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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Form 990 (2013)

À For the 2013 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable Address change LA PLATA COUNTY ENERGY COUNCIL, INC. Name change 84-1473629 Doing Business As Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-PO BOX 3833 (970)259-1301 Amended 320,834 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Applica-DURANGO, CO 81302 H(a) Is this a group return pending F Name and address of principal officer. for subordinates? Yes X No Yes H(b) Are all subordinates included? Tax-exempt status: 501(c)(3) **X** 501(c) () ◀ (insert no.) 4947(a)(1) or If "No." attach a list (see instructions) J Website: ► N/A **H(c)** Group exemption number ▶ K Form of organization; X Corporation Trust Other > Association L Year of formation: 1998 M State of legal domicile: CO Part I | Summary Briefly describe the organization's mission or most significant activities THE ENERGY COUNCIL WORKS TO Governance IMPROVE UNDERSTANDING OF THE NATURAL GAS INDUSTRY IN LA PLATA COUNTY Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets 8 Number of voting members of the governing body (Part VI, line 1a) 42 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 0 0 Total number of volunteers (estimate if necessary) 6 246. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, ine 34 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 187,904 110,731. Program service revenue (Part VIII, line 2g) 413,704 193,057. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 406 246. 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 6,305. 3,378. 11 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 608,319 307,412. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 23,139 20,690. Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 130,000. 120,000. 16a Professional fundraising fees (Part IX column (A), line 11e) 0. 0. 0. b Total fundraising expenses (Part IX, column (D) Time 25) 426,918. 231,100. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 580,057. 371,790. 28,262. -64,378. Revenue less expenses Subtract line 18 from line 12 Assets or Balances **Beginning of Current Year** End of Year 293,318. 228,940. 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 0. 0 293 Net assets or fund balances Subtract line 21 from line 20 318. 228,940. | 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 Signature of officer 16/2014 Date Sign CHRIS LOPEZ. SECRETARY/TREASURER Here Type or print name and title PTIN Print/Type preparer's name Preparer's signature Paid SHIRLEY J. CROM P00309853 self-employed Firm's name HALEY, CROM & WILKINSON, Preparer 84-0927507 Fırm's EIN ▶ **Use Only** Firm's address

3059 MAIN AVENUE DURANGO, CO 81301-4279 Phone no. (970) 247-2065 May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

	990 (2013) LA PLATA COUNTY ENERGY COUNCIL, INC. 84-14/3029 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: THE ENERGY COUNCIL MODES TO THE DESCRIPTION OF THE NATIONAL CASE
	THE ENERGY COUNCIL WORKS TO IMPROVE UNDERSTANDING OF THE NATURAL GAS INDUSTRY IN LA PLATA COUNTY, THROUGH COMMUNITY, GOVERNMENT, AND MEDIA
	RELATIONS EFFORTS.
	REDATIONS EFFORIS.
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	(Code) (Expenses \$
	CONTRIBUTIONS TO LOCAL CHARITIES AND COMMUNITY ORGANIZATIONS, PROVIDED
	SCHOLARSHIPS TO STUDENTS FROM THE COMMUNITY.
4b	(Code) (Expenses \$ 149,367. including grants of \$) (Revenue \$ 193,057.)
	MAINTENANCE OF PRIVATE ROADS WHICH ARE USED BY HOMEOWNERS TO ACCESS
	THEIR HOMES AND ALSO USED BY COMPANIES WHO ARE IN THE NATURAL GAS
	INDUSTRY TO MAINTAIN THEIR WELLS. GOOD NEIGHBOR POLICY.
A -	4 600
4c	(Code) (Expenses \$4,680. including grants of \$) (Revenue \$) COLLECT MONEY FROM GAS COMPANIES TO HIRE A CONSULTANT TO REPRESENT THE
	COLLECT MONEY FROM GAS COMPANIES TO HIRE A CONSULTANT TO REPRESENT THE AREA AT WATER RULE SETTING MEETINGS.
	AREA AT WATER ROLL SETTING MEETINGS.
4d	Other program services (Describe in Schedule O)
74	(Expenses \$ 705 • including grants of \$) (Revenue \$)
4e	Total program service expenses ► 175,442.

