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DLN: 93493246002533

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)

2012

OMB No 1545-0047

Open to Public Inspection

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

A Fo	r the	2012 cal	endar year, or tax year beginning 06-01-2012 , 2012, and ending 05-3	1-2013			
B Ch	eck ıf a	pplicable	C Name of organization ROCKY MOUNTAIN AGRIBUSINESS		D Emplo	yer ider	ntification number
☐ Add	dress ch	nange	ASSOCIATION		84-10	97261	L
Г№	me cha	nge	Doing Business As				
┌ Ind	tıal retu	rn	Number and street (or P O box if mail is not delivered to street address) Room/su	ıte.	5 T. I		le
Гте	rmınate	d	3030 WEST 81ST AVENUE	ite	E Telepho	one num	ber
	nended		City or town, state or country, and ZIP + 4		(303)	433-4	446
		n pending	WESTMINSTER, CO 800314111				
i Abi	piicatioi	i pending			G Gross r	eceipts \$	236,024
			F Name and address of principal officer		s this a group iffiliates?	return	for
				a	illillates.		1 1651 110
				H(b) A	re all affiliate	s inclu	ded?
	v ovor	npt status	501(c)(3)	I	f "No," attach	a lıst	(see instructions)
		<u> </u>		H(c)	Group exempt	ion nun	nber ►
J W	ebsite	e:⊫ RM	AGBIZ ORG	(0)			
K For	m of or	ganızatıon	✓ Corporation Trust Association Other ►	L Year	of formation	М	State of legal domicile CO
Pa	rt I	Sum	mary	•			
	1	Briefly d	escribe the organization's mission or most significant activities				
			TE THE INTELLIGENT USE OF AGRICULTURAL CHEMICALS AND F	ERTILIZE	RS		
မှ ပ	-						
鞷	-						
Governance	2	Check th	nis box দ if the organization discontinued its operations or disposed o	of more th	an 25% of its	net as	sets
် ၁			,				
	3	Number	of voting members of the governing body (Part VI, line 1a)			3	15
<u>କ</u>	4	Number	of independent voting members of the governing body (Part VI, line 1b)			4	14
Activities &	5	Total nu	mber of individuals employed in calendar year 2012 (Part V, line 2a)			5	0
ទុ	6	Total nu	mber of volunteers (estimate if necessary)			6	
	1		related business revenue from Part VIII, column (C), line 12			7a	8,855
	Ь	Net unre	lated business taxable income from Form 990-T, line 34			7b	
					Prior Year		Current Year
a.	8		butions and grants (Part VIII, line 1h)				12,690
ii.	9	Progra	am service revenue (Part VIII, line 2g)				191,339
Ravenue	10		tment income (Part VIII, column (A), lines 3, 4, and 7d)				2,893
ш.	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				29,102
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line				236,024
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)				
	14		ts paid to or for members (Part IX, column (A), line 4)				0
	15		es, other compensation, employee benefits (Part IX, column (A), lines				
\$		5-10					0
Expenses	16a	Profes	sional fundraising fees (Part IX, column (A), line 11e)				0
ਜ਼ਿੰ	b	Total fu	ındraısıng expenses (Part IX, column (D), lıne 25) ▶				
	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)				227,641
	18		expenses Add lines 13-17 (must equal Part IX, column (A), line 25)				227,641
	19	Reven	ue less expenses Subtract line 18 from line 12				8,383
\$ \$				Begii	nning of Curre	nt	End of Year
Not Assets or Fund Balances		T . L . I	accets (Part V. June 16)	-	Year	224	
A.S.	20		assets (Part X, line 16)		619,	224	627,717
8,5 2,5	21 22		liabilities (Part X, line 26)	·	619,	334	627,717
					019,.	334	027,717
	rt II		ature Block				
			perjury, I declare that I have examined this return, including accompan belief, it is true, correct, and complete Declaration of preparer (other th				
			nowledge		,		
		1,					
		****	*** ature of officer		2013-07-31 Date		
Sigr		'			Date		
Her	ਵ		DODGE PRESIDENT or print name and title				
		<u> 11 </u>	·	ate	Check I if	PTIN	
Paid	Ч			013-09-02	Check If self-employed		
			Firm's name ► J K DAHL PC CPA		Firm's EIN 🕨		
	pare		Firm's address ► PO BOX 4548		Phone no (303	1 790-70	200
USE	On	ı y ˈ			,ene no (505	, . 50-75	
			PARKER, CO 801341453				——————————————————————————————————————
May	the IR	S discus	ss this return with the preparer shown above? (see instructions) $$. $$.				Yes No

