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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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.

2014 Open to Public . Inspection

<u>A</u>	For the	2014 calendar year, or tax year beginning , and ending	·	_	
В	Check if ap	olicable C Name of organization		D Employer	identification number
	Address ch	ange ROCKY MOUNTAIN CONSERVANCY			
X		Doing histograph		184-04	72090
	Name chan	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone	number
	Initial return	PO BOX 3100		970-5	<u> 86-0108 </u>
	Final return terminated	City or town, state or province, country, and ZIP or foreign postal code			
=		ESTES PARK CO 80517		G Gross rece	_{ipts\$} 6,659,828
\sqcup	Amended r	F Name and address of principal officer			
	Application	pending CHARLES MONEY	H(a) is this a gr	roup return for so	ubordinates Yes X No
		PO BOX 3100	H(b) Are all su	bordinates indi	ıded? Yes No
		ESTES PARK CO 80517	If "No	," attach a list (see instructions)
$\overline{}$	Tax-exem				
÷	Website:		H/c) Group av	emption numbe	▶
<u>, </u>			ear of formation 1		M State of legal domicile CO
_	Part I		rear or formation	.931	M State of legal domictie CO
		Summary			
đ		riefly describe the organization's mission or most significant activities			
č		SEE SCHEDULE O			
T.					
ķ	1	prints			
Governance	2 C	heck this box ▶☐ if the organization discontinued its operations or disposed of more than	n 25% of its ne	t assets	
ಳ	3 N	umber of voting members of the governing body (Part VI, line 1a)		3	_13
<u>ë</u>	4 N	umber of independent voting members of the governing body (Part VI, line 1b)		4	13
₹	5 T	otal number of individuals employed in calendar year 2014 (Part V, line 2a)		5	47
Activities &	6 T	otal number of volunteers (estimate if necessary)		6	48
~		otal unrelated business revenue from Rart VIII, column (C), line 12		7a	0
		et unrelated business taxable income from Form 990-T, line 34		7b	0
	1	184 5 7 1	Prior Ye	ear	Current Year .
<u>o</u>	8 C	ontributions and grapts Part VIII line 11)	1,10	1,969	1,263,885
Š	9 P	rogram service revenue (Part VIII, line 2g)	8	1,999	99,050
Revenue	10 lr	vestment income (Part VIII, column (A), lines 3, 4, and 7d)	23	1,098	288,255
Ř	111 0	ther revenue (Part VIII, column (A) lines 5, 6d, 8c, 9c, 10c, and 11e)		8,791	1,372,562
	12 T	otal revenue - add lines 8 through (must equal Part VIII, column (A), line 12)		3,857	3,023,752
	13 G	irants and similar amounts paid (Part IX, column (A), lines 1–3)		0	0
	14 B	enefits paid to or for members (Part IX, column (A), line 4)		0	0
s		alaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	87	5,128	950,462
Expenses	16aP	rofessional fundraising fees (Part IX, column (A), line 11e)	<u> </u>	-,	0
ě	b.T	otal fundraising expenses (Part IX, column (D), line 25) ▶ 158,826	-		
Ä	47.0		- 00	5,102	1,358,532
		other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		0,230	2,308,994
		otal expenses Add lines 13–17 (must equal Part IX, column (A), line 25)			
7	219 H	levenue less expenses Subtract line 18 from line 12	Beginning of C	3,627	714,758 End of Year
Net Assets or	20 T	otal assets (Part X, line 16)		5,153	13,571,301
ASS	24 7	otal liabilities (Part X, line 26)		9,905	474,117
ē	S 22 1	let assets or fund balances Subtract line 21 from line 20		5,248	13,097,184
	Part II	Signature Block	12,09	J, 240	13,031,104
<u> </u>	_				
		nalties of perjury, I declare that I have examined this return, including accompanying schedules and s ict, and complete. Declaration of preparer (other than officer) is based on all information of which pre			my knowledge and belief, it is
<u>, —</u>			outer mad any in		
 		Signature of officer		Date	6-4-13
	gn				,
∠H (ere	DONALD S. CHELEY BOARD	PRESI	DEWI.	
Ź_		Type or print name and title			I Date
_	.:	Proparer's signature Preparer's signature	Date	Check	If PTIN
	id	LORI B. BAUER, CPA LORI B. BAUER, CPA	06/0	2/15 self-en	
	eparer	Firm's name JDS PROFESSIONAL GROUP		Firm's EIN	20-8019714
=Us	se Only	10303 E DRY CREEK RD STE 400			
رد ک		Firm's address ENGLEWOOD, CO 80112		Phone no	303-771-0123
M	ay the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No
Fo	r Paperv	ork Reduction Act Notice, see the separate instructions.	-		Form 990 (2014)
ĎΑ	VA.				1

1 930 (2014) 1	ROCKY MOUNTAI	N_CONSERVANCI	84-0472090	Page 2
		Service Accomplishments		
	-	ntains a response or note to a	ny line in this Part III	<u>X</u>
-	ibe the organization's miss EDULE O	ion		
	<u> </u>			
		•		
			- · · · · · · · · · · · · · · · · · · ·	
		nificant program services during the ye	ear which were not listed on the	
•	90 or 990-EZ?	a Calcadata C		Yes X No
	cribe these new services of	n Schedule O. or make significant changes in how it	conducts, any program	
services?	mzation ecase conducting	of make significant changes in now it	conducts, any program	Yes X No
If "Yes," des	cribe these changes on So	hedule O.		
Describe the	e organization's program se	ervice accomplishments for each of its	three largest program services, as mea	asured by
			ort the amount of grants and allocations	to others,
the total exp	enses, and revenue, if any	, for each program service reported		
<u> </u>		700 012		e \$ 99,050
(Code		.,790,813 including grants of	\$ (Revenue IN ITS SERVICE TO 1	
			NATIONAL PARK, IN	
			TION TO MILLIONS OF	
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Part IV Checklist of Required Schedules

	·		Yes	<u>No</u>
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	l		
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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			v
4	· · · · · · · · · · · · · · · · · · ·	3	-+	<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		l	v
5	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,	:	i	
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	ا ۽		X
6	,	5		
U	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	1	x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
٠	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		-	
3	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 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		İ	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	x	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	x	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI 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
	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			l
	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		1	
40	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	40		
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	 	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	47		.
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	 - -	X
10	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	!	x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10	t –	1
	If "Yes," complete Schedule G, Part III	19		x
202	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<u> </u>	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	 	