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
•	If "Yes," complete Schedule A	1		X_
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			•
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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		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			
	Schedule D, Part III	8		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?			
	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			٠,,
	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, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		v	
	Part VI	11a	X	
Ð	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	445		х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b		
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	110		
u	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
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		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13_		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			Ì
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	 	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			,
	complete Schedule G, Part III	19	-	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	1	X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	2012
		rom	י ספט	2013)

LA PLATA COUNTY ENERGY COUNCIL, INC. 84-1473629 Form 990 (2013) Page 4 Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II X 21 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX. 22 column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 X Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X Schedule J 23 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 25a X 24a 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 pnor Forms 990 or 990-EZ? If "Yes," complete Schedule L. Part L 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, X 26 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 Х 27 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): X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X 28b 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 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M X 30 Did the organization liquidate, terminate, or dissolve and cease operations? X If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II X 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and X Part V. line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? Х 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

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X

35b

36

37

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

If "Yes," complete Schedule R, Part V, line 2

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

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

X

7a

7b

7с

7е

7f

7g

7h

8

LA PLATA COUNTY ENERGY COUNCIL, INC. 84-1473629 Form 990 (2013) Page 5 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? X За b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a

X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c

6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b

7 Organizations that may receive deductible contributions under section 170(c). 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?

b If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?

d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?

h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?

Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

9 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?

b Did the organization make a distribution to a donor, donor advisor, or related person?

10 Section 501(c)(7) organizations. Enter:

Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

Section 501(c)(12) organizations. Enter Gross income from members or shareholders

Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Section 501(c)(29) qualified nonprofit health insurance issuers. 13

a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O

b 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

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sch

			9a	<u> </u>	
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	11b				
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edule	<u> 0</u>		14b		
			Form	990	(2013)

Form 990 (2013) LA PLATA COUNTY ENERGY COUNCIL, INC. 84-1473629 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X			
Sec	tion A. Governing Body and Management			يهمي			
000	tion A. doverning body and management		Yes	No			
10	Enter the number of voting members of the governing body at the end of the tax year 8		103	140			
Ia	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							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	_		17			
	officer, director, trustee, or key employee?	2_		X			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision						
	of officers, directors, or trustees, or key employees to a management company or other person?	_3_		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X			
6	Did the organization have members or stockholders?	_6_	_X_				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		x				
	more members of the governing body?						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or						
	persons other than the governing body?						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
а	The governing body?	8a	X				
b							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		Х				
_	organization's mailing address? If "Yes," provide the names and addresses in Schedule O						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			X			
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х			
	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?	10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		х			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		х			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b					
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120					
C	in Schedule O how this was done	400					
42	Did the organization have a written whistleblower policy?	12c		X			
13	·	13		X			
14	Did the organization have a written document retention and destruction policy?	14		<u> </u>			
15	Did the process for determining compensation of the following persons include a review and approval by independent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			٠,			
	The organization's CEO, Executive Director, or top management official	15a		X			
b	Other officers or key employees of the organization	15b		X			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a						
	taxable entity during the year?	16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's						
	exempt status with respect to such arrangements?	16b					
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ► NONE						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are	avaılab	le				
	for public inspection. Indicate how you made these available. Check all that apply.						
	Own website Another's website X Upon request Other (explain in Schedule O)						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncıal				
	statements available to the public during the tax year						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion.	•				
	CHRISTI ZELLER - (970) 259-1301	_					
	P.O. BOX 3833, DURANGO, CO 81302						
			- :				

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

Check if Schedule O contains a response or note to any line 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.