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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		No
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? <i>If</i> "Yes," complete Schedule C, Part II	4		
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		No
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? If "Yes," complete Schedule D, Part IV	9		No
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		No
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		No
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		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Νo
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Νo
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	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		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
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		No
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 $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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 1^2 If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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		No
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
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 of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	ı		
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
c	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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

art					_
	Check if Schedule O contains a response to any question in this Part V	<u> </u>		Yes	. No
1a Er	iter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a	٥Г	\dashv		140
	iter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0			
	d the organization comply with backup withholding rules for reportable payments to vendors and reportable	\dashv			
ga	ming (gambling) winnings to prize winners?		1c		
2a Er Ta	ter the number of employees reported on Form W-3, Transmittal of Wage and x Statements, filed for the calendar year ending with or within the year covered				
b If	this return	0	2b		
NC	ete. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	ŀ			
a Di	d the organization have unrelated business gross income of \$1,000 or more during the year?	L	3a		Νo
b If	"Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	L	3b		
٥v	any time during the calendar year, did the organization have an interest in, or a signature or other authority er, a financial account in a foreign country (such as a bank account, securities account, or other financial count)?	'	4a		No
	"Yes," enter the name of the foreign country	-			
T 1	"Yes," enter the name of the foreign country F .e instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Account	s			
- \^/·	as the organization a party to a prohibited tay shelter transaction at any time during the tay year?	-			N o
	as the organization a party to a prohibited tax shelter transaction at any time during the tax year? dany taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	 	5a		No No
			5b		1/1 0
c If	"Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
ia Do	bes the organization have annual gross receipts that are normally greater than \$100,000, and did the		6a		Νo
or	ganization solicit any contributions that were not tax deductible as charitable contributions?				
we	"Yes," did the organization include with every solicitation an express statement that such contributions or government that such contributions or	. –	6b		
	ganizations that may receive deductible contributions under section 170(c). d the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods ai	nd	7a		
se	rvices provided to the payor?	L			
	"Yes," did the organization notify the donor of the value of the goods or services provided?	-	7b		
	d the organization sell, exchange, or otherwise dispose of tangible personal property for which it was require	d to	7c		
	"Yes," indicate the number of Forms 8282 filed during the year	·			
	d the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit ntract?		7e		
	d the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	H	7f		
	the organization received a contribution of qualified intellectual property, did the organization file Form 889	⊢			
_	quired?	ا ا	7g		
	the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file rm 1098-C?	а	7h		
th	onsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Die supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess	d			
	siness holdings at any time during the year?	L	8		
_	onsoring organizations maintaining donor advised funds.				
	d the organization make any taxable distributions under section 4966?		9a		
	d the organization make a distribution to a donor, donor advisor, or related person?	L	9b		
	ction 501(c)(7) organizations. Enter				
b Gr	itiation fees and capital contributions included on Part VIII, line 12 10a 10b				
	ction 501(c)(12) organizations. Enter				
	ross income from members or shareholders				
b Gr	oss income from other sources (Do not net amounts due or paid to other sources ainst amounts due or received from them)				
	ction 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
	"Yes," enter the amount of tax-exempt interest received or accrued during the				
	ar				
Se	ction 501(c)(29) qualified nonprofit health insurance issuers.				
	the organization licensed to issue qualified health plans in more than one state? •te. See the instructions for additional information the organization must report on Schedule O		13a		
	ter the amount of reserves the organization is required to maintain by the states				
	which the organization is licensed to issue qualified health plans				
	d the organization receive any payments for indoor tanning services during the tax year?	\dashv	14a		Νo
	"Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	⊢	14a 14h		140

Form 990 (2012) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
	year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? \cdot	5		Νo
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		N o
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	organization's maining address. It less, provide the hames and addresses in Schedule O			
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	_		
	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ue Cod	e.) No
10a	Did the organization have local chapters, branches, or affiliates?	_		e.)
10a b	Did the organization have local chapters, branches, or affiliates?	evenu		e.) No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	evenu 10a		e.) No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	e.) No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a	Yes	e.) No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes	No No No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13	Yes	No No No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10a 10b 11a 12a 12b 12c 13	Yes	No No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes	No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official O ther officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10a 10b 11a 12a 12b 12c 13 14 15a	Yes	No No No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►ROCKY MTN AGRIBUSINESS ASSOC 3030 WEST 81ST AVENUE WESTMINSTER, CO (303)433-4446