Form 990 (2014) ROCKY MOUNTAIN CONSERVANCY
Part IV Checklist of Required Schedules (continued)

	·		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	1		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b		•	
	through 24d and complete Schedule K. If "No," go to line 25a	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
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), 501(c)(4), and 501(c)(29) 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		X
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	ļ	į į	
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			77
20	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	l		
	current or former officers, directors, trustees, key employees, highest compensated employees, or	ا مم ا		v
27	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
21	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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	21		<u> </u>
	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	28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	200		
-	Schedule L, Part IV	28b		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		-
-	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	1		
	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N.			
	Part I	31	l	x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32	1	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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		X
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,			1
	Part VI	37		X
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	X	<u> </u>
		_	00	n

Part V 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 Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 86 LEI 1a Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0 1"7 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 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 47 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 3a If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial If "Yes," enter the name of the foreign country ---See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? X 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? **6b** Organizations that may receive deductible contributions under section 170(c). 7 : ..: 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? X 7a If "Yes." did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? đ 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? e 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? g 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h 7h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? R 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9Ь 10 Section 501(c)(7) organizations. Enter e i i i i Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter 11 Livier Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources 78 E. against amounts due or received from them) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b . 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O 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 13b 13c Enter the amount of reserves on hand 14a X Did the organization receive any payments for indoor tanning services during the tax year?

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

State the name, address, and telephone number of the person who possesses the organization's books and records $\,\blacktriangleright\,$ THE ORGANIZATION

ESTES PARK

financial statements available to the public during the tax year.

PO BOX 3100

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and

303-586-0108

CO 80517

Form 990 (2014) ROCKY MOUNTAIN CONSERV	990 (2014) ROCKY	MOUNTATN	CONSERVANCY
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84-0472090

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

Check if Schedule O contains a response 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.

(A) Name and Title	(B) Average hours per week (list any	box	, unie	Pos heck ss pe	rson ı	than o s both r/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1)BILL TINDALL	4.00									
PRESIDENT	0.00	x		x				0	0	0
(2)DOUG CAMPBELL	0.00	 		-						
, ,	2.00			1	ļ					
TREASURER	0.00	X		X	<u> </u>	Ш		0	0	0
(3) ELIZABETH GRANT										
CECDEMADY	2.00			,,					•	
SECRETARY (4) DON CHELEY	0.00	X		X				0	0	0
(4)BON CHELET	2.00									
VICE PRESIDENT	0.00	x		x				O	0	0
(5) JULIE HARRINGTO										
	2.00									
DIRECTOR	0.00	X	_	_	<u> </u>			0	0	0
(6) CHARLES JERDEN										
DIRECTOR	2.00 0.00	x				ļΙ		o	o	0
(7) CHARLES COFAS	0.00	┿	\vdash		-	\vdash			<u> </u>	<u> </u>
(,, 0,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1	2.00				ļ	1				
DIRECTOR	0.00	$ \mathbf{x} $						0	0	l o
(8) JOEL MAYO										
	2.00							_		_
DIRECTOR	0.00	X	ļ	<u> </u>				0	0	0
(9) TIMOTHY DAVIS	2.00				1	li				
DIRECTOR	0.00	$ \mathbf{x} $			l			o	l	l
(10)KATHERINE DINES		<u>^</u>			 	\vdash				
, , , , , , , , , , , , , , , , , , , ,	2.00	ļ								
DIRECTOR	0.00	x			L			0	0	0
(11) JAN ROBERTSON										
DIRECTOR	2.00									
DIRECTOR	0.00	X						0	0	Form 990 (2014)

Tart VII Goodon A. Chiece	T. Directors, Ti	usu	,,,	IVE		picy	CC	s, and riighest compens	ated Employees (continu	Jeu/			
(A) Name and title	(B) Average hours per week (list any	box	c, unte	Pos heck ss pe	rson	than one that the that the that the that the that the that the the that the the the the the the the the the th	n an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	,	(F) Estima amoun other compens	ted t of r sation	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	Į	from ti organiza and rela organiza	ation ated	
(12)HOWARD FRY		†				1	 						
DIRECTOR	2.00	. .							0				_
(13) JAMES H PICKERI	0.00 NG	X				┢╌	\vdash	0	0				_0
DIRECTOR	2.00	x						0	0				0
(14)CHARLES MONEY									,				
EXECUTIVE DIRECTOR	40.00			x				140,016	0		2	24,0	<u> </u>
(15)					ļ								
(16)													
(17)				_									
(18)	<u> </u>	_				-				<u> </u>			
(19)													
1b Sub-total	<u> </u>		<u> </u>	L	l	I	┢	140,016		 		24.(090
c Total from continuation sh		l, Se	ctio	n A			•			1			
d Total (add lines 1b and 1c) Total number of individuals (t lim	ited	to th	nse	liste	<u></u> d a	140,016		<u> </u>	2	<u>?4,</u> (090
reportable compensation fro													<u> </u>
3 Did the organization list any	former officer,	dırec	tor.	or tr	uste	e. ke	v e	mplovee, or highest comp	ensated			Yes	No
employee on line 1a? If "Yes 4 For any individual listed on li	s," complete Sch	nedu	le J	for s	uch	ındıv	,idu	al			3		X
organization and related org													
individual 5 Did any person listed on line	e 1a receive or a	ccru	e co	mpe	nsa	tion :	fron	any unrelated organization	on or individual		4	X	-
for services rendered to the	organization? If										5	<u> </u>	X
Section B. Independent Contract Complete this table for your		npen	sate	ed in	dene	ende	nt c	ontractors that received m	ore than \$100,000 of				
compensation from the orga	nization Report	con	npen	satio	on fo	or the	e ca	lendar year ending with or	within the organization's	tax yea		(C)	
Name an	(A) d business address						╀	Descrip	(B) otion of services		<u>~</u>	(C) ompensa	ation
							_				_		 .
							_				<u> </u>		
							\vdash						
							\vdash				_	_	
2 Total number of independen	it contractors (in	clud	ıng t	out n	ot li	mited	d to	those listed above) who			_		
received more than \$100,00	0 of compensat	ion f	rom	the (orga	nıza	tion	<u> </u>	0		<u> </u>	00/	0 (2044)

Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue (C) Unrelated (D) Revenue exempt function business excluded from tax revenue under sections revenue 512-514 1a Federated campaigns 1a 247,561 b Membership dues 1b c Fundraising events 1c d Related organizations 1d Program Service Revenue Contributions, e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1,016,324 37,953 g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f 1,263,885 Busn. Code FIELD INSTITUTE ACTIVITIES 99,050 99,050 b C f All other program service revenue g Total. Add lines 2a-2f 99,050 ▶ Investment income (including dividends, interest, and other similar amounts) 148,620 148,620 Income from investment of tax-exempt bond proceed Royalties (II) Personal 2,003 6a Gross rents b Less rental exps c Rental inc or (loss 2,003 Net rental income or (loss) 2 003 003 Gross amount from (i) Securities (II) Other sales of assets 2,427,919 other than invento **b** Less cost or other 2,288,284 basis & sales exps 139,635 c Gain or (loss) 139,635 d Net gain or (loss) 139,635 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 7. 44 nureite. b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less 2,714,260 returns and allowances 347,792 b Less cost of goods sold c Net income or (loss) from sales of inventory 366,468 366,468 Miscellaneous Revenue Busn. Code 11a OTHER REVENUE 4,091 4,091 b C All other revenue Total. Add lines 11a-11d 4,091 Total revenue. See instructions 3,023,752 1,471, 612 0 288,255

Form 990 (2014) ROCKY MOUNTAIN CONSERVANCY Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (A) Total expenses (B) Program service (C) Management and Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 164,106 107,740 36,583 19,783 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 633,559 415,949 141,235 76,375 Other salaries and wages Pension plan accruals and contributions (include 17,508 3,215 section 401(k) and 403(b) employer contributions) <u>26,668</u> 5,945 Other employee benefits <u>65,730</u> 43,153 14,653 7,924 10 Payroll taxes 60,399 39,654 13,464 7,281 Fees for services (non-employees) a Management 10,291 10,291 b Legal 24,820 24,820 c Accounting d Lobbying Professional fundraising services See Part IV, line Investment management fees 88,937 81,462 7,475 Other (If line 11g amount exceeds 10% of line 25, column 36,912 36,912 (A) amount, list line 11g expenses on Schedule O) 26,980 9,764 17,216 Advertising and promotion 145,935 97,338 33,696 <u>14</u>,901 Office expenses 58,113 25,638 29,065 3,410 14 Information technology Royalties 15 5,757 51,324 45,567 Occupancy 16 37,676 337 32,732 4,607 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 21,529 12,976 4,368 4,185 20 21 Payments to affiliates 46,745 41,400 3,545 1,800 22 Depreciation, depletion, and amortization 45,703 35,898 8,161 1,644 23 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) 426,948 PROJECT LABOR AND HOUSING 426,948 b DIRECT AID 152,228 152,228 BANK & MERCHANT FEES 76,712 <u>70,264</u> 6,448 c 52,257 PROJECT SUPPLIES 52,257 d 55,422 45,425 9,242 755 All other expenses 2,308,994 790,813 359,355 158,826 Total functional expenses. Add lines 1 through 24e 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)

<u> Pa</u>	<u>art X</u>	. ·				
		Check if Schedule O contains a response or note to any line in thi	s Part X			
	_			(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing		961,618	1	46,165
	2	Savings and temporary cash investments	Ī		2	953,312
ļ	3	Pledges and grants receivable, net			3	182,000
	4	Accounts receivable, net	Ì	64,537	4	4,426
	5	Loans and other receivables from current and former officers, directors,	Ī			
		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				
		sponsoring organizations of section 501(c)(9) voluntary employees' ben				
က္အ		organizations (see instructions) Complete Part II of Schedule L			6	
Assets	7	Notes and loans receivable, net	ì	160,000		
A S	8	Inventories for sale or use	•	548,313		590,623
	9	Prepaid expenses and deferred charges	†	18,792	9	8,853
	10a	Land, buildings, and equipment cost or	ļ			3,033
		· · · · · · · · · · · · · · · · · · ·	237,779		-	
	ь		527,386	707,403	100	710,393
	11	Investments—publicly traded securities		8,904,078		9,690,403
	12	Investments—other securities See Part IV, line 11	ŀ	0,504,070	12	3,030,403
	13	Investments—program-related See Part IV, line 11	ŀ	1,257,500		1,257,500
	14	Intangible assets	ŀ	1,231,300	14	1,237,300
	15	Other assets See Part IV, line 11	ŀ	192,912	15	127,626
	16	Total assets. Add lines 1 through 15 (must equal line 34)	ŀ	12,815,153		13,571,301
	17	Accounts payable and accrued expenses		484,788		340,930
	18	Grants payable	Ì	101,700	18	340,330
	19	Deferred revenue	ľ	84,845		5,561
	20	Tax-exempt bond liabilities		0.1/0.10	20	3,301
	21	Escrow or custodial account liability Complete Part IV of Schedule D	ŀ		21	
S			ľ			
Liabilities		trustees, key employees, highest compensated employees, and		· · · · · · · · · · · · · · · · · · ·		
ją į		disqualified persons Complete Part II of Schedule L	,	•	22	·
Ï	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties	j		24	
	25	Other liabilities (including federal income tax, payables to related third	The state of the s			
		parties, and other liabilities not included on lines 17-24) Complete Part	x I			
		of Schedule D		150,272	25	127,626
	26	Total liabilities. Add lines 17 through 25	t	719,905		474,117
		Organizations that follow SFAS 117 (ASC 958), check here ▶X at	nd	, , , ,		./. u. ≥2 1.
Š		complete lines 27 through 29, and lines 33 and 34.			•	, sekasita "1";
쿌	27	Unrestricted net assets		9,228,622	27	10,019,734
ä	28	Temporarily restricted net assets	l	2,589,644		2,800,468
Ē	29	• •	276,982		276,982	
Ť	1	Organizations that do not follow SFAS 117 (ASC 958), check here	■ and		-	
5		complete lines 30 through 34.		, .	l	, , ,
iets	30		ļ		30	' '
ASS	31	Paid-in or capital surplus, or land, building, or equipment fund	ľ	· -·· · · · · · · · · · · · · · · · · ·	31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	ľ		32	
Z	33	Total net assets or fund balances	ľ	12,095,248		13,097,184
	34	Total liabilities and net assets/fund balances	į	12,815,153		13,571,301

