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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 Open to Public

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

Inspection

A	For the	2010 calendar year, or tax year beginning	and ending		·
В	Check if applicable	C Name of organization		D Employer identific	ation number
Γ	Addre	S COLORADO GAMING ASSOCIATION			
Ī	Name chang			84-12	259092
	Initial return	Number and street (or P 0. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Termir ated	ZZS EADI TOTH AVENUE	260	303-2	237-5480
Į	Ameno	City or town, state or country, and ZIP + 4		G Gross receipts \$	558,759.
L	Applic tion pendir	DENVER, CO 80203		H(a) Is this a group ret	
	F	F Name and address of principal officer: LOIS A. RICE, CA	LE CO	for affiliates?	Yes X No
-	T	225 EAST 16TH AVENUE, SUITE 260, DEN		H(b) Are all affiliates inclu	
<u> </u>		empt status 501(c)(3) _X 501(c)(6) ◀ (insert no) 4947(a) e: ► WWW.COLORADOGAMING.COM	a)(1) or 52	-	ist (see instructions)
_		organization: Corporation Trust X Association Other	I Year	H(c) Group exemption	State of legal domicile: CO
<u>F</u>	Part I	Summary	L Cal	orioimaton 1330 W	otate of legal doffficile.
		Briefly describe the organization's mission or most significant activities: AD	VANCE II	NTERESTS OF C	CASINO
MANET AUG 3 0 20		INDUSTRY			
അ	E 2	Check this box Full if the organization discontinued its operations or d	Isposed of mor	e than 25% of its net ass	sets.
ري	§ 3	Number of voting members of the governing body (Part VI, line 1a)		3	12
4U.	g 4	Number of independent voting members of the governing body (Part VI, line	1b)	4	12
	<u>s</u> 5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	1
	6	Total number of volunteers (estimate if necessary)		6	0
\$	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
<u> </u>	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
SCANINED AUG	。	Contributions and grants (Dart VIII line 1b)	<u> </u>	Prior Year 0 .	Current Year 0 .
\\rac{1}{2}	9 B	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	<u> </u>	574,967.	558,088.
	10 10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		221.	271.
Ċ	ž 10 11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	39,545.	400.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line	12)	614,733.	558,759.
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.	
9	ខ្ល 15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5	-10)	121,893.	130,349.
	15 16a b	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
	ž b	Fotal fundraising expenses (Part IX, column (D), line 25)	<u> </u>	355 550	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<u> </u>	357,550.	364,008.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		479,443.	494,357.
=	<u>9</u> 19	Revenue less expenses. Subtract line 18 from line 22 CENTO	-	135,290.	64,402.
tso	Balances 20	Fotol coasts (Post V. Isos 16)		eginning of Current Year 545,493.	End of Year 609,895.
Asse	음 20 임 21	Fotal assets (Part X, line 16) Fotal liabilities (Part X, line 26)	5 ⊢	0.	000,000.
Net	⊏ 1	Net assets or fund balances. Subtract line 21 from line 20	[∦	545,493.	609,895.
		Signature Block ()GDEN. U	Ť ·		3,3,5 / 0,5 0
Ui	nder pena	ties of perjury declare that I have examined this return, including accompanying scho	edules and statem	ents, and to the best of my	knowledge and belief, it is
tre	je, correc	, and complete. Declaration of preparer (other than officer) is based on all information	of which preparei	r has any knowledge. 🖊	
-		Dryle Sice		8/9/	2011
	ign	Signature of officer		Date / /	
Н	ere	LOIS A. RICE, CAE, PRESIDENT Type or print name and title			
_				Date / Check	PTIN
D	.ia	Print/Type preparer's name BERT R. BONDI Preparer's signature O'WA	2: CAF	76/2. 11 -	J F110
	aid reparer	BERT R. BONDI Firm's name RUBINBROWN, LLP	U /1	self-employed Firm's EIN ▶	
	se Only	Firm's address 44 INVERNESS DRIVE EAST		THUI S EIN	
J.	J ,	ENGLEWOOD, CO 80112		Phone no 30	3-799-6826
M	av the IF	S discuss this return with the preparer shown above? (see instructions)		1	X Yes No
_	2001 02-2		uctions.	\cap	Form 990 (2010)

) (Revenue \$

Form 990 (2010)

494,356.