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- 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, or 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

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

Organizations below dotted line) Organizations below dotted line) Organizations below dotted line) Organizations below dotted line) Organizations driving for the following following for the following for the following following for the following following for the following following for the following following following for the following follow	(A) Name and Title	(B) A verage hours per week (list any hours for related		person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
VICE PRESIDE X		below	ndividual trustee or director	Institutional Trustee	Жісеі	(e) emplojee	tighest compensated employee	=ormer			and related
C) CHAD MARARVILLE	(1) KEITH DEVOE		х		Х				0	0	0
DIRECTOR											
3) MIKE DODGE			x						o	o	0
Name											
PRESIDENT	(3) MIKE DODGE		_x		х				٨	n	0
DIRECTOR			^		^				Ŭ	Ů	
DIRECTOR	(4) WILL EITZMAN								0	0	0
TREASURER	DIRECTOR		^						٥	U	0
TREASURER	(5) LISA ANGERAMI									_	
GENTRET	TREASURER		X		Х				0	0	0
DIRECTOR (7) TOM HERSHEY											
(7) TOM HERSHEY	DIRECTOR		Х						0	0	0
DIRECTOR											
(8) LANNY HUSTON DIRECTOR (9) TONY LEIGHTY PAST-PRESIDE (10) LARRY TAPPY DIRECTOR (11) GARY LEEPER (12) SANDRA MCDONALD DIRECTOR (13) KEVIN FREUND DIRECTOR (14) DR PRITCHETT X EX-OFFICIO (15) MEGAN DATWYLER X D 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			х						0	0	0
DIRECTOR X											
(9) TONY LEIGHTY PAST-PRESIDE (10) LARRY TAPPY (10) LARRY TAPPY X DIRECTOR (11) GARY LEEPER X EXECUTIVE DI (12) SANDRA MCDONALD DIRECTOR (13) KEVIN FREUND DIRECTOR (14) DR PRITCHETT EX-OFFICIO (15) MEGAN DATWYLER X D O O O O O O O O O O O O			х						0	0	0
PAST-PRESIDE (10) LARRY TAPPY X DIRECTOR (11) GARY LEEPER EXECUTIVE DI (12) SANDRA MCDONALD DIRECTOR (13) KEVIN FREUND DIRECTOR (14) DR PRITCHETT EX-OFFICIO (15) MEGAN DATWYLER X DO DO DO DO DO DO DO DO DO											
Color Colo	(9) TONY LEIGHTY		x						0	0	0
DIRECTOR											
DIRECTOR	(10) LARRY TAPPY		x						0	0	0
X			^						Ŭ	Ů	
EXECUTIVE DI	(11) GARY LEEPER									0	0
X	EXECUTIVE DI		^						o o	U	0
DIRECTOR	(12) SANDRA MCDONALD								_	_	
X	DIRECTOR		X						0	0	0
DIRECTOR											
(14) DR PRITCHETT X 0 0 EX-OFFICIO X 0 0 (15) MEGAN DATWYLER X 0 0	DIRECTOR		X						0	0	0
X						\vdash					
(15) MEGAN DATWYLER X 0 0 0			Х						0	0	0
		-									
DIRECTOR			х						0	0	0
	DIRECTOR	-									
											Form 990 (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A)	(B)			(C)				(D)		(E)	T	(F)	
	Name and Title	Average hours per	Posi more t	tion ((do r		heck		Reporta compens		Reportable compensation	_	Estima mount of	
		week (list	perso	n is	both	and	officer	•	from th	ne	from related	- -	compens	ation
		any hours for related					stee)		organization 2/1099-M		organizations (W 2/1099-MISC)		from t rganızatı	
		organizations below	Individual trustae or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former					relate organiza	
		dotted line)	20 20 20	<u>∏</u>	<u> -</u>) P) () () () () () () () () () () () () ()	单					J	
			trus	<u>5</u>) ee	을							
			8	Til St.			ensa							
				ď			# ed							
												+		
												-		
1b	Sub-Total			•				►						
C	Total from continuation sheet	s to Part VII, S	ection A	١.		•		•						
d					•	•	•	•						
2	Total number of individuals (in \$100,000 of reportable compe					liste	d abov	e) w	ho received	more th	ian			
													Yes	No
3	Did the organization list any fo						emplo	yee	, or highest o	ompen	sated employee			
	on line 1a? If "Yes," complete S						• .	•		•		3		N o
4	For any individual listed on line organization and related organ													
	ındıvıdual		• •		•	•		•				4		No
5	Did any person listed on line 1 services rendered to the organ									nization 	or individual for	_		
			5.1101							_ •	· · ·	5		No_
	ection B. Independent Co											_		
1	Complete this table for your five compensation from the organization												tax year	
		(A) lame and business	-						<u>-</u>		(B) cription of services		(C)	
	IV	Lattic and Dublic55								Des	Supplier of Services	\pm	Сотпреп	544011
												+		
												#		
									1			- 1		