		34-04/2090		Pag	ge 72
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this	Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,0	23,	752
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,3	08,	994
3	Revenue less expenses Subtract line 2 from line 1	3		14,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column	ı (A))	12,0	95,	248
5	Net unrealized gains (losses) on investments	5		87,	
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			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal F	Part X, line			·
	33, column (B))	10	13,0	97,	184
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this	s Part XII			
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual	Other			
	If the organization changed its method of accounting from a prior year or checked "C	Other," explain in		İ	
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independe	nt accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year	were compiled or			
	reviewed on a separate basis, consolidated basis, or both			ì	
	Separate basis Consolidated basis Both consolidated and separa	ate basis			1
b	Were the organization's financial statements audited by an independent accountant'		2 t	\mathbf{x}	
	If "Yes," check a box below to indicate whether the financial statements for the year	were audited on a			
	separate basis, consolidated basis, or both		-	1	1
	X Separate basis Consolidated basis Both consolidated and separa	ite basis			ŀ
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes respi	onsibility for oversight		1	
	of the audit, review, or compilation of its financial statements and selection of an inc	dependent accountant?	20	X	
	If the organization changed either its oversight process or selection process during t	he tax year, explain in			
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or	audits as set forth in			
	the Single Audit Act and OMB Circular A-133?		38		
b	If "Yes," did the organization undergo the required audit or audits? If the organization	n did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to	-	3 t		

Form **990** (2014)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public

Name of the organization Employer identification number ROCKY MOUNTAIN CONSERVANCY 84-0472090 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). X An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. c X Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations 1 Provide the following information about the supported organization(s) (i) Name of supported (II) EIN (IV) is the organization (iii) Type of organization (v) Amount of monetary (vi) Amount of organization listed in your governing (described on lines 1-9 support (see other support (see above or IRC section document? instructions) instructions) (see instructions)) Yes US NATIONAL PARK SERVICE 53-0197094 797,352 6 X 0 (B) (C) (D) (E)

Total

Schedule A (Form 990 or 990-EZ) 2014 ROCKY MOUNTAIN CONSERVANCY 84-0472090

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,121,761	691,692	127,764	1,101,969	1,263,885	4,307,071
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1,121,761	691,692	127,764	1,101,969	1,263,885	4,307,071
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)				·		
6	Public support. Subtract line 5 from line 4						4,307,071
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	1,121,761	691,692	127,764	1,101,969	1,263,885	4,307,071
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	160,259	173,948	30,807	138,918	148,620	652,552
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	69,161	81,952	246	4,173	4,091	159,623
11	Total support. Add lines 7 through 10						5,119,246
12	Gross receipts from related activities, etc	(see instructions	s)			12	9,470,937
13	First five years. If the Form 990 is for th			fourth, or fifth tax	vear as a section		
	organization, check this box and stop he	_		,	,	· / / /	▶ □
Sec	tion C. Computation of Public S		entage				
14	Public support percentage for 2014 (line	6, column (f) divid	ded by line 11, col	umn (f))		14	84.13%
15	Public support percentage from 2013 Sc		-	.,,		15	84.00%
16a	33 1/3% support test—2014. If the orga			ne 13, and line 14	1 is 33 1/3% or mo	ore, check this	
	box and stop here. The organization qu	alifies as a publici	ly supported organ	nization			► X
b	33 1/3% support test-2013. If the orga	anization did not c	heck a box on line	e 13 or 16a, and l	ine 15 is 33 1/3%	or more,	
	check this box and stop here. The organ	nization qualifies a	as a publicly supp	orted organizatioi	า		▶ [
17a	10%-facts-and-circumstances test-2	014. If the organia	zation did not che	ck a box on line 1	3, 16a, or 16b, an	d line 14 is	
	10% or more, and if the organization me	ets the "facts-and	-circumstances" to	est, check this bo	x and stop here.	Explain in	
	Part VI how the organization meets the "	facts-and-circums	stances" test. The	organization qua	lifies as a publicly	supported	
	organization			·	-		▶ [
b	10%-facts-and-circumstances test—2	013. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, or 17	a, and line	<u></u>
	15 is 10% or more, and if the organization	on meets the "fact	s-and-circumstan	ces" test, check th	ns box and stop h	nere.	
	Explain in Part VI how the organization r	neets the "facts-a	nd-circumstances	test The organi	zation qualifies as	a publicly	
	supported organization						▶ [
18	Private foundation. If the organization on instructions	did not check a bo	ox on line 13, 16a,	. 16b, 17a, or 17b	, check this box a	nd see	> [

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

	4ion A Bublic Company	quality article	the tests hat	od belevi, piede	ic complete i	uit ii.j	
	tion A. Public Support	4 3 0040	1 41.0044				
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)		-	2			
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	_					
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)		<u> </u>	<u> </u>			
14	First five years. If the Form 990 is for the organization, check this box and stop he		first, second, third	d, fourth, or fifth tax	year as a section	on 501(c)(3)	▶ []
Sec	tion C. Computation of Public s	Support Perc	entage		•		
15	Public support percentage for 2014 (line	8, column (f) div	ided by line 13, c	olumn (f))		15_	%
16	Public support percentage from 2013 Sc	hedule A, Part III	l, line 15			16	%
Seg	ction D. Computation of Investment						
17	Investment income percentage for 2014		•	e 13, column (f))		17	%_
18	Investment income percentage from 201					18	%_
19a		-					
	17 is not more than 33 1/3%, check this	_	_			_	. ▶ ∐
b	• •						nd
	line 18 is not more than 33 1/3%, check		-	•			
20	Private foundation. If the organization of	old not check a b	ox on line 14, 19a	a, or 19b, check thi	s box and see in	structions	▶ 1 }

