

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# Form **990**

Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

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

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

2012
Open to Public Inspection

and ending For the 2012 calendar year, or tax year beginning Check if C Name of organization D Employer identification number Address change Independent Bankers of Colorado Name change 84-0647721 ]Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-(303)832-20001900 Grant St, Suite 1120 Amender G Gross receipts \$ 664,058. City, town, or post office, state, and ZIP code Applica-Denver, CO 80203 H(a) Is this a group return pending F Name and address of principal officer. Barbara Walker for affiliates? Yes X No same as C above H(b) Are all affiliates included? 4947(a)(1) or If "No," attach a list. (see instructions) Tax-exempt status: \_\_\_\_\_ 501(c)(3) \_\_\_\_\_\_ 501(c) ( ) ◀ (insert no.) J Website: ▶ www.ibcbanks.org H(c) Group exemption number K Form of organization: X Corporation Year of formation: 1973 M State of legal domicile: CO Association Other > Part I | Summary Briefly describe the organization's mission or most significant activities. See Part III SCANNEIDACHUTIES & GOOGHIAGE Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets 19 3 Number of voting members of the governing body (Part VI, line 1a) 19 Number of independent voting members of the governing body (Part VI, line 1b) 4 3 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) b Net unrelated business taxable income from Form 990. I line 34. 130,707. 7 a Total unrelated business revenue from Part VIII, column (C), line-12 7a -14,060. Prior Year **Current Year** 366,614 379,833. 8 Contributions and grants (Part VIII, line 1h) 11,000. <u> 19,550.</u> Program service revenue (Part VIII, line 2g) 4,334 4,233. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7db 228,507. 260,442. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 610,455. 664,058. Total revenue - add lines 8 through 11 (must equal Part VIII, Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 392,204. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 367.368. 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 318,132. 240,720 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 608,088. 710,336. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -46,278. 2,367 19 Revenue less expenses Subtract line 18 from line 12 Assets or 1 1 Balances Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 496,402 497,311. 21 Total liabilities (Part X, line 26) 0 0. Z S 496,402. 497 Net assets or fund balances Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Date Sign Barbara Walker, Executive Director Here Type or print name and title Date 10/3/13 PTIN Print/Type preparer's name Preparer's signature P00238372 Paid Beverly K Beattie self-employed Preparer Firm's name BK Beattie & Assoc., PC Firm's EIN **84-1072096** Firm's address 355 S Teller Street, Suite 200 Use Only Lakewood, CO 80226 Phone no. (303) 231-1040 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

Form 990 (2012)

	1990 (2012) Independent Bankers of Colorado 84-064//21 Page 2
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.
	To enhance and promote strong, profitable, independent community
	banks; advance common legislative and regulatory concerns; provide a
	forum that promotes ideas, relationships and communication of common
	objectives To serve and promote communities throughout Colorado.
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.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	
	Various services to maintain and promote independent banking practices
	as designated in the Organization's Articles of Incorporation.
4b	(Code ) (Expenses \$) (Revenue \$)
40	(Code) (Expenses \$
4c	(Code) (Expenses \$
	(Code / (Expenses 9 ) (Nevenue 9 )
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$
10	Total program service expenses

			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	<u> </u>	X
2	ls the organization required to complete Schedule B, Schedule of Contributors?	2	ļ	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	<del> </del>	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	N/	<u>A</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		7,	ŀ
	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 for which donors have the right to			<b>.</b>
_	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	<b>-</b>		- 21
0	Schedule D, Part III	8	ĺ	x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
•	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?	ļ		
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10_		X
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_	
b	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		<u>X</u>
C	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		<u>X</u>
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			37
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446		x
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		
128	Schedule D, Parts XI and XII	12a		X_
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
J	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	j	х
13	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		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		1	
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u> _
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals		]	
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</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		1	
	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,"			77
20-	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u> _
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000 "	

	rt IV Checklist of Required Schedules (continued)	, , ,	<u>'</u> -	ago
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization 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,			T
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		}	
	Schedule J .	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	ļ <u>-</u> .	ļ
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		ļ
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
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	<u>N</u> /	Α_
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			Ì
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		3T /	
	Schedule L, Part I	25b	<u>N/</u>	Α
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	-00		-
	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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	27		х
00	of any of these persons? If "Yes," complete Schedule L, Part III  Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	_21		
28	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	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
•	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	-	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	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	ĺ		
	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	i	ľ	
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		}	
	Part V, line 1 .	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	ı		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		, , l	,
	If "Yes," complete Schedule R, Part V, line 2	36	N/	<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		- 1	

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

	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	A		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	٠		1
·	(gambling) winnings to prize winners?	1c		ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
Lu	filed for the calendar year ending with or within the year covered by this return 2a 3	<u> </u>	_	i
h	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)		1.	
3a	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	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	<u> </u>		
<del>-1</del> a	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:			
D	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts	٠,		
E.	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
b	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	<del></del> -		
Оd	any contributions that were not tax deductible as charitable contributions?	6a		X
<b>L</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	<u> </u>		
U	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).  N/A			
	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
·	to file Form 8282?	7c	Ì	
4	If "Yes," indicate the number of Forms 8282 filed during the year	<u></u>		
e	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?	7 <del>f</del>		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	A
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A			
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	ı	
9	Sponsoring organizations maintaining donor advised funds.	•		
а	Did the organization make any taxable distributions under section 4966?  N/A	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?  N/A	9b		
10	Section 501(c)(7) organizations. Enter	•		
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a	ļ		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	Í	Ì	
11	Section 501(c)(12) organizations. Enter:	ļ	- }	
а	Gross income from members or shareholders N/A 11a	- 1	- [	
b	Gross income from other sources (Do not net amounts due or paid to other sources against	.	1	
	amounts due or received from them.)	·		
12a	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 N/A 12b	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?  N/A	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
ь	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	I	Х
		14b		