4e

(Expenses \$

Total program service expenses ▶

Form 990 (2010) COLORADO GAMING ASSOCIATION 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
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	<u> </u>	1	
	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	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		i i	
	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," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	ļ .		
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	١ ا	v	
	Part VI	11a	_X	
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	446		x
	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b		Δ.
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
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	116		
_	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		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
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		X
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		<u> </u>
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	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,			v
4-	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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	ا ہے ا		v
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		<u> </u>
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	 		 -
• •	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	''		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	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		
		Form 9	<u> </u>	010)

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			Yes	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, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1		
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	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 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		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial		ĺ	
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete	l		v
20	Schedule L, Part III	27		<u> </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)			
•	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	200	1	Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		$\frac{x}{x}$
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer.	200		
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		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			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-39 If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity?		1	
	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		X
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of		- 1	
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		i	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	_		
27	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	_	l	x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	37	\dashv	
<i>-</i>	Note. All Form 990 filers are required to complete Schedule O	38	x	
	Trade First Set siles are required to complete derivating of	Form S		04.0\

	990 (2010) COLORADO GAMING ASSOCIATION 84-1259	092	P	age 5
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	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			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 1	.		
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
ь	If "Yes," enter the name of the foreign country			
	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		X
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
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		Ĭ	
	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.		Į	
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		
10	Section 501(c)(7) organizations. Enter.			
а	Initiation fees and capital contributions included on Part VIII, line 12		ľ	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		i	
11	Section 501(c)(12) organizations. Enter		1	
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		i	
	amounts due or received from them)		- 1	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.		J	
b	Enter the amount of reserves the organization is required to maintain by the states in which the		- 1	
	organization is licensed to issue qualified health plans	- 1	-	
	Enter the amount of reserves on hand			₹₹
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>

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 12								
b	Enter the number of voting members included in line 1a, above, who are independent 1b 12			ł					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			ı					
	officer, director, trustee, or key employee?	2		Х					
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									
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								
	by the following:								
а	The governing body?	8a	X						
þ	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					
<u>Sec</u>	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		X					
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,		İ						
	and branches to ensure their operations are consistent with those of the organization?	10b	7,-						
	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	12a	x						
	Does the organization have a written conflict of interest policy? If "No," go to line 13								
D	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise								
_	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12b	-	<u> </u>					
·	in Schedule O how this is done	12c	1	X					
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					
	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		1						
	taxable entity during the year?	16a]	X					
b	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								
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, are	id fina	ncial						
	statements available to the public.								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization 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 person who possesses the books and records of the person who possesses the books are personally at the person of t	ion. 🕨	·						
	THE ORGANIZATION - 303-237-5480								
	225 EAST 16TH AVENUE, NO. 260, DENVER, CO 80203								

Part VIII 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.

Like 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)	(B)	(C)						(D)	(E)	(F)	
Name and Title	Average hours per week	-			that		ıly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other	
	(describe hours for related organizations in Schedule O)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
MICHAEL SMITH											
DIRECTOR	2.00	X	L_		L		L_	0.	0.	0.	
REGGIE FULLWOOD		i								_	
DIRECTOR	2.00	X					L_	0.	0.	0.	
SHANNON KEEL				1							
DIRECTOR	2.00	X					L.	0.	0.	0.	
BRIAN WATTS	}										
DIRECTOR	2.00	X						0.	0.	0.	
LISA BOYER											
DIRECTOR	2.00	X					L	0.	0.	0.	
LARRY HILL											
DIRECTOR	2.00	X						0.	0.	0.	
DAVID MINTER											
DIRECTOR	2.00	X						0.	0.	0.	
MARC MURPHY											
DIRECTOR	2.00	X						0.	0.	0.	
STAN POLITANO											
DIRECTOR	2.00	X						0.	0.	0.	
ERIC ROSE											
DIRECTOR	2.00	X				i '		0.	0.	0.	
MICKEY ROSENBAUM											
DIRECTOR	2.00	X			l		_	0.	0.	0.	
KEVIN WERNER								-			
DIRECTOR	2.00	X						0.	0.	0.	
LOIS RICE											
EXECUTIVE DIRECTOR	40.00			X				107,500.	0.	10,000.	