Nours for related organizations below line PRESIDENT		
Connected content more than one body and officer and a director/trustee) Compensation of from related organizations below line) Dave Brown D. 00 D. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	(F)	
hours per week (list any hours for related organizations below line) (1) DAVE BROWN PRESIDENT (2) LISA WINN VICE PRESIDENT (3) CHRIS LOPEZ SECRETARY/TREASURER (4) BRAD ROGERS (4) BRAD ROGERS DIRECTOR (5) HEATHER MCDANIEL DIRECTOR (6) RANDY VANDENBERG DIRECTOR DIRECTOR DIRECTOR DIRECTOR DIRECTOR DOWN Week (list any hours for related organization from related organizations from related organizations (W-2/1099-MISC) (W-2/1099-MISC) Week (list any hours for related organization (W-2/1099-MISC)	Estimated amount of	
Companies Comp		
(1) DAVE BROWN PRESIDENT (2) LISA WINN VICE PRESIDENT (3) CHRIS LOPEZ SECRETARY/TREASURER (4) BRAD ROGERS DIRECTOR (5) HEATHER MCDANIEL DIRECTOR (6) RANDY VANDENBERG DIRECTOR X 0.00 X 0.00 C.00 C.00	other	
(1) DAVE BROWN PRESIDENT (2) LISA WINN VICE PRESIDENT (3) CHRIS LOPEZ SECRETARY/TREASURER (4) BRAD ROGERS DIRECTOR (5) HEATHER MCDANIEL DIRECTOR (6) RANDY VANDENBERG DIRECTOR X O. O. O. O. O. O. O. O. O.	compensation	
(1) DAVE BROWN PRESIDENT (2) LISA WINN VICE PRESIDENT (3) CHRIS LOPEZ SECRETARY/TREASURER (4) BRAD ROGERS DIRECTOR (5) HEATHER MCDANIEL DIRECTOR (6) RANDY VANDENBERG DIRECTOR X O. O. O. O. O. O. O. O. O.	from the	
(1) DAVE BROWN PRESIDENT (2) LISA WINN VICE PRESIDENT (3) CHRIS LOPEZ SECRETARY/TREASURER (4) BRAD ROGERS DIRECTOR (5) HEATHER MCDANIEL DIRECTOR (6) RANDY VANDENBERG DIRECTOR X O. O. O. O. O. O. O. O. O.	organization and related	
(1) DAVE BROWN PRESIDENT (2) LISA WINN VICE PRESIDENT (3) CHRIS LOPEZ SECRETARY/TREASURER (4) BRAD ROGERS DIRECTOR (5) HEATHER MCDANIEL DIRECTOR (6) RANDY VANDENBERG DIRECTOR X O. O. O. O. O. O. O. O. O.	organizations	
(1) DAVE BROWN PRESIDENT (2) LISA WINN VICE PRESIDENT (3) CHRIS LOPEZ SECRETARY/TREASURER (4) BRAD ROGERS DIRECTOR (5) HEATHER MCDANIEL DIRECTOR (6) RANDY VANDENBERG DIRECTOR X 0.00 X 0.00 C.00 C.00	Organizations	
(2) LISA WINN VICE PRESIDENT (3) CHRIS LOPEZ SECRETARY/TREASURER (4) BRAD ROGERS DIRECTOR (5) HEATHER MCDANIEL DIRECTOR (6) RANDY VANDENBERG DIRECTOR X O. O. O. O. O. O. O. O. O.		
VICE PRESIDENT X 0. 0. (3) CHRIS LOPEZ 0.00 0. 0. SECRETARY/TREASURER X 0. 0. (4) BRAD ROGERS 0.00 0. 0. DIRECTOR X 0. 0. (5) HEATHER MCDANIEL 0.00 0. 0. DIRECTOR X 0. 0. (6) RANDY VANDENBERG 0.00 X 0. 0. DIRECTOR X 0. 0. 0.	0 .	
(3) CHRIS LOPEZ SECRETARY/TREASURER X 0.00 (4) BRAD ROGERS DIRECTOR X 0.00 (5) HEATHER MCDANIEL DIRECTOR X 0.00 DIRECTOR X 0.00 DIRECTOR X 0.00 O.00 DIRECTOR X 0.00 O.00 O.00 DIRECTOR X 0.00 O.00 O.00 DIRECTOR X 0.00	_	
SECRETARY/TREASURER	0	
(4) BRAD ROGERS 0.00 DIRECTOR X (5) HEATHER MCDANIEL 0.00 DIRECTOR X (6) RANDY VANDENBERG 0.00 DIRECTOR X	0	
DIRECTOR X 0. 0.	0	
(5) HEATHER MCDANIEL	0	
DIRECTOR X 0. 0. (6) RANDY VANDENBERG 0.00 X 0. 0. DIRECTOR X 0. 0.		
(6) RANDY VANDENBERG DIRECTOR X 0.00 X 0.00	0	
DIRECTOR X 0. 0.		
F0 00	0	
(7) CHRISTI ZELLER 50.00		
EXECUTIVE DIRECTOR X 120,000. 0.	0	
(8) KELLIE CAMPBELL 0.00		
DIRECTOR X 0. 0.	0	
 		
 		
- - - - - - - - - - 		
 		

1b Sub-total

332008 10-29-13

d Total (add lines 1b and 1c)

Section B. Independent Contractors

(A)

Name and title

ndividual trustee or

(B)

Average

hours per

week

(list any

hours for

related

organizations

below

line)