	Check if Schedule O contains a response to any question in this Part VI	•				X
Sec	tion A. Governing Body and Management					_
		1	1	<del></del>	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>	19	<u> </u>		·
	if there are material differences in voting rights among members of the governing body, or if the governing	ł	Ì	1	1 .	1 -
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			'	٠,	
b	Enter the number of voting members included in line 1a, above, who are independent	1b	19	<u>3</u> "		1.
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	np with	any other		1	İ
	officer, director, trustee, or key employee?			2	<u> </u>	X
3	Did the organization delegate control over management duties customarily performed by or under t	he dire	ct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			3	<u>L</u>	X
4	Did the organization make any significant changes to its governing documents since the prior Form	990 w	as filed?	4	<u> </u>	X
5	Did the organization become aware during the year of a significant diversion of the organization's as	ssets?		5	<u> </u>	X
6	Did the organization have members or stockholders?			6	X	<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or			
	more members of the governing body?			7a	X	1
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or			
_	persons other than the governing body?		•	7b	x	1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	ear hv th	ne following:	;	<del>                                   </del>	,
	The governing body?	ou. by	io ionotrinig.	8a	x	
	Each committee with authority to act on behalf of the governing body?			8b	X	-
	-	aabad	at tha	00	- 23	-
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	acneu	at tile	9		x
_	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		- Code l	l a		^
ec	tion B. Policies (This Section B requests information about policies not required by the Internal F	revenu	e Code )		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-
_					Yes	
	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapter	s, aπiliates,	l		
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		<u> </u>
	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dy beto	re filing the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			}		}
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to cor	flicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," d	escribe		ļ	
	ın Schedule O how this was done			12c	X	
3	Did the organization have a written whistleblower policy?			13	X	
4	Did the organization have a written document retention and destruction policy?			14	X	
5	Did the process for determining compensation of the following persons include a review and approv	al by ir	ndependent		~ ~	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	?				
а	The organization's CEO, Executive Director, or top management official			15a	Х	
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).					
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a			
_	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its d	participation			
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	•	•	· 1	٠.	
	exempt status with respect to such arrangements?	a near	113	16b		
<u>-</u> -	tion C. Disclosure	********		LIOD		
			<del></del>			
7		T /9004	100 501/0/(2)= 0=1:1	aug-la-		
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	Oect	ion au r(c)(3)s only) :	avallab	IE	
	for public inspection. Indicate how you made these available. Check all that apply.	_				
_	Own website Another's website X Upon request Other (explain		•			
9	Describe in Schedule O whether (and if so, how), the organization made its governing documents, c	onflict (	of interest policy, an	d finan	icial	
	statements available to the public during the tax year.					
0	State the name, physical address, and telephone number of the person who possesses the books a The Organization - (303)832-2000	ınd rec	ords of the organiza	tion: 🕨	·	

•					
Tarm 000 (0010)	Independent	Bankord of	Colorado	84-0647721	Page 7
Form 990 (2012)	Independent	panyers or	COTOLAGO	04 0047721	rayer
D." LVIII O	1 010 Division	T 14	C	I limbe at Oaman and at all	

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

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

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

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

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

(A) Name and Title	(B) Average	(dn		Pos	(C) sition k more than one			( <b>D</b> ) Reportable	(E) Reportable	( <b>F</b> ) Estimated
	hours per week	box	, unle	ss pe	rson	is bot or/trus	h an	compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Jim Pieters	1.00								_	
Director		X						0.	0.	0,
(2) Harry Devereaux	1.00								_	_
Director		X						0.	0.	0.
(3) Tom Chesney	1.00									
Chairman	1 22	X		X				0.	0.	0.
(4) Quentin Leighty	1.00									•
Director	1 00	X						0.	0.	0.
(5) Dave Brewick	1.00	7.7						0.	0.	^
Director	1.00	X			-			U •	<u></u>	0.
(6) Tom Olson	1.00	x						0.	0.	0.
Director (7) WI Walter	1.00	Δ				-		•		
(7) HJ Welton Director	1.00	x						0.	0.	0.
(8) Brandon Berkley	1.00					Н				
Director	1100	X						0.	0.	0.
(9) Clay Whitham	1.00									
Director		X						0.	0.	0.
(10) Allan Tormohlen	1.00				_					
Director		X						0.	0.	0.
(11) Ashley Burt	1.00									
Director		X						0.	0.	0.
(12) Byron Maynes	1.00									
Director		X						0.	0.	0.
(13) Steve Short	1.00									
President-Elect		X		Х				0.	0.	<u>0.</u>
(14) Jay Rickstrew	1.00	;						_		_
President	1 00	X		X				0.	0.	0.
(15) Bill Mitchell (Non-Voting)	1.00			İ					_	•
Advisory Member	1 00	X		_				0.	0.	0.
(16) Brian Soeldner	1.00	v	Ì	İ					_	^
Director (17) Table Const	1 00	X					$\dashv$	0.	0.	0.
(17) John Sneed	1.00	X	ļ	ļ				0.	0.	^
Director 232007 12-10-12		Δ	1	1	!					0 . Form <b>990</b> (2012)

Section A. Officers, Directors, Trus	stees, Key Lili	<u>נטועו</u>	rees	<u>, aii</u>	un	igne	31 (	Jumpensated Employe	es (continued)				
(A) Name and title	(B) Average hours per week	Бох	, unle	Pos check sss pe	erson	than is bo	th an		(E) Reportable compensation from related		l	(F) stimati mount other	of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer	the	organization (W-2/1099-Mis	ns	org an	npensa rom th ganizat id relat anizati	ation ne tion ted
(18) Megan Harmon	1.00		=	100	2	± 5	=						
Director		X	<u> </u>				ļ	0.		0.	<u> </u>		0.
(19) PJ Wharton	1.00			]									^
Director	40.00	X			-	<del> </del>		0.		0.			0.
(20) MaeLynn Lewis	40.00	{		X				79,686.	i	0.	. 1	3,5	21
Secretary/Treasurer	1.00		_	Α		-	-	13,000.	<del></del>	<u> </u>		ر, ر	<u> </u>
(21) Chuck Johnston ICBA State Director	1.00	1		X				0.		0.	í		0.
(22) Barbara Walker	40.00	_	-	-	_	<del>                                     </del>							
Executive Director	10.00		'			X		142,572.		0.	2	3,6	71.
											<del></del> -		
									<u>.                                    </u>				
		_											
4.01.11		İ				Ļ	L_	222,258.	· · · · · · · · · · · · · · · · · · ·	0.		7,2	0.2
1b Sub-total c Total from continuation sheets to Part VI	I Continu A							222,258.	<del></del>	0.	3	1,4	02.
d Total (add lines 1b and 1c)	i, Section A							222,258.		0.	3	7,2	
Total number of individuals (including but n	ot limited to th	ose	liste	ed at	oove	e) wh	no re		,000 of reportabl				<u> </u>
compensation from the organization													1
												Yes	No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s		ıstee	e, ke	y en	npio	yee,	or	highest compensated ei	mployee on		3		X
4 For any individual listed on line 1a, is the su		le co	mpe	ensa	tion	anc	oth	her compensation from t	the organization	f			
and related organizations greater than \$150	·							,	<b>.</b>	}	4	X	
5 Did any person listed on line 1a receive or a			-						dual for services				
rendered to the organization? If "Yes," com	plete Schedule	e J f	or su	ıch j	oers	on					5		X
Section B. Independent Contractors													
<ol> <li>Complete this table for your five highest co</li> </ol>	•									ipensa	ation f	rom	
the organization Report compensation for	the calendar y	ear e	endir	ng w	/ith (	or w	thir		rear.				
<b>(A)</b> Name and business	address	NC	NE	7.				(B) Description of s	ervices	Cr	(C ompe	c) nsatio	n
			<u> </u>	_			7						
							$\dashv$						
		··					+						
							$\downarrow$						
							_						
											<del></del>		
O Total number of independent contractors (ii	actualing but a	-+ 1			ه ــ حاد		+	about who recoved m	a 4b				