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A	A. All	Sup	porting	Ora	anizations
-----------	--------	-----	---------	-----	------------

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

_		Yes	No
	1	x	
	2		X
	3a		x
	3b		
	3c		
	4a		х
	4b		
	4		
	4c	,	
	-		
	5a		х
	5b		
	5c		ļ
	6		x
	7		x
	88_		x
	9a		x
	9b		х_
	9с		x
	10a		х
	10b		

Sched	dule A (Form 990 or 990-EZ) 2014 ROCKY MOUNTAIN CONSERVANCY 84-U4/2	090		Page 5
Pai	rt IV Supporting Organizations (continued)			
			Yes_	<u>No</u>
11	Has the organization accepted a gift or contribution from any of the following persons?			-
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		:	
	below, the governing body of a supported organization?	11a		_X
	A family member of a person described in (a) above?	11b		X
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		X
	ion B. Type I Supporting Organizations			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		_Yes_	No
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	`		
	controlled the organization's activities. If the organization had more than one supported organization,	. '	-	٠.
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			٠
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	:		
	supervised, or controlled the supporting organization	2		
Sect	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	.		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			·
	or management of the supporting organization was vested in the same persons that controlled or managed		-	
	the supported organization(s)	1		
<u>Sect</u>	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the		_	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Х	<u> </u>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			ļ
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		X
3	By reason of the relationship described in (2), did the organization's supported organizations have a	-		
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			-
	supported organizations played in this regard	3		X
Sect	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr	uctions)		
а	The organization satisfied the Activities Test. Complete line 2 below			
b				
С	X The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	e instruction	ons)	
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		}	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			1
	those supported organizations and explain how these activities directly furthered their exempt purposes,	,		ł
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	X	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		1	1
	reasons for the organization's position that its supported organization(s) would have engaged in these	Ì		
	activities but for the organization's involvement	2b		Х
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			1
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

	CKY MOUNTAIN CONSERVAN		84-0472	2090 Page 6
	ally Integrated 509(a)(3) Supportin			
1 Check here if the organization satis	fied the Integral Part Test as a qualifying trus	t on Nov 2	0, 1970 See instruction	ıs. Ali
other Type III non-functionally integ	rated supporting organizations must complete	e Sections	A through E	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
1 Net short-term capital gain		1		
2 Recoveries of prior-year distributions		2		
3 Other gross income (see instructions)		3		
4 Add lines 1 through 3		4		
5 Depreciation and depletion		5		
6 Portion of operating expenses paid or	ncurred for production or			
collection of gross income or for managem	ent, conservation, or]]		
maintenance of property held for production	n of income (see instructions)	6		
7 Other expenses (see instructions)		7	<u></u>	
8 Adjusted Net Income (subtract lines	5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-	exempt-use assets (see			•
instructions for short tax year or assets he	d for part of year)			
a Average monthly value of securitie	s	1a	_	
b Average monthly cash balances		1b		
c Fair market value of other non-exe	mpt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)		1d		
e Discount claimed for blockage or	other	-		
factors (explain in detail in Part VI)				
2 Acquisition indebtedness applicable to	non-exempt-use assets	2		
3 Subtract line 2 from line 1d		3		
4 Cash deemed held for exempt use Er	ter 1-1/2% of line 3 (for greater amount,			
see instructions)		4		
5 Net value of non-exempt-use assets (s	subtract line 4 from line 3)	5		
6 Multiply line 5 by 035		6		<u> </u>
7 Recoveries of prior-year distributions		7		
8 Minimum Asset Amount (add line 7 t	o line 6)	8		
Section C - Distributable Amount			. ,	Current Year
1 Adjusted net income for prior year (fro	m Section A, line 8, Column A)	1	, .	1
2 Enter 85% of line 1		2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3		4	-	
5 Income tax imposed in prior year		5		
6 Distributable Amount. Subtract line 5	from line 4, unless subject to	-	·	
emergency temporary reduction (see instr	•	6	Į.	
	e organization's first as a non-functionally-inte		e III supporting organiza	etion (see

Schedule A (Form 990 or 990-EZ) 2014

instructions).

Schedule A (Form 990 or 990-EZ) 2014 ROCKY MOUNTAIN Part V Type III Non-Functionally Integrated 509(a		84-0472 izations (continued)	090 Page
Section D - Distributions		· · · · · ·	Current Year
1 Amounts paid to supported organizations to accomplish exempt	purposes		
2 Amounts paid to perform activity that directly furthers exempt pu	rposes of supported		
organizations, in excess of income from activity			
3 Administrative expenses paid to accomplish exempt purposes of	f supported organizations		
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval required)		· " · "	· - -
6 Other distributions (describe in Part VI) See instructions			
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations to which the or	ganization is responsive		-
(provide details in Part VI) See instructions			
9 Distributable amount for 2014 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
	(i)	(ii)	(iii)
Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2014	Distributable Amount for 2014
Distributable amount for 2014 from Section C, line 6		F16-2014	Amount for 2014
2 Underdistributions, if any, for years prior to 2014			- 1
(reasonable cause required-see instructions)			ست تیمید سو ویه
3 Excess distributions carryover, if any, to 2014			
a		- (F () P ()	i la ita
b ·	•- ,	- ,	1. 产键 5. 概要 - 3.5
C	<u>-</u>	1 1 1 1 1	. हेर हे विशास .
d . · ·		Nia Bitti in Li	Fate Language of the Ballion
e From 2013	:		t attractions for a
f Total of lines 3a through e		10	रा संगातनकंत्रकः
g Applied to underdistributions of prior years			The setting of the set
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)	; ,		و گښتاندونياټ کا د و ت
j Remainder. Subtract lines 3g, 3h, and 3i from 3f		<u> </u>	TO THE DESIGNATION OF THE PERSON OF THE PERS
4 Distributions for 2014 from Section			10 4 10 4 100 4
D, line 7 \$		Section 1994	reses a tirt Cher.
a Applied to underdistributions of prior years	<u> </u>		
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			11 / 1 131 11 2 11
5 Remaining underdistributions for years prior to 2014, if			ori danajimi
any Subtract lines 3g and 4a from line 2 (if amount			l
greater than zero, see instructions)			، تاللوندية ، ت
6 Remaining underdistributions for 2014 Subtract lines 3h		· · ·	
and 4b from line 1 (if amount greater than zero, see	1 1		
instructions)	· · · · · · · · · · · · · · · · · · ·	. ,	
7 Excess distributions carryover to 2015. Add lines 3j and 4c		a total line	The state of the state of
8 Breakdown of line 7.			A PROPERTY OF THE
a		· · · · · · · · · · · · · · · · · · ·	1
b		 	, ,
C			
d Excess from 2013			
e Excess from 2014 .			