Pai	T VII Section A. Officers, Directors, Tru	ustees, Key E	mple	oyee	es, a	<u>ınd l</u>	High	nest	Compensated Employ	ees (continued	<u>) </u>			
	(A)	(B)			(0	C)			(D)	(E)			(F)	
	Name and title	Average			Pos				Reportable	Reportab	le	E	stimat	ed
		hours per	(c	hecl	∢ all	that	app	oly)	compensation	compensat		a	mount	of
		week (describe	ē						from	from relate			other	
		hours for	Individual frustee or director				, .		the	organizatio		1	npens	
		related	tee or	stee		l	nsate		organization (W-2/1099-MISC)	(W-2/1099-M	1150)	1	from th	
		organizations	trus	Institutional frustee	1	oyee	Highest compensated employee		(17 2/ 1033 141100)				ganıza nd rela	
		ın Schedule	wdua	atrite	į	Кеу етріоуее	hest c	Former				1	anızat	
		O)	直	IS	Officer	ē,	돌	휼				`		
		ļ	_	ļ	<u> </u>	ļ	<u> </u>	ļ				_		
						-								•
					_		_	_						
		1												
						<u> </u>				-		_		
		ļ				<u> </u>	_			<u> </u>				
					_									
			-			-	-	\vdash						
										-	_			
	Sub-total	l <u> </u>						L	107,500.		0.	1	0,0	00.
	Total from continuation sheets to Part VI	I. Section A							0.		0.	-	- , -	0.
	Total (add lines 1b and 1c)	.,							107,500.	 -	0.	1	0,0	00.
2	Total number of individuals (including but n	ot limited to th	ose	liste	ed at	oove	e) wt	no re		.000 in reportat	ole			
	compensation from the organization									,				1
3	Did the ergenization let any farmer officer	director or twi		رم دا				a., b		**!***			Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s		stee	, key	em	ibio	yee,	or n	ignest compensated en	nployee on		3		х
4	For any individual listed on line 1a, is the su		le cc	ompe	ensa	ation	anc	oth	er compensation from t	the organization	1			
	and related organizations greater than \$150											4		X
5	Did any person listed on line 1a receive or a							elate	ed organization or indivi	dual for service	s			
Sac	rendered to the organization? If "Yes," com tion B. Independent Contractors	plete Schedule	e J f	or su	ıch j	oers	on		 			5		<u> </u>
1	Complete this table for your five highest co	mpensated inc	depe	ende	nt c	ontr	acto	rs th	nat received more than	\$100,000 of co	mpens	ation	from	
	the organization NONE									·	<u>'</u>			
	(A) Name and business	address							(B) Description of se	ervices	l c)) eamo	C) nsatio	า
								1						
								+		··				
		·											_	
		·						+						
								\perp						
2	Total number of independent contractors (ii		ot lır	nited	d to	thos	se lis	ted	above) who received m	ore than				
	\$100,000 in compensation from the organization	ation -	_			Ų	,							