0

\$100,000 of compensation from the organization

Independent Bankers of Colorado 84-0647721 Page 9 Form 990 (2012) Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (D) Revenue excluded from tax under sections 512, 513, or 514 (C) Unrelated Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 379,833. b Membership dues 1b c Fundraising events 10 d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f **Business Code** 19,550 2 a Government Relations 900099 19,550 Program Service Revenue f All other program service revenue 19,550 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 4,233 4,233. other similar amounts) Income from investment of tax-exempt bond proceeds 4 120,510. 120,510 Royalties 5 (i) Real (II) Personal 9,200 6 a Gross rents 0. b Less rental expenses ,200. c Rental income or (loss) 9,200 9,200. d Net rental income or (loss) (II) Other (i) Securities 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ of contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 109,013 11 a Support services 561000 109,013 11,273. ь Advertising 541800 11,273. 900002 6,000. c Pers prop lease 6,000. 4,446. 524298 4,421 25. d All other revenue

130,732.

664,058

19,550

130,707.

e Total. Add lines 11a-11d Total revenue. See instructions.

Sec	tion 501(c)(3) and 501(c)(4) organizations must con			omplete column (A)	
	Check if Schedule O contains a respo	nse to any question in tr	nis Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and	j	j		
	organizations in the United States. See Part IV, line 21	<u> </u>		'	
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,	ĺ			
	organizations, and individuals outside the			·	
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	040 500			
	trustees, and key employees	219,782.			
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 .	66,269.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	48,629.			
9	Other employee benefits	36,405.			
10	Payroll taxes	21,119.			
11	Fees for services (non-employees):				
а	Management				
b	Legal	1,080.			
С	Accounting	1,600.			· <del> · - · - · - · - · - · - · - · - ·</del>
d	Lobbying	115,929.			
е	Professional fundraising services. See Part IV, line 17			, ,	<u></u>
f	Investment management fees	·			
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	3,144.			
13	Office expenses	5,629.			
14	Information technology	1,365.			
15	Royalties				
16	Occupancy	18,730.			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				<del></del>
19	Conferences, conventions, and meetings	9,319.			
20	Interest	<u></u>			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,793.			
23	Insurance .	8,111.			<del></del>
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	UBTI Taxes	40.			
b	Legal hot line	55,000.			
c	Legislative expense	50,643.			
d	Government relations	25,950.			
е	All other expenses	19,799.			
25_	Total functional expenses Add lines 1 through 24e	710,336.			
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined			[	
	educational campaign and fundraising solicitation.			ļ	
	Check here tit following SOP 98-2 (ASC 958-720)			1	

Part X | Balance Sheet Check if Schedule O contains a response to any question in this Part X (A) Beginning of year (B) End of year Cash · non-interest-bearing 1 483,603 486,929 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 750 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under 6 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 instr). Complete Part II of Sch L Notes and loans receivable, net 7 7 8 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 9 10a Land, buildings, and equipment, cost or other 103,014. 10a basis Complete Part VI of Schedule D 5,256. 97,758 7,049. b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 5,000 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 14 Intangible assets 5,126. 497,311. 15 Other assets. See Part IV, line 11 15 496,402 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 iabilities Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L. 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 0 0. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 Temporarily restricted net assets 28 28 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 0. 30 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 0. 31 496,402. 497,311 Retained earnings, endowment, accumulated income, or other funds 32 32 496,402. 497,311. Total net assets or fund balances 33 496,402. 497,311 Total liabilities and net assets/fund balances

<u>Forn</u>	1990 (2012) Independent Bankers of Colorado	<u>84-06</u>	47721	Page <b>12</b>
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			X
		1 1		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		.,058.
2	Total expenses (must equal Part IX, column (A), line 25)	2		,336.
3	Revenue less expenses Subtract line 2 from line 1	3		,278.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	496	,402.
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		<del></del>
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9	_47	,187.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	497	,311.
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII	·		
			\	res No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			· '
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedul	e O.	7 - 1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	ed on a		
	separate basis, consolidated basis, or both			1
	X Separate basis Consolidated basis Both consolidated and separate basis		1	}
b	Were the organization's financial statements audited by an independent accountant?		2b	X_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	te basis,	-	
	consolidated basis, or both.		1. 1	1
	Separate basis Consolidated basis Both consolidated and separate basis		-  -	_ 1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of ti	ne audıt,		اد
	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 Sci	redule O	- 4	7
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S			'
	Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ured audit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3h	1

Form **990** (2012)

### 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

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

See separate instructions.

- 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.

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 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 35c (Proxy Tax), then

Section 5	01(c)(4), (5), or (6) organiza	ations: Complet	e Part III			
Name of orga					Emp	loyer identification number
	Indeper	<u>ident Ba</u>	nkers of C	colorado		84-0647721
Part I-A	Complete if the or	ganization i	s exempt unde	r section 501(c) o	or is a section 527 o	organization.
<ul><li>2 Political</li><li>3 Voluntee</li></ul>	·				<b>▶</b> \$	·
Part I-B	Complete if the or	ganization i	s exempt unde	r section 501(c)(3		<del></del>
	amount of any excise tax	•	-		\$	
	amount of any excise tax				<b>▶</b> \$	
-	anization incurred a section	on 4955 tax, die	d it file Form 4720 fo	or this year?		Yes No
	orrection made?					L Yes L No
b if "Yes," Part I-C	describe in Part IV	ranization i	e evemnt unde	r section 501(c)	except section 501	(0)(3)
<del></del>						
	amount directly expende					· <del></del>
	amount of the filing organ	nzation's funds	contributed to othe	er organizations for sec	× \$	
•	unction activities impt function expenditure	a Add lippe 1 a	and 2 Enter here on	d on Form 1120-POL		' <del></del>
fine 17b	anpt function expenditure	s. Aud iiries T a	ind 2 Enter here and	d on Folili 1120-FOL,	<b>▶</b> \$	· !
	ling organization file Form	1120-POL for	this year?		ΨΨ	Yes No
5 Enter the made pa contribut	names, addresses and elyments. For each organizations received that were plaction committee (PAC). If	mployer identifi ation listed, ent comptly and dir	ication number (EIN) er the amount paid ectly delivered to a	from the filing organiza separate political organ	ition's funds. Also enter th nization, such as a separa	ne amount of political
	(a) Name	(b)	Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0
Coinpac		Denver,	CO 80203	84-0810169	1,450.	19,550.
	<del></del>					