Schedule A (Form 990 or 990-EZ) 2014

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information (See instructions.)

PART IV, SECTION D, LINE 2 - EXPLANATION OF WORKING RELATIONSHIP

THE RMNP SUPERINTENDENT AND CHIEF OF INTERPRETATION ATTEND OUR BOARD

MEETINGS AND GIVE UPDATES ON CURRENT PROJECTS AND NEEDS OF THE PARK.

PART IV, SECTION E, LINE 1C - HOW SUPPORTED GOVERNMENT ENTITY

TO STIMULATE INTEREST IN THE INTERPRETIVE ACTIVITIES OF ROCKY MOUNTAIN

NATIONAL PARK (PARK) AND ITS COOPERATING ISSUES.

- •TO ENCOURAGE SCIENTIFIC INVESTIGATION AND RESEARCH IN THE FIELD OF HISTORY, GEOLOGY, NATURAL HISTORY, AND RELATED SUBJECTS THAT HAS A BEARING ON THE PARK AND ITS COOPERATING AREAS AND ADJACENT TERRITORIES.
- •TO ASSIST IN THE DEVELOPMENT OF THE LIBRARY OF THE PARK AND COOPERATING AREAS.
- •TO ASSIST IN THE CARE AND DEVELOPMENT OF MUSEUMS AND OTHER INTERPRETIVE FACILITIES AND PROGRAMS IN THE PARK AND COOPERATING AREAS.
- •TO ASSIST IN OBTAINING PHOTOGRAPHS, SLIDES, FILMS, AND OTHER MATERIALS AND EQUIPMENT FOR USE IN EXPLAINING AND EXHIBITING THE HISTORY, EARTH SCIENCES, AND OTHER NATURAL HISTORY PORTRAYED IN THE PARK AND COOPERATING AREAS.
- •TO ACCEPT DONATIONS FOR AND TO MAINTAIN AND USE OTHER FUNDS FOR FURTHERING THE EDUCATIONAL OBJECTIVES OF THE NATIONAL PARK SERVICE IN THE PARK AND COOPERATING AREAS, INCLUDING THE ACQUISITION OF PRIVATE LANDS.
- TO PUBLISH, OR AID THE PUBLICATION OF, MATERIAL PERTINENT TO THE

age 8

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions.)

EDUCATIONAL OBJECTIVES OF THE NATIONAL PARK SERVICE.

•TO MAKE AVAILABLE FOR SALE AT MUSEUMS AND OTHER DESIRABLE OUTLETS, IN THE PARK AND COOPERATING AREAS, PUBLICATIONS, VISUAL AIDS, PHOTOGRAPHS, OR OTHER MATERIAL PERTINENT TO THE EDUCATIONAL OBJECTIVES OF THE NATIONAL PARK SERVICE. THE EARNINGS FROM THESE BUYING AND SELLING OPERATIONS SHALL BY USED ONLY FOR THE FURTHERANCE OF THE ORGANIZATION AND TO CARRY OUT THE PURPOSE OF ITS EXISTENCE, AS OUTLINED IN THE PREVIOUS SECTIONS. THE OPERATIONS, PROPERTY AND ASSETS OF THE ORGANIZATION SHALL BE STRICTLY LIMITED TO THE PURPOSES FOR WHICH IT HAS BEEN ESTABLISHED, AND NO PART IF THE NET INCOME OF THE ORGANIZATION SHALL INURE TO THE FINANCIAL BENEFIT OF ANY OFFICER OR MEMBER THEREOF.

•TO PURCHASE, LEASE OR OTHERWISE ACQUIRE AND TO HOLD, OWN, SELL, OR DISPOSE OF REAL AND PERSONAL PROPERTY OF ALL KINDS AND IN PARTICULAR LANDS, BUILDINGS, BUSINESS CONCERNS AND UNDERTAKINGS, MERCHANDISE, AND ANY INTEREST IN REAL OR PERSONAL PROPERTY.

PART IV, SECTION E, LINE 2A - EXPLANATION OF SUPPORTED ORGANIZATIONS
THE ORGANIZATION'S ACTIVITIES DIRECTLY FURTHER AND ENHANCE THE PURPOSES OF
THE US NATIONAL PARK SERVICE OPERATIONS AS DESCRIBED IN PART IV, SECTION E,
LINE 1C.

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 o	of the organization		Employer identification number
	OCKY MOUNTAIN CONSERVANCY		84-0472090
Pa	rt I Organizations Maintaining Donor Advised F Complete if the organization answered "Yes" to		or Accounts.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing	that the assets held in donor advised	
	funds are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors	s in writing that grant funds can be used	.
	only for charitable purposes and not for the benefit of the donor or d	lonor advisor, or for any other purpose	
	conferring impermissible private benefit?		Yes No
Pa	rt II Conservation Easements.		
	Complete if the organization answered "Yes" to	o Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (che	eck all that apply)	
	Preservation of land for public use (e.g., recreation or education) Preservation of a historically in	nportant land area
	Protection of natural habitat	Preservation of a certified histo	oric structure
	Preservation of open space	_	
	Complete lines 2a through 2d if the organization held a qualified cor	nservation contribution in the form of a	conservation
	easement on the last day of the tax year		Held at the End of the Tax Yea
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic structure	ıncluded ın (a)	2c
d	Number of conservation easements included in (c) acquired after 8/	17/06, and not on a	
	historic structure listed in the National Register		2d
	Number of conservation easements modified, transferred, released, tax year ▶	, extinguished, or terminated by the org	anization during the
	Number of states where property subject to conservation easement	is located >	
	Does the organization have a written policy regarding the periodic n		
	violations, and enforcement of the conservation easements it holds'		☐ Yes ☐ No
	Staff and volunteer hours devoted to monitoring, inspecting, and en		
	>	3	•
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	ng conservation easements during the	year
_	> \$.	
8	Does each conservation easement reported on line 2(d) above satisfied to 1724 MARCH 2012	sfy the requirements of section 170(h)(4	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation eas		
	balance sheet, and include, if applicable, the text of the footnote to organization's accounting for conservation easements	the organization's financial statements	that describes the
Pa	rt III Organizations Maintaining Collections of A	rt Historical Treasures or Ot	har Similar Assats
	Complete if the organization answered "Yes" to	o Form 990, Part IV, line 8.	mei Siiiniai Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958		
	works of art, historical treasures, or other similar assets held for put		
	public service, provide, in Part XIII, the text of the footnote to its final		
b	If the organization elected, as permitted under SFAS 116 (ASC 958		
	works of art, historical treasures, or other similar assets held for put		furtherance of
	public service, provide the following amounts relating to these items	3	
	(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 treasures	, or other similar assets for financial ga	ın, provide the
	following amounts required to be reported under SFAS 116 (ASC 9	58) relating to these items.	
а	Revenue included in Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part Y		b \$