Form **990** 2013)

\$100,000 of compensation from the organization

c Total from continuation sheets to Part VII, Section A

line 1a? If "Yes," complete Schedule J for such individual

(A)

Name and business address

compensation from the organization

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

LA PLATA COUNTY ENERGY COUNCIL, INC. Form 990 (2013) 84-1473629 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (B) (D) Revenue excluded from tax under Related or Total revenue exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 90,796. **b** Membership dues 1b 19,935 c Fundraising events 1c 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 \$ 110,731 h Total. Add lines 1a-1f **Business Code** 2 a COLLECTIONS FOR ROADS 193,057. 900099 193,057. Program Service Revenue f All other program service revenue 193,057 g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 246. 246. Income from investment of tax-exempt bond proceeds Rovalties (ii) Personal (i) Real 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ 19,935. of contributions reported on line 1c). See 16,800 Part IV, line 18 13,422 **b** Less: direct expenses 3,378. 3,378. 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** 11 a b d All other revenue

3,378

246.

307,412.

193,057.

e Total. Add lines 11a-11d

Total revenue See instructions.

Sect	on 501(c)(3) and 501(c)(4) organizations must com, Check if Schedule O contains a respon			omplete column (A)	
	not include amounts reported on lines 6b,	(A)	(B) Program service	(C)	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	Management and general expenses	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	20,690.	20,690.		
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,	100 000		400 000	
	trustees, and key employees	120,000.		120,000.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)		 -	<u></u>	
7	Other salaries and wages			<u> </u>	
8	Pension plan accruals and contributions (include				
•	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits Payroll taxes			.,,	
10 11	Fees for services (non-employees)				
''		3,378.		3,378.	
a b		3,370.		3,370.	
c	, * .	1,100.		1,100.	- "
	Lobbying	1,100.		1,100.	
e	D. ()	•			
f	Investment management fees				<u></u>
g	Other (If line 11g amount exceeds 10% of line 25,				
Ū	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	1,313.		1,313.	
13	Office expenses .	604.		604.	
14	Information technology				
15	Royalties				
16	Occupancy	657.		657.	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	· · · · · · · · · · · · · · · · · · ·			
20	Interest Payments to offiliates		·		-
21	Payments to affiliates	83.		02	
22 23	Depreciation, depletion, and amortization Insurance			83.	
23 24	Other expenses. Itemize expenses not covered				-
27	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	DOAD WATEHERINGE	145,454.	145,454.		·-
b	TRANSFER	60,084.		60,084.	· –
c	CONTRACT SERVICES	4,680.	4,680.		
d	REIMBURSED EXPENSES	3,913.	3,913.		
е	All other expenses	9,834.	705.	9,129.	
25	Total functional expenses Add lines 1 through 24e	371,790.	175,442.	196,348.	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 rf fatlowing SOP 98-2 (ASC 958-720)				

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	25,344.	1	12,949.
	2	Savings and temporary cash investments	267,891.	2	215,991.
	3	Pledges and grants receivable, net		3	
	4	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		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ιχ		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	·
As	8	Inventories for sale or use		8	-
	9	Prepaid expenses and deferred charges		9	
	-	Land, buildings, and equipment: cost or other	· ···-		
	'	basis Complete Part VI of Schedule D 10a 2,865.			
	Ь	Less: accumulated depreciation 10b 2,865.	83.	10c	0.
	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)	293,318.	16	228,940.
	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 D		21	
S	22	Loans and other payables to current and former officers, directors, trustees,			
Ĕ		key employees, highest compensated employees, and disqualified persons			
Liabilities		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 third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26_	Total liabilities. Add lines 17 through 25	0.	26	0.
		Organizations that follow SFAS 117 (ASC 958), check here ▶			
မွ		complete lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets .		27	
Ba	28	Temporanly restricted net assets		28	
פ	29	Permanently restricted net assets		29	
Ţ	<u> </u>	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ X			
ğ		and complete lines 30 through 34.			
sets	30	Capital stock or trust principal, or current funds	0.	30	0.
Ase	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	293,318.	32	228,940.
~	33	Total net assets or fund balances	293,318.	33	228,940.
	34	Total liabilities and net assets/fund balances	293,318.	34	228,940.