Schedule C (Form 990 or 990 EZ) 2012  Part II-A Complete if the or	<u>Independen</u> ganization is exc	t Bankers of empt under section			1647721 Page 2
(election under se	-				
A Check 🕨 🔲 if the filing organize	ation belongs to an a	ffiliated group (and list ii	Part IV each affiliated	group member's nar	ne, address, EIN,
expenses, and sha	are of excess lobbying	g expenditures)			
B Check 🕨 🔛 if the filing organiz	ation checked box A	and "limited control" pro	ovisions apply	T	<del></del>
	its on Lobbying Exp	enditures ounts paid or incurred.	)	(a) Filing organization's totals	(b) Affiliated group totals
		· · · · · · · · · · · · · · · · · · ·	<del>-,</del>	totalo	<u> </u>
1a Total lobbying expenditures to inf	•				<del> </del>
b Total lobbying expenditures to inf	•	bay (airect lobbyling)	•	<del></del>	<del> </del>
c Total lobbying expenditures (add	-			<del></del>	<del> </del>
<ul> <li>d Other exempt purpose expenditure</li> <li>e Total exempt purpose expenditure</li> </ul>		14)		<del></del>	
f Lobbying nontaxable amount Ent	•	•	h columns	<del> </del>	<del> </del>
					7 .,
If the amount on line 1e, column (a)		bbying nontaxable am			
Not over \$500,000 Over \$500,000 but not over \$1,00		f the amount on line 1e 200 plus 15% of the exc			
				, ` ',	
Over \$1,000,000 but not over \$1,5		100 plus 10% of the exc 100 plus 5% of the exce			
Over \$1,500,000 but not over \$17	<del></del>		22 OAGL #1,200,000	, ,	
Over \$17,000,000	\$1,000	),000.		,	
g Grassroots nontaxable amount (er	nter 25% of line 1f)		<del></del>		<del> </del>
h Subtract line 1g from line 1a. If zei	•				
i Subtract line 1f from line 1c If zero	•				
j If there is an amount other than ze	· · · · · · · · · · · · · · · · · · ·	r line 1i. did the organiza	ation file Form 4720	<u> </u>	
reporting section 4911 tax for this				[	Yes No
•	zations that made a	veraging Period Under section 501(h) election he instructions for line	do not have to com		
		enditures During 4-Yea			
		T			
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount		., ,	- 1		
(150% of line 2a, column(e))			t .		
c Total lobbying expenditures					
	ĺ				
d Grassroots nontaxable amount		<u> </u>	·····	<u></u>	
e Grassroots ceiling amount	3 - , , ,				
(150% of line 2d, column (e))	<u> </u>			<u> </u>	
f Grassroots lobbying expenditures					<u> </u>

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990 EZ) 2012 Independent Bankers of Colorado 84-0647721 Page 3

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)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(	(a)	(	b)
of the lobbying activity.	Yes	No	Am	ount
During the year, did the filing organization attempt to influence foreign, national, state or	· ·		7	
local legislation, including any attempt to influence public opinion on a legislative matter	ļ .	, .		
or referendum, through the use of:	,		,	
a Volunteers?	ĺ			2 .
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			1.	
c Media advertisements?			1	
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?	<del></del>	· · · · · ·		
Don't and a trade to the section of the material and the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section o			<del> </del>	
b Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<del> </del>	<del> </del>	··
i Other activities?		-	<del></del>	
• •	<del></del>			
j Total Add lines 1c through 1i	<del></del>			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	<del> </del>	<del> </del>	<del> </del>	
b If "Yes," enter the amount of any tax incurred under section 4912	2 1	ľ.		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		<del>                                     </del>		-, -,
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A* Complete if the organization is exempt under section 501(c)(4), sec	tion 501(c)	(5) or se		-
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	CUOII	
501(c)(6).			Yes	No
		Γ.	res	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1_		<u>X</u>
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2_		X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), sec	** ** ***	3		X
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."			t III-A, lir	
Dues, assessments and similar amounts from members		1_1_	379	<del>9,833.</del>
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of po	litical			
expenses for which the section 527(f) tax was paid).				
a Current year .		2a	166	<u>5,572.</u>
b Carryover from last year		2b		
c Total		2c_	166	<u>5,572.</u>
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	125	<u>5,345.</u>
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	excess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying an	d political			
expenditure next year?		4	4:	1,227.
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Part IV Supplemental Information				
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5,	Part II-A (affili	ated group	list), Part II	A, line 2,
and Part II-B, line 1 Also, complete this part for any additional information.				
Part I-C Continuation for Incomplete Name/Address In	formati	lon:		
Coinpac				
1900 Grant Street, Suite 1120 Denver, CO 80203				
Description of political campaign activities and lob		feder	al	

Schedule C (Form 990 or 990 EZ) 2012 Independent Bankers of Colorado  Pânt IV Supplemental Information (continued)	84-0647721 Page 4
candidates, and the last time a state candidate was endors	ed was over 10
years ago. IBC does engage in activities that attempt to i	nfluence
legislation (lobbying) by regular contacts with members or	employees of
Colorado's legislative body and Colorado's congressional d	elegation and
staff for the purpose of proposing, supporting (or opposin	g) legislation,
and advocates the adoption or rejection of legislation. IB	C also conducts
educational meetings for its members, and prepares and dis	tributes
educational materials concerning local, state and federal	
issues.	
	<del></del>
·	
	·

(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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

Inspection

Name of the organization

Independent Bankers of Colorado

Employer identification number 84-0647721

Pá	rt I Organizations Maintaining Donor Advise		or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		·
		(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 w	vriting that the assets held in donor advisi	ed funds
ŭ	are the organization's property, subject to the organization's	<del>-</del>	Yes No
6	Did the organization inform all grantees, donors, and donor ac	-	
Ü	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?	denot adviser, or for any exter purpose t	Yes No
Pa	rt II Conservation Easements. Complete if the organization	anization answered "Yes" to Form 990. Pa	
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or ed		torically important land area
	Protection of natural habitat	Preservation of a certification	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form of	of a conservation easement on the last
_	day of the tax year	ed Conservation contribution in the form c	or a conservation casement on the last
	day of the tax year		Held at the End of the Tax Year
	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic stru	ecture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	, ,	
u	listed in the National Register	iter of 17700, and not on a motorio structa	2d
3	Number of conservation easements modified, transferred, rele	eased extinguished or terminated by the	<u> </u>
Ū	year ▶	adda, oxungalonda, ox tommatod by the	organization during the tax
4	Number of states where property subject to conservation easi	ement is located	
5	Does the organization have a written policy regarding the period	· · · · · · · · · · · · · · · · · · ·	
•	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, a	•	
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above	-	
Ū	and section 170(h)(4)(B)(ii)?	s salisify the requirements of section (requ	Yes No
9	In Part XIII, describe how the organization reports conservatio	in easements in its revenue and expense	
•	include, if applicable, the text of the footnote to the organization	·	
	conservation easements		ino organization o aboodining to
Pa	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" to Form 9	-	
	If the organization elected, as permitted under SFAS 116 (ASC	C 958), not to report in its revenue statem	ent and balance sheet works of art.
	historical treasures, or other similar assets held for public exhi		
	the text of the footnote to its financial statements that describ		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
b	If the organization elected, as permitted under SFAS 116 (ASC		and balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, edu		
	relating to these items.	,	, , , , , , , , , , , , , , , , , , ,
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		<b>\$</b>
2	If the organization received or held works of art, historical treas	sures, or other similar assets for financial	
_	the following amounts required to be reported under SFAS 119		g , p. c
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	Assets included in Form 990, Part X	•	<b>s</b>