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Part VII	i i	Statement of Revenue	on the Doub VIII			
		Check if Schedule O contains a response to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
10 1	1a	Federated campaigns 1a				311
Contributions, Giffs, Grants and Other Similar Amounts	b	Membership dues 1b				
<u> </u>	c	Fundraising events 1c				
ffs, FA,	d	Related organizations 1d				
:5 <u>:</u> 2	e	Government grants (contributions) 1e				
Sin						
黃草	f	All other contributions, gifts, grants, and similar amounts not included above 11,690				
₽ ₹	g	Noncash contributions included in lines 1a-1f \$				
ja ja	h	Total. Add lines 1a-1f	12,690			
		Business Code				
Program Service Revenue	2a	MEMBERSHIP DUES	84,102			84,102
34. 24.	b	WINTER CONFERENCE	76,017			76,017
93	c	SUMMER CONFERENCE	31,220			31,220
er E	d					
S	e					
<u>≅</u>	f	All other program service revenue				
Ě	g	Total. Add lines 2a-2f	191,339			
	3	Investment income (including dividends, interest,	2,893			2,893
	4	and other similar amounts) Income from investment of tax-exempt bond proceeds				
	5	Royalties				
		(ı) Real (ıı) Personal				
	6a	Gross rents				
	b	Less rental expenses				
	c	Rental income or (loss)				
•	d	Net rental income or (loss)				
	_	(I) Securities (II) Other				
	7a	Gross amount from sales of				
		assets other than inventory				
	b	Less cost or other basis and				
	С	sales expenses Gain or (loss)				
	d	Net gain or (loss)				
	8a	Gross income from fundraising events (not including				
Other Revenue		of contributions reported on line 1c) See Part IV, line 18				
<u>.</u>	b	Less direct expenses b				
∄ ∂	c	Net income or (loss) from fundraising events				
_	9a	Gross income from gaming activities See Part IV, line 19				
	ь	Less direct expenses b				
	c	Net income or (loss) from gaming activities				
	0a	Gross sales of inventory, less				
		returns and allowances .				
	b	Less cost of goods sold b				
		Net income or (loss) from sales of inventory				
		Miscellaneous Revenue Business Code				
1:	1a	SCHOLARSHIP FUND AND	13,969			13,969
	ь	MISC SALE OF DIRECTORY 511140	8,855		8,855	
		SALE OF BIRECTORY	6,278		0,000	6,278
	c d	INSURANCE SPONSORSHIP All other revenue	5,2.0			5,270
	e	Total. Add lines 11a−11d				
	_		29,102			

Form 990 (2012) Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizat	ions must comp	olete column (A)	
	Check if Schedule O contains a response to any question in this Pai	t IX			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, 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, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				_
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management	63,406		63,406	
b	Legal				
C	Accounting	501		501	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	1,114		1,114	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	4,210	4,210		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	68,576	68,576		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,661		1,661	
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 O)				
a	GOVERNMENT AG FORUM	27,817	27,817		
b	PUBLIIC RELATIONS	18,473	18,473		
С	COLORADO FFA	12,500	12,500		
d	COGS	8,159	8,159		
е	All other expenses	21,224	8,698	12,526	
25	Total functional expenses. Add lines 1 through 24e	227,641	148,433	79,208	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