Page 9

Ра	π VII	Statement of Rever	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 s	1 a	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b					
s, g	С	Fundraising events	1c					
ag'al	d	Related organizations	1d			,		1
S,E		Government grants (contribut	ions) 1e					1
P.S.	f	AD 11						
풀림		similar amounts not included abo	ve 1f					İ
E O	q	Noncash contributions included in lines	: 1a-1f \$			i		
유	-	Total. Add lines 1a-1f		<u> </u>				1
				Business Code				
ا بو	2 a	MEMBERSHIP DUES	3	900099	558,088.	558,088.		1
اه ک	b							
SE	С							
le a	d							
Program Service Revenue	е							
ا ته	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f			558,088.			
	3	Investment income (including	dividends, inter	est, and				
		other similar amounts)		▶	271.			271.
	4	Income from investment of ta	x-exempt bond p	oroceeds 🕨				
	5	Royalties						
			(ı) Real	(II) Personal				
	6 a	Gross Rents		li				Ì
	b	Less rental expenses						
1	C	Rental income or (loss)	<u></u>					
ŀ	d	Net rental income or (loss)		▶				
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory						
	b	Less cost or other basis						
ļ		and sales expenses	<u> </u>					
Ì	C	Gain or (loss)		L				
Ì		Net gain or (loss)		<u> </u>			· · · · · ·	
e l	8 a	Gross income from fundraisin	g events (not					
ē		including \$	of					
é		contributions reported on line	1c). See					
Other Revenue		Part IV, line 18	a					
ㅎ		Less direct expenses	. b	L	İ			
		Net income or (loss) from fund				 +		
	9 a	Gross income from gaming ac				į	ĺ	
j		Part IV, line 19	a					
ł		Less direct expenses	b					
		Net income or (loss) from gam	_					
	10 a	Gross sales of inventory, less						
ļ		and allowances	а					
- 1		Less: cost of goods sold	b					
ł	с	Net income or (loss) from sale		Business Code				
ŀ	44 -	Miscellaneous Revenu OTHER INCOME		Business Code 900099	400.	400.		
	11 a					300.		
1	b c							
ĺ	d							
		Total, Add lines 11a-11d			400.			
	12	Total revenue. See instructions			558,759.	558,488.	0.	271.
8888	~							

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)

	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	<u></u>			
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	107,500.			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	10,000.			
9	Other employee benefits	4,613.			
10	Payroll taxes	8,236.		,	
11	Fees for services (non-employees)				
а	Management	FF 470			
b	Legal	55,470. 2,320.			
C	Accounting	126,306.			-
d	Lobbying	120,300.			
e	Professional fundraising services. See Part IV, line 17				ļ
f	Investment management fees	<u> </u>	 .	<u>-</u>	<u> </u>
g	Other				
12	Advertising and promotion	5,759.			
13	Office expenses	3,733.			
14	Information technology Royalties				
15	Occupancy	9,600.			
16 17	Travel	5,710.			
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				ĺ
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,603.			
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)				ĺ
	amount, list line 24f expenses on Schedule 0.)				
а	SPONSORSHIP	49,443.			
b	PUBLIC RELATIONS	48,411.			
С	POLLING & RESEARCH	30,045.			
d	DUES AND SUBSCRIPTIONS	6,601.			
е	BOARD EXPENSE	5,209.			
f	All other expenses	17,531.			
25	Total functional expenses. Add lines 1 through 24f	494,357.			ļ.
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				

				(A) Beginning of year		(B) End of year
_	1	Cash - non-interest-bearing		545,493.	1	609,895
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, di				
	ļ	employees, and highest compensated employe	es. Complete Part II		ļ	İ
		of Schedule L		5		
	6	Receivables from other disqualified persons (as				
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		l	
		employers and sponsoring organizations of sec	tion 501(c)(9) voluntary		i	
	1	employees' beneficiary organizations (see instru		6		
Assets	7	Notes and loans receivable, net		7		
Ass	8	Inventories for sale or use			8	
-	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment, cost or other			ļ	
	1	basis Complete Part VI of Schedule D	10a 3,608	<u>.</u>		
	Ь	Less: accumulated depreciation	10b 3,608	0.	10c	0.
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, line		12		
	13	Investments - program-related. See Part IV, line		13		
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		<u> </u>	15	
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	545,493.	16	609,895.
	17	Accounts payable and accrued expenses		17		
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
ies	21	Escrow or custodial account liability Complete			21	
Liabilities	22	Payables to current and former officers, director				
Lia		highest compensated employees, and disqualifi	ed persons. Complete Part II			
		of Schedule L	stad thurd marting		22	
	23 24	Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated			23 24	
	25	Other liabilities. Complete Part X of Schedule D	u triiro parties		25	
	26	Total liabilities. Add lines 17 through 25		0.	26	0.
_	20	Organizations that follow SFAS 117, check he	ere X and complete		20	
so.		lines 27 through 29, and lines 33 and 34.	and complete			
ıce	27	Unrestricted net assets		545,493.	27	609,895.
alar	28	Temporarily restricted net assets			28	
B	29	Permanently restricted net assets		29		
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, c	heck here 🕨 🔲 and			· · · · · · · · · · · · · · · · · · ·
P.		complete lines 30 through 34.				
ts	30	Capital stock or trust principal, or current funds			30	
sse	31	Paid-in or capital surplus, or land, building, or ed	upment fund		31	· · · · · · · · · · · · · · · · · · ·
et A	32	Retained earnings, endowment, accumulated in			32	
ž	33	Total net assets or fund balances	•	545,493.	33	609,895.
	34	Total liabilities and net assets/fund balances		545,493.	34	609,895.
						Form 990 (2010)