		dent Banke				011			47721	
Pa	rt III Organizations Maintaining C									
3	Using the organization's acquisition, accessi	ion, and other recor	ds, chec	ck any of the	following that	at are a sigi	nificant	use of its	collection	tems
	(check all that apply):									
а	Public exhibition	(	a 🗀	Loan or ex	change progra	ams				
ь	Scholarly research		. 🗀	Other						
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	in how t	hev further	the organizati	on's exemi	ot purpi	ose in Par	t XIII.	
5	During the year, did the organization solicit of							000 1111 01		
3	to be sold to raise funds rather than to be me					Ci Sirina a	33013		Yes	☐ No
Da	rt IV Escrow and Custodial Arran					"Voo" to E	00C	Dort IV		110
ra	reported an amount on Form 990, Pa	•	ete ii tiri	e organizati	on answered	105 10 11	)IIII 33C	), Fait IV,	iii i <del>u</del> 5, 0i	
	<del> </del>	<del></del>								
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	r contributio	ns or otner as	ssets not in	ciuaea		٦.,	┌┐
	on Form 990, Part X?							L	_ Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table:						
								<del></del>	Amount	
С	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 Fe	orm 990, Part X, line	21?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	Check here if the e	xplanatı	on has beer	provided in I	Part XIII				
	t V Endowment Funds. Complete r									
		(a) Current year	(b) F	Prior year	(c) Two year	s back (d	) Three y	ears back	(e) Four ye	ears back
1a	Beginning of year balance									
ь	Contributions			_	1					
6	Net investment earnings, gains, and losses				1					
d	Grants or scholarships	<del></del>								
	Other expenditures for facilities	<del></del>			<u> </u>					
e	ì		1		1					
	and programs									
ī	Administrative expenses				<del> </del>	<del></del>				
g	End of year balance	<del></del>								
2	Provide the estimated percentage of the curr	rent year end baland	ce (line 1	ig, column (	a)) neid as:					
а	Board designated or quasi-endowment	<del></del>	_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organiz	ation th	at are held a	and administe	red for the	organiz	zation	_	
	by.								Y	es <u>No</u>
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
ь	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Sche	dule R?					3b	
4_	Describe in Part XIII the intended uses of the									
Par	t'VI Land, Buildings, and Equipm	ent. See Form 990	), Part X	(, line 10.						
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Acci	umulate	d	(d) Book v	alue
		basis (investr	ment)	basis	(other)	depre	ciation	_		
1a	Land									
b	Buildings									
c	Leasehold improvements									
d	Equipment			2	8,591.	7	3,3	35.	5	256.
_	Other	<del></del>			4,423.		4,4			<u> </u>
	Add lines 1a through 1e (Column (d) must en	gual Form 990 Part	X colur				,		5	256.

Schedule D (Form 990) 2012

(b) Book value	(c) Method of	valuation. Cost or e	nd-of-year market value
		<u> </u>	
		···	
			·
		<u>' , , , , , , , , , , , , , , , , , , ,</u>	, ,,
(b) Book value	(c) Method of	valuation. Cost or e	nd-of-year market value
	ļ		- <del></del>
	ļ	<del> </del>	
	<u> </u>		<del></del>
	<u>,</u>	<u></u>	<u> </u>
			<del></del>
escription			(b) Book value
	<del></del>	·····	<u> </u>
		···-	
<u> </u>			
		····	
		····_	
		···-	<u> </u>
		···-	<u> </u>
15)			
		<del></del>	
	(b) Book value	,	
			, , , , , , , , , , , , , , , , , , ,
		}	
		,	-
		,	•
		, ,	
	e Form 990, Part X, line 1 (b) Book value  5 lescription  15 )	(b) Book value (c) Method of a separation (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c) Method of (c	(b) Book value (c) Method of valuation. Cost or e  Form 990, Part X, line 13. (b) Book value (c) Method of valuation. Cost or e  secription

Independent Bankers of Colorado

84-0647721 Page 3

Schedule D (Form 990) 2012

	edule D (Form 990) 2012 Independent Bankers of Co.			Page 4
Pa	nt XI Reconciliation of Revenue per Audited Financial Statem	ents With Revenue	per Return	<u>-</u>
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		
b	Donated services and use of facilities	2b		
С	Recovenes of prior year grants	2c		
d	Other (Describe in Part XIII )	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	i i		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII )	4b		
С	Add lines 4a and 4b		4c	
5_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten	nents With Expenses	per Return	
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:	•		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII )	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:		,	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	`	
b	Other (Describe in Part XIII )	4b		
_	Add lines 4a and 4b	L_78	4c	
-	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	
5 Pái	t XIII Supplemental Information			
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part	III, lines 1a and 4, Part IV, li	ines 1b and 2b, Part V, line 4	Part
	e 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to			
	<del> </del>			<del></del>
		<del></del>		
	· · · · · · · · · · · · · · · · · · ·		Schedule D (Form 990	0) 2012

### **SCHEDULE J** (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

**Questions Regarding Compensation** 

Independent Bankers of Colorado

Employer identification number 84-0647721

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,	,		
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	1	٠.	
	First-class or charter travel Housing allowance or residence for personal use	-	·	
	Travel for companions Payments for business use of personal residence	Ì	1	
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)	-	:	
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
-	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	)	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
_	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		İ
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's	1	1	
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to	٠,	٠.	
	establish compensation of the CEO/Executive Director, but explain in Part III.	1	7- /	
	Compensation committee	ļ ·	7° 5	
	Independent compensation consultant  X Compensation survey or study	,		
	Form 990 of other organizations  X Approval by the board or compensation committee			
				ı
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization		. [	
а	Receive a severance payment or change-of-control payment?	4a		<u>X</u>
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
¢	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		-	
			. ]	
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.	٠.		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		1	
	contingent on the revenues of			
а	The organization?	5a		
þ	Any related organization?	5b		
	If "Yes" to line 5a or 5b, describe in Part III.		. [	
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" to line 6a or 6b, describe in Part III.	' ·	į	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	.		
	not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	ļ		
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in		- 1	
	Pagulations section 53 4958-6/c/2	_		

