather than to be m	aintained as part of	the orga	anization's c	ollection?				Yes	☐ No
Pai	rt IV Escrow and Custodial Arran	gements. Comp	lete if th	e organizatio	on answered	"Yes" to	Form 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Pa			•						
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	contribution	ns or other a	ssets not	included			
-	on Form 990. Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the f	ollowina	table:						
_		and compress and t	9						Amount	
С	Beginning balance						1c		7 4110 4111	
	A 11.		•				1d			
e	Distributions during the year						1e			
f	Ending balance						1f	***		·
-	Did the organization include an amount on F	orm 990 Part X line	212				<u> </u>		Yes	No
	If "Yes," explain the arrangement in Part XIV		, 21.						_ 162	
Pai			nswered	I "Yes" to Fo	rm 990 Par	t IV line 1	0			
		(a) Current year		Prior year	(c) Two year			eare hack	(a) Four v	pare hack
1a	Beginning of year balance	(a) Current year	(5)	nor year	(6) 1 110 9 60	ars back	(u) Thice y	Cars Dack	(e) rour y	tais back
	Contributions					- 1				
b	Net investment earnings, gains, and losses					-				
ن	Grants or scholarships		 		<u>. </u>	+				
ď	•		<u> </u>						_	
е	Other expenditures for facilities	li				}				
	and programs	<u> </u>								
	Administrative expenses		-							
g	End of year balance		l		<u> </u>					
2	Provide the estimated percentage of the year	r end balance held a								
	Board designated or quasi-endowment		_%							
ь	Permanent endowment	%								
		%								
3a	Are there endowment funds not in the posse	ssion of the organiz	ation th	at are held a	nd administ	ered for th	ne organiz	ation		
	by									es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
	If "Yes" to 3a(ii), are the related organizations	•							3b	
4 Do:	Describe in Part XIV the intended uses of the									
Par						1			_	
	Description of investment	(a) Cost or o		(b) Cost		, , ,	cumulate	d	(d) Book v	/alue
		basis (investr	ment)	basis (other)	dep	reciation			
	Land									
	Buildings .							_		
С	Leasehold improvements									
d	Equipment	148,	<u>079.</u>			1	<u> </u>	.5.	11	,164.
e	Other			_		<u> </u>				
<u>Total</u>	. Add lines 1a through 1e. (Column (d) must e	gual Form 990, Part	X, colur	nn (B), line 1	0(c))				11	,164.

Schedule D (Form 990) 2010

Sche	dule D (Form 990) 2010 DOWNTOWN BOISE ASSOCIATION				<u> </u>
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Final	ncial Sta	tements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		759,068.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		780,887.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		-21,819.
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		0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 an	d 9	10		-21,819.
	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Reve	nue per	Return	
1	Total revenue, gains, and other support per audited financial statements	**	<u> </u>	1	759,068.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	•			
a	Net unrealized gains on investments	2a			
h	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c		-	
d	Other (Describe in Part XIV)	2d		7	
	Add lines 2a through 2d				0.
3	Subtract line 2e from line 1			3	759,068.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				7357000
٠,	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b		-	
•	Add lines 4a and 4b	40	-	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	759,068.
	t XIII Reconciliation of Expenses per Audited Financial Statement	ents With Exp	enses pe		
1	Total expenses and losses per audited financial statements		<u> </u>	1	780,887.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Pnor year adjustments	2b		7	
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d		7	
_	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	780,887.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b		7	
	Add lines 4a and 4b	<u> </u>		4c	0.
_	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	780,887.
	t XIV Supplemental Information				
K, line	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III 22, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also comp. T. X., LINE 2: THE ASSOCIATION IS A NONPROFE	lete this part to pro	ovide any a	dditional inf GANIZA	ormation. ATION
	(C)(6). THE ASSOCIATION IS NOT A PRIVATE			UE COL	E SECTION
	ACCORDANCE WITH FASB ASC 740, THE ASSOCIATE			TED TH	EIR
	RATIONS AS OF DECEMBER 31, 2010 AS COMPARE	•			
API	LICATION FOR TAX-EXEMPT NOT-FOR-PROFIT STA	ATUS. THE	E EVAL	UATION	ALSO
CON	SIDERED THE POSSIBILITY OF TRANSACTIONS TH	AT MAY BE	SUBJ	ECT TO	INCOME
ב ביו	ON INRELATED BUSINESS INCOME. TAX POSITI	ONS CONSI	DERED	BUT	NOT

Schedule D (Form 990) 2010

Schedule D (Form 990) 2010 Part XIV Supplemental I	DOWNTOWN BO	DISE ASSO	CIATION,	INC.	82-04172	200 Page 5
LIMITED TO INCLUI		OCIATION'	S CHARACT	rerization	OF ITS	
ACTIVITIES AS REI	ATED OR UNREL	ነጥ የመመር ተ	TS EXEMP	P PITRPOSE	AND B) THI	~ ?
		-				
ASSOCIATION'S ALI						
RELATE TO ITS EXE	EMPT PURPOSE AN	ND THOSE	THAT COUL	LD BE CONS	IDERED UNRI	ELATED
BUSINESS INCOME.	UPON EVALUTA	ON, THE	<u>ASSOCIATI</u>	ON DOES NO	OT BELIEVE	THEY
HAVE ANY BUSINESS	ACTIVITIES IN	PLACE T	HAT WOULI	CAUSE THI	EIR TAX-EXE	MPT
NOT-FOR-PROFIT ST	ATUS TO NOT BE	SUSTAIN	ED UPON A	AUDIT, OR A	ACTIVITIES	THAT
WOULD BE SUBJECT	TO UNRELATED E	BUSINESS	INCOME TA	λΧ.		
						
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					<u> </u>	

SCHEDULE O

Supplemental Information to Form 990 or 990-EZ

(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

Department of the Treasury ► Attach to Form 990 or 990-EZ. Inspection Internal Revenue Service Name of the organization **Employer identification number** DOWNTOWN BOISE ASSOCIATION, 82-0417200 INC. FORM 990, PART VI, SECTION A, LINE 8B: THERE ARE NO OTHER COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY. FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 TAX RETURN WAS REVIEWED BY THE BOARD OF DIRECTORS AND APPROVED FOR FILING. FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST.

FOOTNOTES	STATEMENT 1
EVENT INCOME (PART VIII, LINE 2A)	
ALIVE AFTER FIVE	233,066.
CHRISTMAS IN THE CITY	7,300.
FALL FOR BOISE	6,436.
TWILIGHT CRITERIUM	62,330.
FIRST THURSDAY	700.
CINCO DE MAYO	1,393.
HOLIDAY TREE LIGHTING	7,831.
JAZZ ON THE GROVE	11,841.