Form **990** (2013)

	990 (2013) LA PLATA COUNTY ENERGY COUNCIL, INC.	<u>84-147</u>	3629	Page 12
Pa	t XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
		ĺ		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	307	,412.
2	Total expenses (must equal Part IX, column (A), line 25)	2	371	<u>,790.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	-64	.,378.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	293	,318.
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	228	,940.
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
			`	Yes 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 Schedule	Ο.	1 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 reviewed	d on a		
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
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 separat	e basis,	1	
	consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,	1	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O		
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt		
	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	red audit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
			Form §	990 (2013)

10-29-13

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

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

► See separate instructions. Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

• ;	Section 501(c)(4), (5), or (6) organiza	<u>itions: Complete Part III</u>				
Nam	ne of organization				Empl	oyer identification number
		A COUNTY ENERGY		ic.		84-1473629
Pa	ort I-A Complete if the org	ganization is exempt un	der section 501(c	or is a section	527 o	rganization.
2	Provide a description of the organize Political expenditures . Volunteer hours	zation's direct and indirect politi	ical campaign activities	ın Part IV.	▶\$	
Pa	rt I-B Complete if the ord	ganization is exempt un	der section 501(c)	(3).		
1	Enter the amount of any excise tax			X.7	▶\$	
2	Enter the amount of any excise tax	incurred by organization manage	gers under section 495	5	▶ \$	
3	If the organization incurred a section	on 4955 tax, did it file Form 472	0 for this year?			Yes No
4a	Was a correction made?					Yes No
	If "Yes," describe in Part IV					
Pa	irt I-C Complete if the org	ganization is exempt un	der section 501(c	, except section	1 501(c	c)(3).
1	Enter the amount directly expende	d by the filing organization for s	ection 527 exempt fund	ction activities	▶\$	
2	Enter the amount of the filing organ	nization's funds contributed to o	other organizations for s	section 527		
	exempt function activities				▶\$	· · · · · · · · · · · · · · · · · · ·
3	Total exempt function expenditures	s Add lines 1 and 2 Enter here	and on Form 1120-PO	<u>_</u>		
	line 17b			•	▶\$	
	Did the filing organization file Form	•				└ Yes
5	Enter the names, addresses and en made payments. For each organization contributions received that were pre-	ation listed, enter the amount pa	aid from the filing organ	zation's funds. Also	enter th	e amount of political
	political action committee (PAC). If				•	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid filing organizat funds. If none, er	on's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0
						

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

Schedule C (Form 990 or 990-EZ) 2013

332041 11-08-13

Schedule C (Form 990 or 990-EZ) 2013 Complete if the org	LA PL. anizatio	ATA CO	UNTY ENERGY	COUNCIL, II	NC 84-1 ed Form 5768	1473629 Page 2
(election under sec			•			
A Check if the filing organization	ion belon	as to an affi	liated group (and list in	Part IV each affiliated	group member's nar	ne, address, EIN.
expenses, and shar		_	= ::		3 ,	,
, , ,			nd "limited control" pro	visions apply		
Limit	s on Lobl	bying Expe			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence pub	lic opinion ('grass roots lobbying)	***************************************		
b Total lobbying expenditures to influ	•	•				
c Total lobbying expenditures (add li		-	-, (g)	ľ		
d Other exempt purpose expenditure		,	• •	.		
e Total exempt purpose expenditure		s 1c and 1d	η,			
	•		•	h columns		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:						
Not over \$500,000	<u> (u) is.</u>					
· · · · · · · · · · · · · · · · ·	000		the amount on line 1e.	·		
Over \$500,000 but not over \$1,000			00 plus 15% of the exc	11		
Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$						
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.					
Over \$17,000,000		\$1,000,	000			
g Grassroots nontaxable amount (en h Subtract line 1g from line 1a If zero i Subtract line 1f from line 1c If zero	o or less, e or less, e	enter -0- enter -0-	has de abal des accessos			
j If there is an amount other than ze		er line in or	line 11, did the organiza	ation file Form 4/20		п., п.,
	ations tha	at made a s	• •	Section 501(h) I do not have to comp Is 2a through 2f on pa		Yes No
	Lobi	bying Expe	nditures During 4-Yea	r Averaging Period	·	
Calendar year (or fiscal year beginning in)	(a) :	2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures						
d Graceroote postavable amount						
d Grassroots nontaxable amount e Grassroots ceiling amount						
e Grassroots ceiling amount (150% of line 2d, column (e))				İ		
(10070 OF III C 20, COIGHTET (C))						
f Grassroots lobbying expenditures						