Form **990** (2010)

Form 990 (2010)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service To Organizations Exempt From income rax order section 50 (c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organiza	tions Complete Part III.			
Nan	ne of organization			Emp	loyer identification number
		O GAMING ASSOCIA			84-1259092
Pa	art I-A Complete if the org	ganization is exempt un	der section 501(c	or is a section 527 o	organization.
2	Provide a description of the organic Political expenditures Volunteer hours	zation's direct and indirect polit	ical campaign activities	s in Part IV ▶ \$	
P	art I-B Complete if the org	ganization is exempt un	der section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization ur	nder section 4955	▶ \$	· · · · · · · · · · · · · · · · · · ·
2	Enter the amount of any excise tax	incurred by organization manage	gers under section 495	5 ▶ \$	
3	If the organization incurred a section	on 4955 tax, did it file Form 4720	O for this year?		Yes No
48	Was a correction made?				Yes No
	If "Yes," describe in Part IV.		14.7		To
P	art I-C Complete if the org	ganization is exempt un	der section 501(c)		
1	Enter the amount directly expende	d by the filing organization for s	ection 527 exempt fund	ction activities	
2	Enter the amount of the filing organ	nization's funds contributed to c	ther organizations for s	section 527	
	exempt function activities			▶ \$	
3	Total exempt function expenditures	s Add lines 1 and 2. Enter here	and on Form 1120-POL	- ,	
	line 17b			▶ \$	
	Did the filing organization file Form	•			└ Yes └ No
5	Enter the names, addresses and er	• •	•	· · · · · · · · · · · · · · · · · · ·	
	made payments. For each organization contributions received that were pr	•			•
	political action committee (PAC). If	• •	, ,	•	ite segregated fund or a
_	 	1			(-) (-)
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0	promptly and directly
					delivered to a separate
					political organization. If none, enter 0.
					
		1			
_					
	· · · · · · · · · · · · · · · · · · ·				
		 		 	

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

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010	COLORADO	GAMING ASSO	CIATION	84-1	L259092 Page 2
Part II-A Complete if the org		xempt under section	on 501(c)(3) and fi	led Form 5768	
(election under sec					
A Check I if the filing organiza	=				
B Check ► L if the filing organiza	tion checked box	A and "limited control" pi	rovisions apply		· · · · · · · · · · · · · · · · · · ·
	ts on Lobbying E ditures" means a	xpenditures mounts paid or incurred	1.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opini	on (grass roots lobbying)			
b Total lobbying expenditures to infl	uence a legislative	body (direct lobbying)			
c Total lobbying expenditures (add l					
d Other exempt purpose expenditur	es				
e Total exempt purpose expenditure	es (add lines 1c and	d 1d)			
f Lobbying nontaxable amount Ent	er the amount fron	the following table in bo	th columns.		
If the amount on line 1e, column (a)	or (b) is: The	lobbying nontaxable an	nount is:	- · ·	
Not over \$500,000	20%	of the amount on line 16	9.		
Over \$500,000 but not over \$1,00	0,000 \$100	0,000 plus 15% of the ex	cess over \$500,000		
Over \$1,000,000 but not over \$1,5	500,000 \$175	5,000 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225	5,000 plus 5% of the exc	ess over \$1,500,000.		
Over \$17,000,000	\$1,0	00,000.			
g Grassroots nontaxable amount (er	nter 25% of line 1f)				
h Subtract line 1g from line 1a. If zer	o or less, enter -0-				
i Subtract line 1f from line 1c. If zero	o or less, enter -0-				
j If there is an amount other than ze		or line 11, did the organiz	zation file Form 4720		
reporting section 4911 tax for this				l	Yes No
•	ations that made	Averaging Period Under a section 501(h) election the instructions for line	n do not have to comp		
· · · · · · · · · · · · · · · · · · ·	Lobbying Ex	penditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount	·		ı		
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
		•			
c Total lobbying expenditures		<u> </u>			
4 0					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
(150% of line 2d, column (e))			 		
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 COLORADO GAMING ASSOCIATION 84-125909