84-0647721

Page 2

Independent Bankers of Colorado

Schedule J (Form 990) 2012

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of V	(B) Breakdown of W.2 and/or 1099-MISC compensation	C compensation	(C) Retirement and		(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base	(ii) Bonus &	(iii) Other	other deferred compensation	benefits	(D)·(l)(B)	reported as deferred in prior Form 990
		Compensation	compensation	compensation				
(1) Barbara Walker	Ξ	142,572.	0.	0.	23,671.	0	166,243.	0
utive Director	<b>3</b>	0.	0	0.	0.	0.	0.	0.
	(1)							
	(ii)							
	(0)							
	€							
	Ξ							
	: 🗉							
	€							
	Ξ							
	Θ							
	<b>E</b>							
	Ξ							
	(E)							
	Θ							
	(III)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	Θ							
	(ii)							
	Θ							
	(ii)							
	(3)			ļ				
	(ii)							
	Ξ							
	▣							
	3							
	₿							
	Ξ		]					
,	9							

Schedule J (Form 990) 2012

### **SCHEDULE O** (Form 990 or 990-EZ)

232211

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. Department of the Treasury ► Attach to Form 990 or 990-EZ. Internal Revenue Service

OMB No 1545-0047 Open to Public Inspection.

Name of the organization Independent Bankers of Colorado **Employer identification number** 84-0647721

Schedule O (Form 990 or 990-EZ) (2012)

Form 990, Part VI, Section A, line 6: Article I of the By-Laws provides that "The Corporation shall have two (2) classes of members... Active Members: Any state or national bank, industrial bank, savings and loan association, savings bank, or trust company dedicated to the preservation of an independent banking system. The principal office of an Active Member shall be located within the State of Colorado or in such states contiguous or within reasonable proximity to Colorado as the Board of Directors may from time to time approve. Associate Members: Any person, firm or corporation as may be approved from time to time for such membership by the Board of Directors. The Board of Directors shall have the right to reject the application of any person for membership on such grounds as it may deem appropriate." Form 990, Part VI, Section A, line 7a: Active members are divided into four geographical districts (by county). Each District may have three Directors on the Board. Article II(2) of the By-Laws provides: "In any year when any District is entitled to elect a Director, the President shall cause the Secretary to advise the Active Members not later than ninety (90) days prior to the annual meeting of the procedure for nominating and electing District Directors. Any Active Member within a District may nominate an officer of such member or any other member within such District for election as a Director. An officer of a member located outside the State of Colorado shall be eligible for election as a Director. Nominations shall be in writing, accepted by the nominee and submitted to the corporation office not later than fifteen (15) days after forwarding by the corporation of advice of the nominating and electing procedure. Within LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Independent Bankers of Colorado

ten (10) days thereafter, the Secretary shall cause written ballots to be mailed from the corporation office to the members of each district entitled to elect a Director, and such ballots shall be returned to the corporation office not later than thirty (30) days prior to the annual meeting. Each member of a District who is an Active Member of the corporation in good standing shall be entitled to one vote to be cast by one of its officers or directors designated by such member or otherwise authorized by these By-Laws for said purpose. There shall be no fractional votes. The candidate receiving a majority of votes cast by Active Members of the District shall be elected, but if no person receives a majority, the two persons receiving the highest number of votes shall be subject to a run-off election. The Secretary shall cause written ballots to be mailed not later than twenty (20) days prior to the annual meeting for the purpose of the run-off election and they shall be returned and received by the corporation not later than ten (10) days prior to the annual meeting. If said balloting results in a tie vote, the winner shall be chosen by the President of the corporation through the flip of a coin. Announcement of the successful candidates shall be made at the annual meeting of the corporation."

Form 990, Part VI, Section A, line 7b: At the Organization's annual business meeting held at convention, active member banks are given a copy of any draft resolutions before the meeting. A vote on these resolutions is an action item on the annual business meeting agenda. The policy resolutions include a provision "we hereby adopt, ratify, and confirm all official actions of the Officers, Directors, Committees, and Staff during the past year."

Schedule O (Form 990 or 990-EZ) (2012)		Page 2
Name of the organization  Independent Bankers of Colora	ıdo	Employer identification number 84-0647721
provided with a copy of the tax return and	it is reviewed	at their Board
meeting before the return is filed.		
Form 990, Part VI, Section B, Line 12c: Eve	ery year, all me	embers on the
board are required to read and sign the "Bo	ard of Directo	rs Conflict of
Interest Policy and Disclosure Form."		
Form 990, Part VI, Section B, Line 15: Stat	e salary and no	on-profit surveys
are reviewed by the Board and Executive Dir	ector. The Boar	rd approves any
salary recommendations.		
Form 990, Part VI, Section C, Line 19: All	documents, pol:	icies and
financial statements are available on reque	st.	
Form 990, Part XI, line 9, Changes in Net A	ssets:	
Liquidation of 100% owned subsidiary		47,187.
	<del></del>	

84-0647721 Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships ► See separate instructions. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Bankers of Colorado ▶ Attach to Form 990. Independent Name of the organization Department of the Treasury Internal Revenue Service SCHEDULER Form 990) Parti

OMB No 1545-0047

2012 Open to Public Inspection Employer identification number

independent Bankers of Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) 5,126, Colorado End-of-year assets e 4 999 Total income Legal domicile (state or foreign country) Colorado Insurance commissions Primary activity Name, address, and EIN (if applicable) of disregarded entity IBC Insurance - 82-0573547 1900 Grant St. #1120 Denver, CO 80203 Part·li.

(g) Section 512(b)(13) No × controlled entity? Yes Direct controlling entity status (if section Public charity 501(c)(3)) >1/3 from exempt Exempt Code 501(c)(3) Legal domicile (state or foreign country) Colorado classes & materials for community bankers et al Providing educational Primary activity IBC Education Foundation - 20-1593606 Name, address, and EIN of related organization 1900 Grant Street, Suite 1120 Denver CO 80203

See Part VII for Continuations For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2012

,232161 12-10-12 LHA

Page 2 84-0647721

Schedule R (Form 990) 2012 Independent Bankers of Colorado

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	Predomini (related, excluded fre	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets		ortion- ations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing e partner?	General or Percentage managing ownership	ship
			,										
Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	ganizations Taxable rporation or trust dur	as a Corpound the tax	oration or Trust (Co year.)	omplete ıf th	he organizatio	n answered "Y	es" to Form 9	90, Part IV,	line 34 b	ecause it had	one or r	nore relate	pa
(a) Name, address, and EIN of related organization	<u>V</u> c	Prim	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity		(e) Type of entity (C corp., S corp., or trust)	(f) Share of total Income		(g) Share of Fend-of-year assets	(h) Percentage ownership	Sect 512(b contra entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entire entir	No. 100 N. 13)
Independent Bankers Network, II 84-1361763, 1900 Grant Street, Denver, CO 80203	Inc Suite 1120	ATM Services endorsements	ces and nts	8	N/A	C CORP		-594	4.	0	1008		×
					r								
232162 12-10-12										Schedu	le R (Fc	Schedule R (Form 990) 2012	2012