(election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or			-	
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total Add lines 1c through 1i				-
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)(5), or se	ction	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		Х
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?		3		Х
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members	1 110, 01	1		976
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	oal	-		,,,,,
_	expenses for which the section 527(f) tax was paid).	Ç			
_	Current year		2a		
a b	Carryover from last year	•	2b		
C	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	•	3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	Cess	<u> </u>		
7	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?	- J	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		· · · · · · · · · · · · · · · · · · ·
	t IV Supplemental Information			_	.
	de the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated grou	n liet\- Part II.	Δ kna 2: a	nd Part II.B	l line 1
	complete this part for any additional information.	piloty, rait ir	7, iii C 2, a	ווטו מונווים	, 11110
~u3U,	complete this part for any additional information.				
				<u> </u>	
		.			
-					
			 .		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	LA PLATA COUNTY EN	ERGY COUNCIL, INC.		34-1473629		
Pai			r Accounts	Complete if the		
	organization answered "Yes" to Form 990, Part IV, lin	e 6		·		
		(a) Donor advised funds	(b) Funds a	nd 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	Lurating that the assets hold in donor advises	I fundo			
5	are the organization's property, subject to the organization's	-	riurius	Yes No		
	Did the organization inform all grantees, donors, and donor a	•	and and	└─ Yes └─ No		
6	for charitable purposes and not for the benefit of the donor of	• •	•			
	impermissible private benefit?	or donor advisor, or for any other purpose co	inerrang	Yes No		
Pa		ganization answered "Ves" to Form 990. Par	t IV Ine 7	Tes No		
1	Purpose(s) of conservation easements held by the organizat	- <u> </u>	t iv, mie i.			
'	Preservation of land for public use (e.g., recreation or eachiers)	· — · · · · · · · · · · · · · · · · · ·	moally umaneton	t land area		
	Protection of natural habitat					
	Protection of natural habitat Preservation of a certified historic structure Preservation of open space					
0	• •	find concernation contribution in the form of		annound on the last		
2	Complete lines 2a through 2d if the organization held a quali	ned conservation contribution in the form of	a conservation	easement on the last		
	day of the tax year		Pold	Lat the End of the Tay Year		
а	Total number of conservation easements			l at the End of the Tax Year		
a	Total acreage restricted by conservation easements	· · · ···	2a			
	Number of conservation easements on a certified historic sti	ructure included in (a)	2b 2c			
٦	Number of conservation easements included in (c) acquired	• •	<u> </u>			
u	listed in the National Register	arter 6/17/00, and not on a historic structure	2d			
3	Number of conservation easements modified, transferred, re	Jeased extinguished or terminated by the o		ng the tay		
3	year	neased, extinguished, or terminated by the o	rganization dun	ing the tax		
А	Number of states where property subject to conservation ea	sement is located				
5	Does the organization have a written policy regarding the pe					
•	violations, and enforcement of the conservation easements			Yes No		
6	Staff and volunteer hours devoted to monitoring, inspecting,	•	ng the year			
7	Amount of expenses incurred in monitoring, inspecting, and					
8	Does each conservation easement reported on line 2(d) about			·····		
_	and section 170(h)(4)(B)(ii)?		(-/(-/(/	Yes No		
9	In Part XIII, describe how the organization reports conservat	on easements in its revenue and expense st	atement, and b			
_	include, if applicable, the text of the footnote to the organiza					
	conservation easements		· g · -			
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Oth	er Similar A	ssets.		
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.				
1a	If the organization elected, as permitted under SFAS 116 (As	SC 958), not to report in its revenue stateme	nt and balance	sheet works of art,		
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtheranc	e of public serv	ice, provide, in Part XIII,		
	the text of the footnote to its financial statements that descri	ibes these items				
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement a	nd balance she	et works of art, historical		
	treasures, or other similar assets held for public exhibition, e					
	relating to these items:	·	•	_		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$			
	(ii) Assets included in Form 990, Part X		• \$			
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial q	aın, provide			
	the following amounts required to be reported under SFAS 1	_	-			
а	Revenues included in Form 990, Part VIII, line 1	·	▶ \$			
b	Assets included in Form 990, Part X		. • \$			