[Part II-B] Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.	1	3)	(b)		
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.	Yes	No	Am	ount	
or referendum, through the use of.					
•					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities? If "Yes," describe in Part IV					
j Total Add lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	ļ				
b If "Yes," enter the amount of any tax incurred under section 4912	i	ļ			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	504(-)	(5)	-4'		
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on soric)	(5), or se	ction		
			Yes	No	
1 Were substantially all (90% or more) dues received nondeductible by members?		1		X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		Х	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).		3		X	
"Yes." 1 Dues, assessments and similar amounts from members		1	558	3,088.	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	cal	<u> </u>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
expenses for which the section 527(f) tax was paid).					
a Current year		2a	126	,306.	
b Carryover from last year		2b		,481.	
c Total		2c		787.	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		,140.	
	ess				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	olitical				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p					
·		4			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p		4 5	<92	,353.	

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.

2010
Open to Public Inspection

Name of the organization

COLORADO GAMING ASSOCIATION

Employer identification number 84-1259092

Pai	t I Organizations Maintaining Donor Advise		Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, Iin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		······································
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fu	nds
3	are the organization's property, subject to the organization's	_	Yes No
6	Did the organization inform all grantees, donors, and donor a	_	
0	for charitable purposes and not for the benefit of the donor		•
	impermissible private benefit?	or donor advisor, or for any other purpose come	Yes No
Pai		panization answered "Ves" to Form 990. Part IV	
1	Purpose(s) of conservation easements held by the organizat		, 1110 7
'	Preservation of land for public use (e.g., recreation or e		ally important land area
	Protection of natural habitat	Preservation of a certified h	
	Preservation of open space	rteservation of a certified i	istoric structure
_	• •	find appropriation contribution in the form of a	consortation consorted to the last
2	Complete lines 2a through 2d if the organization held a quali	ned conservation contribution in the form of a c	conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
_	Total number of concentation agreements		2a
a	Total corong restricted by conservation easements		2b
b	Total acreage restricted by conservation easements Number of conservation easements on a certified historic str	ricture included in (a)	2c
ن	Number of conservation easements included in (c) acquired	` '	
a		arter 6/17/06, and not on a historic structure	2d
3	listed in the National Register Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the orga	
3	year	reased, extinguished, or terminated by the orga	inization during the tax
4	Number of states where property subject to conservation ea	sament is located	
4	Does the organization have a written policy regarding the per		
5	violations, and enforcement of the conservation easements i	• • • • • • • • • • • • • • • • • • • •	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
6 7	Amount of expenses incurred in monitoring, inspecting, and	_	
8	Does each conservation easement reported on line 2(d) above	-	
В	and section 170(h)(4)(B)(ii)?	re satisfy the requirements of section (70(1)(4))	Yes No
9	In Part XIV, describe how the organization reports conservati	ion easements in its revenue and evnense state	
9	include, if applicable, the text of the footnote to the organization	·	·
	conservation easements	tion 3 interior statements that describes the or	gariization s accounting for
Par	t III Organizations Maintaining Collections o	f Art. Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form		
12	If the organization elected, as permitted under SFAS 116 (AS		and balance sheet works of art
ıa	historical treasures, or other similar assets held for public ext	•	, , , , , , , , , , , , , , , , , , ,
	the text of the footnote to its financial statements that descri	,	pablic scraige, provide, in vale XIV,
ь.	If the organization elected, as permitted under SFAS 116 (AS		halance sheet works of art, historical
U	treasures, or other similar assets held for public exhibition, e		,
	relating to these items	ducation, of research at fulfillerance of public se	sivice, provide the following amounts
	(i) Revenues included in Form 990, Part VIII, line 1		L ¢
	(ii) Assets included in Form 990, Part X		► \$ ► \$
_	If the organization received or held works of art, historical tre	asi iras, or other similar assets for financial cain	
2	the following amounts required to be reported under SFAS 1	-	, provide
_	Revenues included in Form 990, Part VIII, line 1	To prod 950) relating to these items	> \$
a	Assets included in Form 990, Part X		•
IJ	Appets included in Form 550, Fart A		₽ Ψ