Schedule D (Form 990) 2014 ROCKY MOU Part III Organizations Maintainin					72090	Page 2
Using the organization's acquisition, access collection items (check all that apply)						
□1	a 🗀 ,	ASS of Ovebones are	arama			
		.oan or exchange pro Other	grams			
b Scholarly research	e [] (Jiner	•			
c Preservation for future generations	adlantiana and auni	nin havv thav Evethar t	h			ad
4 Provide a description of the organization's XIII	collections and expl	ain now they further ti	ne organizat	on s exen	npt purpose in P	ап
5 During the year, did the organization solicit	or receive donation	s of art, historical trea	asures, or oth	ner sımılar	•	
assets to be sold to raise funds rather than	to be maintained as	part of the organizat	ion's collecti	on?		Yes No
Part IV Escrow and Custodial A	rangements.					
Complete if the organization 990, Part X, line 21.	on answered "Ye	es" to Form 990, I	Part IV, lin	e 9, or r	eported an a	mount on Form
1a Is the organization an agent, trustee, custo	dian or other interm	ediary for contribution	ns or other a	ssets not		
included on Form 990, Part X?		•				Yes No
b If "Yes," explain the arrangement in Part X	II and complete the	following table				
						Amount
c Beginning balance					1c	
d Additions during the year					1d	
e Distributions during the year					1e	
f Ending balance					1f	
2a Did the organization include an amount on	Form 990, Part X, II	ne 21, for escrow or o	custodial acc	ount liabil	lity?	Yes No
b If "Yes," explain the arrangement in Part X	II Check here if the	explanation has bee	n provided in	Part XIII	•	
Part V Endowment Funds.					=	· · · · · · · · · · · · · · · · · · ·
Complete if the organization	on answered "Ye	es" to Form 990, I	Part IV, lin	e 10		
	(a) Current year	(b) Pnor year	(c) Two yea		(d) Three years ba	ck (e) Four years back
1a Beginning of year balance	8,336,490	6,661,981	6,56	7,723	5,971,0	84 5,679,695
b Contributions	132,149	103,600		1,000	10,2	
c Net investment earnings, gains, and						
losses	451,629	1,650,710	8	7,575	590,1	110 94,471
d Grants or scholarships						
e Other expenditures for facilities and					· · · · · · · · · · · · · · · · · · ·	
programs			<u> </u>	6,093	-180,3	-207,459
f Administrative expenses	45,155	79,682		410	184,0	
g End of year balance	8,875,113	8,336,609		1,981	6,567,	
2 Provide the estimated percentage of the ci						
a Board designated or quasi-endowment ▶		nice (line 19, column)	(a)) neid as			
b Permanent endowment ► 3.10 %	02.00 //					
c Temporarily restricted endowment ▶ 1	4 10%					
The percentages in lines 2a, 2b, and 2c sh						
3a Are there endowment funds not in the pos	· · · · · · · · · · · · · · · · · · ·	ration that are hold i		arad for th		
•	session of the organ	ization that are new a	ano aominisi	erea ioi ti	ie	Yes No
organization by						
(i) unrelated organizations						
(ii) related organizations		d 0-b-d-d- D0				- 1 - 1 - 1
b If "Yes" to 3a(ii), are the related organization						3b
4 Describe in Part XIII the intended uses of the Part VI Land, Buildings, and Eq.		adowment tunds				
		oo" to Form 000	Doct IV. lie	0 110	Soc Form 00	0 Part V line 10
Complete if the organization						
Description of property	(a) Cost or other I (investment)	pasis (b) Cost or o		• •	ccumulated preciation	(d) Book value
do Lord	(III ve suitetti)				p. Cuddon	170 000
1a Land	——		70,000		164 070	170,000
b Buildings			04,204	<u> </u>	164,079	440,125
c Leasehold improvements			18,696		262 207	18,696
d Equipment			44,879		363,307	81,572
e Other	t oqual Form 000. "	Part V. column (D) 1:=	10-1			710 202
Total. Add lines 1a through 1e (Column (d) mus	si equal Form 990, I	rait A, column (B), lin	ie IUC)		Sc	710 , 393 hedule D (Form 990) 2014