		A COUNTY							<u>73629 </u>	
Par	t III Organizations Maintaining C	collections of	Art, Hist	<u>orical Tr</u>	easures	s, or Oth	er Simil	<u>ar Asse</u>	ts(continue	∍d)
3	Using the organization's acquisition, accessi	on, and other reco	ords, check	any of the	following	that are a	significant	use of its	collection if	tems
	(check all that apply)					-				
` a	Public exhibition		a 🖳 ı	oan or exc	change pro	ograms				
b	Scholarly research		е 🔲 (Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and exp	lain how th	ey further t	the organiz	zation's exe	empt purpo	ose ın Parl	: XIII.	
5	During the year, did the organization solicit o	r receive donation	ns of art, his	stoncal trea	asures, or	other simila	ar assets	_	_	
	to be sold to raise funds rather than to be ma								Yes	No
Par	t IV Escrow and Custodial Arran		plete if the	organizatio	on answer	ed "Yes" to	Form 990), Part IV, i	ine 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	an or other interm	nediary for	contribution	ns or othe	r assets no	t included	_	٦	_
	on Form 990, Part X?							. ∟	Yes	└─ No
b	If "Yes," explain the arrangement in Part XIII	and complete the	following t	able						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f		-	
	Did the organization include an amount on F					_		. L	Yes	∐ No
Par	If "Yes," explain the arrangement in Part XIII									<u> </u>
Fai	t V Endowment Funds. Complete	<u> </u>			T			beel		
	Danis of was below a	(a) Current year	(b) P	nor year	(C) IWO	years back	(a) Three y	years back	(e) Four ye	ars Dack
1a	Beginning of year balance				 					
D	Contributions				+					
5	Net investment earnings, gains, and losses				1					
a	Grants or scholarships				1					
е	Other expenditures for facilities								İ	
	and programs Administrative expenses		+		+				İ	
'	End of year balance				 	· · · · · · · · · · · · · · · · · · ·	-			
2	Provide the estimated percentage of the curr	rent year end hala	ince fline 1	n column (all held as		l			
-	Board designated or quasi-endowment	icini year ena bala	%	y, coloiiii (a,, ricia as	•				
b	Permanent endowment	%								
c	Temporarily restricted endowment	%								
	The percentages in lines 2a, 2b, and 2c shou									
За	Are there endowment funds not in the posse		nization tha	t are held a	and admin	stered for	the organiz	zation		
	by						J		Y .	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations			-	•		•		3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required	d on Sched	lule R?					3b	
4	Describe in Part XIII the intended uses of the	organization's er	ndowment 1	unds						
Pai	t VI Land, Buildings, and Equipm	nent.								_
	Complete if the organization answere	d "Yes" to Form 9	90, Part IV	, line 11a S	See Form 9	990, Part X	, line 10.			
	Description of property	(a) Cost o			t or other	1	Accumulate		(d) Book v	/alue
	 	basis (inve	stment)	basis	(other)	de	epreciation			
1a	Land									
b	Buildings									
	Leasehold improvements			·						
	Equipment	2	,865.	<u>-</u>			2,8	65.		0.
	Other							_		
Lotal	l. Add lines 1a through 1e. (Column (d) must e	auai ⊢orm 990. Pa	art X. colun	nn (B). line	10(c).)					0.

Schedule D (Form 990) 2013

	rt XI Reconciliation of Revenue per Audited Financial Stat	amente With Pavar	ue ner Deturn	
[F al	Complete if the organization answered "Yes" to Form 990, Part IV, line		ue per neturn.	
1	Total revenue, gains, and other support per audited financial statements	124	1	
. 2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		• •	
a		2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	0.1 5	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			
а		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 Sta	tements With Expe	nses per Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line	12a		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	1 1		
а	Donated services and use of facilities .	2a		
b	Pnor year adjustments .	2b		
С	Other losses	2c		
đ	, , , , , , , , , , , , , , , , , , , ,	_2d		
е			. 2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1	1 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	 	
D				
_	Other (Describe in Part XIII)	4b		
C	Add lines 4a and 4b		4c	
5	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18		4c 5	
5 Pa	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.)	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
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5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	
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5 Pa Prov	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b and 2b,	5	

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990. ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public

Inspection

Employer identification number 84-1473629 LA PLATA COUNTY ENERGY COUNCIL,

Part I General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of	to substantiate the	amount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
criteria used to award the grants or assistance?	stance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for monit	oring the use of grant	funds in the Unite	d States			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments and	d Organizations in the	e United States.	Complete if the org	anization answered "\	es" to Form 990, Part l	V, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	\$5,000. Part II can	be duplicated if addit	ional space is need	ded.			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
	ind government or		listed in the line 1 table				
3 Enter total number of other organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for For	s listed in the line	1 table ons for Form 990.					Schedule I (Form 990) (2013)

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance

Schedule I (Form 990) (2013)

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84-1473629

LA PLATA COUNTY ENERGY COUNCIL, INC.