		O GAMING A							<u> </u>	
Pai	rt III Organizations Maintaining (
3	Using the organization's acquisition, access	ion, and other recor	ds, ched	ck any of the	following th	nat are a	significant	use of its	collection	ıtems
	(check all that apply):									
а	Public exhibition	•	╸┞┤	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	in how t	hey further t	he organiza:	tion's ex	empt purp	ose in Pa	rt XIV	
5	During the year, did the organization solicit of	or receive donations	of art, h	nistorical trea	isures, or ot	her sımıla	ar assets	_	_	
	to be sold to raise funds rather than to be m								Yes	<u> </u>
Pai	t IV Escrow and Custodial Arran		lete if th	e organizatio	on answered	i "Yes" to	Form 990), Part IV,	line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custod	lian or other interme	dıary foı	r contribution	ns or other a	issets no	t included		_	
	on Form 990, Part X?							L	_ Yes	U No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table:						
									Amount	
C	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	217					L	Yes	U No
<u>b</u>	If "Yes," explain the arrangement in Part XIV			<u></u>						
Pai	t V Endowment Funds. Complete	f the organization ar	nswered	"Yes" to Fo	rm 990, Par	t IV, line	10		,	
		(a) Current year	(b) F	Prior year	(c) Two year	ars back	(d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities		ĺ					<u> </u>		
	and programs									
f	Administrative expenses		_							
g	End of year balance									
2	Provide the estimated percentage of the year	r end balance held a	as							
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%	_							
С	Term endowment ▶	%								
3a	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	nd administ	ered for t	the organiz	ation		
	by								Y	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Sche	dule R?					3b	
4	Describe in Part XIV the intended uses of the	organization's ende	owment	funds						
Par	t VI Land, Buildings, and Equipm	nent. See Form 990), Part X	(, line 10.		_				
	Description of investment	(a) Cost or o		(b) Cost	or other (other)	1 ' '	ccumulate	d	(d) Book v	alue
12	Land		•-/		, 27	<u> </u>	,			
	Buildings	-				 				
	Leasehold improvements					 	-			
	Equipment	3	608.	<u> </u>		 	3,60	18.		0.
	Other	 				 	3,00	- -		•
	. Add lines 1a through 1e (Column (d) must e	gual Form 990 Pert	X colu	nn (R) line 1	0(c))	L				0.
	inico ra anough to fooiam for most o		- 17 30101	(2), 1	-1-//					٠.

	(a) Description	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
	ual Form 990, Part X, col (B) line 15)	>

| Part X | Other Liabilities. See Form 990, Part X, line 25.
| 1. (a) Description of liability (b) Amount (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

Fin 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's flability for uncertain tax positions uncertain tax posi

	dule D (Form 990) 2010 COLORADO GAMING ASSOCIATIO				239092 Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Fina	ncial S	Statement	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		558,759.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		494,357.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		64,402.
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 an		10	D-4	64,402.
Pai	t XII Reconciliation of Revenue per Audited Financial Stateme	ents with Reve	nue p		
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:	1 - 1			
а	Net unrealized gains on investments	2a	_		
þ	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d				
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)				
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	onto With Evn		5	<u> </u>
	t XIII Reconciliation of Expenses per Audited Financial Statem	ents with Exp	enses		<u>n</u>
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1			
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С.	Other losses	2c		 -	
d	Other (Describe in Part XIV.)	2d			
e	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:	1 40 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV)	4a 4b	<u>-</u>		
D	Add lines 4a and 4b	40		—— ₄₀	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			4C 5	
5 Pai	t XIV Supplemental Information	 -			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part II	L lines 1s and 4. D	art IV II-	age 1b and 0	h: Part V line 4: Dort
	• • • • • • • • • • • • • • • • • • • •		•		•
X, IIN	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comp	nete this part to pr	ovide an	iy additionai i	ntormation
			<u>-</u>		
					