art X	Bal	ance	Sł	1ee	et

		Check if Schedule O contains a response to any question in this Part	: x			
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		35,116	1	36,275
	2	Savings and temporary cash investments		584,218	2	591,442
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, direct employees, and highest compensated employees Complete Part II Schedule L	ors, trustees, key		5	
ste	6	Loans and other receivables from other disqualified persons (as defined section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, a employers and sponsoring organizations of section $501(c)(9)$ volumbeneficiary organizations (see instructions) Complete Part II of Sch	nd contributing tary employees'		6	
assets a	7	Notes and loans receivable, net			7	
₹.	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis Complete Part				
	100	VI of Schedule D	10a			
	ь	Less accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11		12		
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		619,334	16	627,717
	17	Accounts payable and accrued expenses			17	·
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule			21	
ities	22	Loans and other payables to current and former officers, directors, t			21	
	22	key employees, highest compensated employees, and disqualified	•			
Liabi		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties .			23	
	24	Unsecured notes and loans payable to unrelated third parties .			24	
	25	Other liabilities (including federal income tax, payables to related the and other liabilities not included on lines 17-24) Complete Part X of	of Schedule		25	
	2.	D		0	25	0
	26	Total liabilities. Add lines 17 through 25		0	26	
л Ф		Organizations that follow SFAS 117 (ASC 958), check here ► and lines 27 through 29, and lines 33 and 34.	id complete			
Ē n	27	Unrestricted net assets			27	
 	28	Temporarily restricted net assets			28	_
<u>=</u>	29	Permanently restricted net assets			29	
3		Organizations that do not follow SFAS 117 (ASC 958), check here	+ ✓ and			
5		complete lines 30 through 34.	•			
sets of Fund Balance	30	Capital stock or trust principal, or current funds			30	
Ϋ́	31	Paid-in or capital surplus, or land, building or equipment fund			31	
î	32	Retained earnings, endowment, accumulated income, or other funds		619,334	32	627,717
Ę	33	Total net assets or fund balances		619,334	33	627,717
_	34	Total liabilities and net assets/fund balances		619,334	34	627,717

_						-9
Par	t XI	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				<u>Г</u>
1	Total	revenue (must equal Part VIII, column (A), line 12)	1		2	236,024
2	Total	expenses (must equal Part IX, column (A), line 25)	2		2	227,641
3	Rever	nue less expenses Subtract line 2 from line 1	3			8,383
4	Neta	ssets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		6	519,334
5	Net u	nrealized gains (losses) on investments	5			
6	Donat	red services and use of facilities	6			
7	Inves	tment expenses	7			
8	Prior	period adjustments	8			
9	O ther	changes in net assets or fund balances (explain in Schedule O)	9			
10		ssets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, in (B))	10		6	527,717
Par	t XII	Financial Statements and Reporting				
		Check if Schedule O contains a response to any question in this Part XII				. \sqsubset
					Yes	No
1		unting method used to prepare the Form 990				
2a	Were	the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
		s,' check a box below to indicate whether the financial statements for the year were compiled or revien The basis, consolidated basis, or both	wed or	۱		_
	Γs	eparate basis				
b	Were	the organization's financial statements audited by an independent accountant?		2b		No
		s,' check a box below to indicate whether the financial statements for the year were audited on a sepa , consolidated basis, or both	arate			
	Γs	eparate basis				
C		s," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversightive review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e 2c		
	If the Sched	organization changed either its oversight process or selection process during the tax year, explain i fule O	n			
За		result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	е	3a		
b		s," did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	require	d 3b		

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Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

• Attach to Form 990 or 990-EZ.

Supplemental Information to Form 990 or 990-EZ

Ор

Name of the organization ROCKY MOUNTAIN AGRIBUSINESS ASSOCIATION Employer identification number

84-1097261

ldentifier	Return Reference	Explanation
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	THE 990 IS PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL PRIOR TO FILING
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	OFFICERS AND DIRECTORS ARE POLLED ANNUALLY
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	EXECUTIVE DIRECTOR IS EMPLOYED MY THE MANAGEMENT COMPANY NOT THE ORGANIZET ION ALL OTHER OFFICERS ARE VOLUNTEERS
COMPENSATION PROCESS FOR OFFICERS	FORM 990, PAGE 6, PART VI, LINE 15B	ORGANIZATION'S OFFICERS ARE ALL VOLUNTEERS
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	UPON WRITTEN REQUEST