Schedule I (Form 990) (2013)

Part III

SCHEDULE O (Form 990 or 990-EZ)

Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013
Open to Public Inspection

Name of the organization Employer identification number LA PLATA COUNTY ENERGY COUNCIL, INC. 84-1473629 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THROUGH COMMUNITY GOVERNMENT AND MEDIA RELATIONS EFFORTS FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: EDUCATION OF PUBLIC INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. EXPENSES \$ 705. FORM 990, PART VI, SECTION A, LINE 6: EXPLANATION: THE CORPORATION HAS ONE CLASS OF MEMBERS . MEMBERSHIP IS OPEN TO ALL WHO PARTICIPATE IN THE EXPLORATION, PRODUCTION DEVELOPMENT, REFINING, TRANSPORTATION AND MARKETING OF LAPLATA COUNTY, CO OIL AND GAS, OR WHO OTHERWISE SUBSCRIBE TO THE PURPOSE OF THE CORPORATION. ELIGIBLE PERSONS OR ENTITIES BECOME MEMBERS OF THE CORPORATION BY PAYING DUES AS ESTABLISHED BY THE BOARD OF DIRECOTRS. DUES SHALL BE FOR A CALENDAR YEAR. THE BOARD MAY FROM TIME TO TIME BY RESOLUTION DETERMINE THE DATE AT WHICH A MEMBER CEASES TO BE A MEMBER BECAUSE OF FAILURE TO PAY DUES FOR THE CURRENT CALENDAR YEAR. FORM 990, PART VI, SECTION A, LINE 7A: EXPLANATION: THE CORPORATION HAS ONE CLASS OF MEMBERS. EACH MEMBER OF THE CORPORATION IS ENTITLED TO DESIGNATE ONE VOTER. THE BOARD OF DIRECTORS IS ELECTED AT THE ANNUAL MEETING OF THE CORPORATION BY A PLURALITY VOTE OF THE

FORM 990, PART VI, SECTION B, LINE 11:

MEMBERS DESIGNATED VOTERS.

EXPLANATION: THE ORGANIZATION HAS DETERMINED THAT THE SECRETARY/TREASURER

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2013)

332211
08-04-13

Name of the organization **Employer identification number** LA PLATA COUNTY ENERGY COUNCIL, INC. 84-1473629 IS RESPONSIBLE FOR THE SUPERVISION OF THE ACCOUNTING FUNCTIONS AND THE PREPARATION OF THE FORM 990. THE SECRETARY/TREASURER REVIEWS THE FORM 990 AND SIGNS IT BEFORE IT IS MAILED. FORM 990, PART VI, SECTION C, LINE 18: EXPLANATION: THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC UPON THEIR REQUEST. THE EXECUTIVE DIRECTOR HAS A COPY OF THE FORM 990 AND IS AUTHORIZED TO SHOW IT TO ANY ONE WHO INQUIRES. FORM 990, PART VI, SECTION C, LINE 19: EXPLANATION: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND ITS IN HOUSE PREPARED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON THEIR THE EXECUTIVE DIRECTOR HAS THESE DOCUMENTS AND IS AUTHORIZED TO REOUEST. SHOW THEM TO ANY ONE WHO INQUIRES . FORM 990, PART VII CONTACT ADDRESSES FOR OFFICERS, DIRECTORS, ETC: LISA WINN - 9127 SOUTH JAMAICA STREET, ENGLEWOOD, CO 80112 CHRIS LOPEZ - 1009 RIDGEWAY PLACE, SUITE 200, FARMINGTON, NM 87401 BRAD ROGERS - 370 17TH STREET, SUITE 3000, DENVER, CO 80202 HEATHER MCDANIEL - 3401 E. 30TH STREET, FARMINGTON, NM 87402 RANDY VANDENBERG - 721 SOUTH MAIN AVENUE, AZTEC, NM 87410 CHRISTI ZELLER - PO BOX 3833, DURANGO, CO 81302 KELLIE CAMPBELL - 2010 AFTON PLACE, FARMINGTON, NM 87401