Page 3

PartV

Transactions With Related Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Schedule R (Form 990) 2012 × Yes E 두 9 Method of determining amount involved ٥ ā ā ပ္ ₽ ₽ 9 프 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. 109,013. Negotiated contract 9,200. Negotiated contract 6,000.Negotiated contract During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? (c) Amount involved (b)
Transaction
type (a·s) Performance of services or membership or fundraising solicitations for related organization(s) b 0 Z Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity Lease of facilities, equipment, or other assets from related organization(s) Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. j Lease of facilities, equipment, or other assets to related organization(s) Sther transfer of cash or property from related organization(s) Gift, grant, or capital contribution from related organization(s) Reimbursement paid by related organization(s) for expenses Reimbursement paid to related organization(s) for expenses r Other transfer of cash or property to related organization(s) Gift, grant, or capital contribution to related organization(s) d Loans or loan guarantees to or for related organization(s) Sharing of paid employees with related organization(s) (a)
Name of other organization e Loans or loan guarantees by related organization(s) i Exchange of assets with related organization(s) Purchase of assets from related organization(s) (1) IBC Education Foundation (2) IBC Education Foundation (3) IBC Education Foundation Sale of assets to related organization(s) Dividends from related organization(s) 232163 12-10-12 Ε ۵ 匈 **3** ূত্র

Page 4

Schedule R (Form 990) 2012 Independent Bankers of Colorado

Part VI: Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

ga		1	l	ı	1	l	1	1
(k) Sentag nershij				į.				
Perc				<u> </u>				
(j) General or managing partner? Yes No								
Gen Par Yes								
hospingor- Code V-UBI General or Percentage bonate amount in box 20 managing ownership yes No (Form 1065) yes No								
G) ode V unt in chedu							]	
amor of S								
(h) spropor- tronate ocations								
<u> </u>								
of ear s	ļ	ı						
(g) Share of end-of-year assets								
S #	}		]	}				
<del></del>								
l of l		ļ					[	
(f) Share of total Income								
1	1				1			
No (1) (2) (3) (3) (4) (4)			1					
(e) Ate all partners sec 501(c)(3) orgs 2 4) Yes No								
(d) Predominant income prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the prediction in the predict	Ì							
(d) nant inc unrela d from tron 512						1		
oming ated, a fluded sectic			!	1				
Pred (reli exc under	İ							
e igu								
(c) gal domic ate or fore country)	)					1		
(c) Legal domicile (state or foreign country)						·		
(3) (2)		·						
ج ا	ļ	•						İ
(b) Primary activity							i	
(b) 1ary a								
Prin	]							
	<del>., -,-  </del>	<del></del>	<del>                                     </del>	<del>                                     </del>	<del> </del>	<del>                                     </del>	<del>                                     </del>	<del></del>
<u>z</u>								
(a) Name, address, and EIN of entrty								
(a) address, a of entity								
addr of e								
ате,								
Z								

Schedule R (Form 990) 2012

Schedule R (Form 990) 2012 Independent Bankers of Colorado 84-064//21 Page 5 Part VIII Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule R (see instructions).
Part I, Identification of Disregarded Entities:
Name, Address, and EIN of Disregarded Entity:
IBC Insurance
EIN: 82-0573547
1900 Grant St, #1120
Denver, CO 80203

Form 88	68 (Rev. 1-2013)					Page 2
	are filing for an Additional (Not Automatic) 3-Month Ex	tension.	complete only Part II and check the	s box		▶ X
-	nly complete Part II if you have already been granted an				8868.	,
	are filing for an Automatic 3-Month Extension, comple					
Part I	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	nal (no c	opies nee	ded).
			Enter filer's	identify	ng number,	see instructions
Type or	Name of exempt organization or other filer, see instru	ctions		Employe	r identificatio	n number (EIN) or
print				•		
File by the	Independent Bankers of Color	rado			84-06	47721
due date fo filing your	1 Number, Street, and footh of Saite no. If a F O. box, s	ee instruc	etions	Social se	curity number	er (SSN)
return See	1900 Grant St, Suite 1120			l		
instructions	City, town or post office, state, and zir code. For a it	oreign add	fress, see instructions			
	Denver, CO 80203					
Enter the	e Return code for the return that this application is for (file	a separa	te application for each return)			0 1
		Γ	T			<del></del>
Applicat	ion	Return	Application			Return
ls For		Code	Is For		*161 * 1. 1 * 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Code
	0 or Form 990-EZ	01		.,	2,172	
Form 990		02	Form 1041-A			08
	20 (individual)	03	Form 4720			09
Form 990		04	Form 5227			10
	O-T (sec. 401(a) or 408(a) trust)	05 06	Form 6069 Form 8870			11 12
	D-T (trust other than above) to not complete Part II if you were not already granted		<del></del>	iough, file	d Form 996	
Telepi If the If this	The Organization cooks are in the care of ► 1900 Grant St, thone No. ► (303)832-2000 organization does not have an office or place of business is for a Group Return, enter the organization's four digit of the group, check this box ► I request an additional 3-month extension of time until	Suite on the Ur Group Exe and atta	FAX No. ► (303) 832- nited States, check this box emption Number (GEN) I ich a list with the names and EINs o	2040 f this is fo	r the whole g	
	r calendar year 2012, or other tax year beginning	AO A ETITI	, and endin	a		
	he tax year entered in line 5 is for less than 12 months, co	heck reas	<del></del>	Final i	eturn	
Ī	Change in accounting period	noon rous			0.0	
7 Sta	ate in detail why you need the extension					
	dditional time is needed to p	repai	re a complete and	accur	ate ta:	ĸ
-	eturn.					
8a if ti	his application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any			
no	nrefundable credits. See instructions.		······	8a	\$	0.
<b>b</b> If the	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated			
tax	payments made include any pnor year overpayment alle	owed as a	credit and any amount paid			
pr	eviously with Form 8868.			8b	\$	0.
с Ва	lance due. Subtract line 8b from line 8a. Include your pa	yment wit	h this form, if required, by using			
EF	TPS (Electronic Federal Tax Payment System). See instru			8c	\$	0.
	<del>-</del>		et be completed for Part II o			
t is true, c	alties of perjury, I declare that I have examined this form, include orrect, and complete, and that I am authorized to prepare this fo	rm.	anying schedules and statements, and to		f my knowledg	
SIDDATHIE	I JULI WALLINGTON NI JULIU JA JA JA JA JA JA JA JA JA JA JA JA JA	. PA		LIATE	<b>&gt;</b> / ' ·	1/5

Form 8868 (Rev. 1-2013)

## **Independent Bankers of Colorado**

EIN 84-0647721 Statement Pursuant to IRC Sec. 332

This statement is being filed by the recipient of a liquidating distribution from a subsidiary corporation described in IRC Sec. 332(b)(1).