					· · · · · · · · · · · · · · · · · · ·
					

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 **Employer identification number** COLORADO GAMING ASSOCIATION 84-1259092 FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THEY RECOGNIZE GAMING AS A MAJOR ECONOMIC FORCE AND AN INTEGRAL PART OF COLORADO'S TOURISM INDUSTRY. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: REVIEW OF PROPOSALS TO EXPAND LIMITED GAMING OR CHANGE MANNER IN WHICH IT IS CONDUCTED. FORM 990, PART VI, SECTION B, LINE 11: PROVIDED UPON REQUEST FORM 990, PART VI, SECTION C, LINE 19: AVAILABLE UPON REQUEST

Form 886	8 (Rev. 1-2011)					Page 2		
• If you a	are filing for an Additional (Not Automatic) 3-Month Ex	ctension, c	complete only Part II and check this bo)X		▶ X		
Note. Onl	ly complete Part II if you have already been granted an	automatic	3-month extension on a previously filed	Form	1 8868	-		
	are filing for an Automatic 3-Month Extension, comple							
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the original (no co	opies	needed)			
Type or	Name of exempt organization				Employer identification no			
print	COLORADO GAMING ASSOCIATION				84-1259092			
File by the extended due date for filing your	Number, street, and room or suite no. If a P.O box, see instructions							
return See	City, town or post office, state, and ZIP code For a for DENVER, CO 80203	oreign add	fress, see instructions					
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 1		
Application	on	Return	Application		·	Return		
ls For		Code	Is For			Code		
Form 990		01						
Form 990	-BL	02	Form 1041-A			08		
Form 990		03	Form 4720			09		
Form 990		04	Form 5227					
	-T (sec 401(a) or 408(a) trust)	05		Form 6069				
	-T (trust other than above)	06	Form 8870		··· <u> </u>	12		
STOP! Do	not complete Part II if you were not already granted		natic 3-month extension on a previou	sly fil	<u>ed Form 8868</u>	<u> </u>		
	THE ORGANIZATIO			~~				
	poks are in the care of \triangleright 225 EAST 16TH 2	AVENU		CC	80203			
•	one No ▶ 303-237-5480		FAX No ▶			 1		
	organization does not have an office or place of busines							
	s for a Group Return, enter the organization's four digit					oup, check this		
box 🕨 L	If it is for part of the group, check this box			memb	ers the extens	ion is for		
	·	NOVEMI	BER 15, 2011					
	calendar year 2010 , or other tax year beginning		, and ending		<u> </u>	 ·		
6 If th	le tax year entered in line 5 is for less than 12 months, c \Box Change in accounting period	heck reas	on·	Fınalı	return			
	te in detail why you need the extension							
	DITIONAL TIME IS REQUIRED IN	N ORDI	ER TO FILE A COMPLET	E A	ND ACCU	RATE		
TA	X RETURN							
8a If th	is application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			 -		
	refundable credits. See instructions			8a	s	0.		
b If th	is application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated					
tax	tax payments made Include any prior year overpayment allowed as a credit and any amount paid							
	previously with Form 8868			8b	\$	0.		
	ance due. Subtract line 8b from line 8a Include your pa	vment wit	h this form, if required, by using					
	PS (Electronic Federal Tax Payment System) See instru	-	,,,. 3	8c	 \$	0.		
			d Verification			<u></u> _		
Under pena	ilties of perjury, I declare that I have examined this form, includ prrect, and complete, and that I am authorized to prepare this fo	ing accomp		best o	f my knowledge	and belief,		
Signature	► Tritle ► I	PRESII	DENT	Date				
					Form 99	88 (Rev. 1.2011)		