- (1) Name and EIN of the liquidating corporation:

  Independent Bankers Network

  EIN 84-1361763
- (2) Dates of all distributions during the current tax year 4/30/12 \$51,332.81
- (3) Aggregate FMV of all assets of the liquidating corporation immediately before the liquidation that have been transferred to any recipient corporation:

IBC Insurance - Value = \$10,388; Basis = \$10,388

- (4) Private letter ruling? N/A
- (5) The plan of complete liquidation was adopted on **December 20, 2011.**
- (6) The liquidation was completed on April 25, 2012.

REPORT
Ž
$\mathbf{g}$
7
7
F
Œ
0
≥
⋖
AND
Z
Õ
Ē
⋖
$\overline{a}$
ш
~
颪
Ē
2
5
ಸ

Form	m 99	Form 990 Page 10						990							
ğΥ	Asset	Description	Date Acquired	Method	Lıfe	00 c >	Unadjusted Cost Or Basis	Bus Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
		Furniture & Fixtures		Č	, (C					,		., .,	, ,,,	1 / 1	7 5, 7 7 7 7
	4 (*	Cantinets.	07/01/83	j E		9 1	135	ī Ž		-	25.7.264.5	261	· · · · · · · · · · · · · · · · · · ·	0	. 261.
	7 4.	4 2. Cabinets	07/01/84 SI	TS.	5.00	9 1	275.	3 3 3 4			135.	275.		0 0	135.
	S	S Sec'y Desk	07/01/84 SL	SI.	5.00	. 16	2,088.		<del></del>	·	2,088	2,088.		0	2,088.
	φ	6 Credenza	07/01/84 SL	SL	5,00	16	1,500.		Ę,,	,	1,500.	1,500.		Ö	1,500.
	7 8	Sec'y Deak Work Station	07/01/84 SL	SI.	5.00	, 16	1,421.	200			1,421.	1,421.	1,	0 0	1,421.
	10	9 Planters 10 Painting	07/01/84 SL 07/01/84!SL	SL	5.00	9 9 9 7	1,263.				1, 263.	1,263.	and property.	0 0	1,263.
	11	11 2 Chairs	07/01/84 SL	SL	5.00	, 16	851				851.	851.	- - · .	0 ,,	851.
	13	12 Storage & Lile Cabinets 13 Artwork	07/01/85	SI.	5.00	7 T	502.	,	· · · · · · · · · · · · · · · · · · ·	<del></del>	365	365.	<del>.</del> .	0 0	502.
_	74	14 Artwork	07/01/86 SL	SL	5.00	, 116.	457.	, ,		ţ	457.	,457.		o	457.
	15	15 Furniture	07/01/86	SL	2.00	16	13,144.			·	13,144.	13,144.			13,144.
	16	16 Artwork	07/01/88	·	7.00	HY17	3,071.	•		·	3,071.	3,071.	1%	G	3,071.
•	.17	.17 Wall Hanging	07/01/88	7.5	7.00	нх17	140.		ī		140.	140.		0	140.
	18	18 Cabinets	07/01/92 SL	SL	7.00	HY17	512.	· -	;	-	512.	512.	<del>;</del> ;		. 512
228111 05-01-12	111						(D) - Asset disposed	peso		*	ITC, Salvage,	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	ercial Revitaliz	zation Deducti	on, GO Zone

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

품
ō
ğ
<u> </u>
ő
Ĕ
\$
Ë
6
ž
٩
불
₹
á
Ē
중
ŭ
Ш
핌
2
5
₹

orm	orm 990 Page 10		}	}	-		990					-		
Asset	et Description	Date Acquired Me	Method	Life	0 c >	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
( 3.	19 Laser Printer	07/01/93 SL	- 1	5.00 Hy	HX COLUMN	1,370.		3 A 4		1,370.	1,370.		0 0	1,370.
1 = 11 1 = 11	& Scanner	07/01/96 SL 07/01/00 SL		5.00 H3	HXI 7	2,518.				2,518.	2,518.		0	2,518.
	cessories	12 00/10/70		7.00 H	HY17	858.			, , , ,	858.	858.		0	858.
16.5 2325.	25 Monitor 26 Sharp Copier	07/01/00 SL (01/02/03 SL		5.00 HY	HY17 FEET	607.	·		2 m	607.	607.	3	0	607.
	27 Sharp Fax Machine 28 Laser Jet Color Printer	01/20/04 SL	-	5.00	HXT.7	1,126.	الله الله الله الله الله الله الله الله	1,2,4 1,14,5,7 1,2,7 1,2,7 1,2,7		1,126.	1,126.	17 0 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0	1,126.
<u>.</u>	29 Computer hardware 30 ico Projector	03/02/05 SL 05/18/06 SL		5.00	HYL7	6,403.	<del></del>			6,403.	6,403.	Las at the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state o		6,403.
	31 Bw Printer 32 Phone system	07/13/07 SL 01/25/10 SL		5.00	HY17 HY17	184.		2,278,		184.	166.	2 4 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	18.	184.
	33 Intel Pentium Dual Core G840 10/04/11 SL * 990 Page 10 Total Furniture & Fixtures	0 10/04/11		5.00	, MO17	74,423.		2,278.	3,434.	68,711.	68,693.		18	68,711.
	Transportation Equipment  Subaru Outback	11/17/03 200DB	200DB	5.00	HÝ21	1 28,591.				28,591.	21,560.	-	1,775	23,335.
228						į	1			ITO Caluado	Danie Com	poronal Dounta	tration Dadie	Ann GO Zone

(D) - Asset disposed

\*ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

ORT.
Ē
N N
4TIO
TIZ/
<u>8</u>
₹
å
Ž
ΑĬ
EPR
2 DI
8

Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description   Description	E S	Form 990 Page 10				ŀ	}	}	990							
Page 10 Total  20,551  21,550  1,775, 23,331  101,054  101,054  101,054  101,054	<b>6</b>	Description	Date Acquired		Life			Inadjusted ost Or Basis		Section 179 Expense	Reduction in Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated
		Page 10 portation		1.0		1-	1 " ,	28,591.		2,278	3,434	28,591.	21,560.		1,775.	23
			· · · · · · · · · · · · · · · · · · ·		- <del></del>					3.4.						
		;	•	<u> </u>	; <del>; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; </del>			······································						* '		
					11		<del></del>		(4 (1/2))			77.				
			÷1,2		• • •				£			Constituted The Constituted The Constituted	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Profession (Control of the Control o	
								· · · · · · · · · · · · · · · · · · ·	*	Zu		13-			( , 3)	
			•				<del></del>					;	, k	,	37	, ,
			. '		. •		·		···	31		· · · · · · · · · · · · · · · · · · ·			· · · · · ·	
	۱,			· .				. ,	,				, , , , , , , , , , , , , , , , , , ,			, .