Part VII	Investments—Other Securities. Complete if the organization answered "Y	es" to Form 990. Part IV	line 11b See Form 990. Part X. line 12
	(a) Description of security or category	(b) Book value	(c) Method of valuation
	(including name of security)	,-,	Cost or end-of-year market value
(1) Financial	derivatives		
(2) Closely-h	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			""
(H)			
	nn (b) must equal Form 990, Part X, col (B) line 12)	•	
Part VIII	Investments—Program Related.		
	Complete if the organization answered "Y	es" to Form 990, Part IV,	line 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
(1) LAND	HELD FOR SALE	1,257,500	MARKET
(2)			
_(3)			
(4)			
(5)			
(6)			
_(7)			
(8)			
(9)		1 055 500	
	nn (b) must equal Form 990, Part X, col (B) line 13)	1,257,500	
Part IX	Other Assets.	(" t-	han 44d One France 200 Bart V Ban 45
	Complete if the organization answered "Y	-	
	(a) Description	on	(b) Book value
(1)			
(2)			
(3)			
(4)		· · · · · · · · · · · · · · · · · · ·	
(5)			
(6)			
(7)	2		
_(8)	<u> </u>		
(9)	me (h) must equal Form 000. Bot V. col. (B) line 15.)		•
Part X	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities.		
raitA	Complete if the organization answered "\	es" to Form 990 Part IV	line 11e or 11f See Form 990 Part X
	line 25	(C3 (6) (6) (1) (6) (7) (7)	interregion for occionitios, raitx,
1.	(a) Description of liability	(b) Book value	70% () 90 Mari 27 (126)
	al income taxes	(2,250.15.15.	2. 1 4 pt 14 14 14 14 14 14 14 14 14 14 14 14 14
	OS HELD ON BEHALF OF OTHERS	127,626	e e e e e e e e e e e e e e e e e e e
(3)			1
(4)			
(5)			*LETT PETERS ST
(6)			- (1 2) 1,1 of 6 mm (1)100 (1)
(7)			, , ,,,,,
(8)			1
(9)			الله المعدد المرافظة المستداع والمعدد المالية المالية المالية المالية المالية المالية المالية المالية المالية
	mn (b) must equal Form 990, Part X, col (B) line 25)	127,626	

	edule D (Form 990) 2014 ROCKY MOUNTAIN CONSERVANCY	84-047209		Page 4
Pa	art XI Reconciliation of Revenue per Audited Financial Statem		Ret	urn.
	Complete if the organization answered "Yes" to Form 990, P	Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	3,312,127
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		- 1	
а	Net unrealized gains (losses) on investments	2a 287,178	.	
b	Donated services and use of facilities	2b 1,197		
C	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	288,375
3	Subtract line 2e from line 1		3	3,023,752
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
_ 5_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	3,023,752
Pi	art XII Reconciliation of Expenses per Audited Financial Staten	nents With Expenses p	er R	
	Complete if the organization answered "Yes" to Form 990, F			
1	Total expenses and losses per audited financial statements		1	2,310,191
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a 1,197	-	
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	1,197
3	Subtract line 2e from line 1		3	2,308,994
4	Amounts included on Form 990, Part IX, line 25, but not on line 1]		

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS

a Investment expenses not included on Form 990, Part VIII, line 7b

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

b Other (Describe in Part XIII)

Part XIII: Supplemental Information.

c Add lines 4a and 4b

ROCKY MOUNTAIN CONSERVANCY HAS 5 ENDOWMENT FUNDS WHICH HAVE ELEMENTS OF BOTH DONOR RESTRICTED AND BOARD DESIGNATED FUNDS WITHIN THE ENDOWMENTS AND AS SUCH THE ORGANIZATION DEFINES THESE FUNDS AS QUASI-ENDOWMENTS.

4b

4c

2,308,994

THE GREENHOUSE QUASI-ENDOWMENT FUND WAS ESTABLISHED FOR THE PURPOSE OF SUPPORTING ROCKY MOUNTAIN NATIONAL PARK'S GREENHOUSE.

THE LAND AND HISTORICAL PRESERVATION QUASI-ENDOWMENT FUND WAS ESTABLISHED FOR THE PURPOSES OF BOTH LAND PROTECTION OR HISTORIC PRESERVATION FOR ROCKY MOUNTAIN NATIONAL PARK.

THE NEXT GENERATION QUASI-ENDOWMENT FUND WAS ESTABLISHED FOR PURPOSES OF SUPPORTING DIVERSE PROGRAMS CONNECTING THE NEXT GENERATION OF YOUTH WITH ROCKY MOUNTAIN NATIONAL PARK.

THE LEGACY QUASI-ENDOWMENT FUND WAS ESTABLISHED FOR PURPOSES OF LONG-TERM PRESERVATION AND SUPPORTS PROJECTS AND PROGRAMS OF LONG-TERM SIGNIFICANCE IN PERPETUITY FOR ROCKY MOUNTAIN NATIONAL PARK.

THE SUSTAINABILITY QUASI-ENDOWMENT FUND'S USE IS OUTLINED IN A 2008

AGREEMENT WITH ROCKY MOUNTAIN NATIONAL PARK TO PROVIDE ADEQUATE AND

CONTINUING FUNDING FOR PREVENTATIVE MAINTENANCE PROGRAMS ON STRUCTURES

WITHIN ROCKY MOUNTAIN NATIONAL PARK THAT WERE BUILT OR ENHANCED WITH ROCKY

MOUNTAIN CONSERVANCY'S DONOR FUNDS.

PART X - FIN 48 FOOTNOTE

THE ORGANIZATION FOLLOWS ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ACCOUNTING STANDARD, WHICH REQUIRES THE ORGANIZATION TO DETERMINE WHETHER A TAX POSITION (AND THE RELATED TAX BENEFIT) IS MORE LIKELY THAN NOT TO BE SUSTAINED UPON EXAMINATION BY THE APPLICABLE TAXING AUTHORITY, BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFIT TO BE RECOGNIZED IS MEASURED AS THE LARGEST AMOUNT OF BENEFIT THAT IS GREATER THAN FIFTY PERCENT LIKELY OF BEING REALIZED UPON SETTLEMENT, PRESUMING THAT THE TAX POSITION IS EXAMINED BY THE APPROPRIATE DECEMBER 31, 2014, THE ORGANIZATION'S MANAGEMENT EVALUATED ITS TAX POSITIONS TO DETERMINE THE EXISTENCE OF UNCERTAINTIES, AND DID NOT NOTE ANY MATTERS THAT WOULD REQUIRE RECOGNITION OR WHICH MAY HAVE AN AFFECT ON ITS TAX-EXEMPT STATUS.

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number 84-0472090 ROCKY MOUNTAIN CONSERVANCY

-	itti Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided	any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a Complete Part III to provid	e any relevant information regarding these items.			
	First-class or charter travel	Housing allowance or residence for personal use]
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			,
	Discretionary spending account	Personal services (e.g., maid, chauneur, cher)			ļ.
	Marine Marine and the second s				
D	If any of the boxes on line 1a are checked, did the organiza				1
	or reimbursement or provision of all of the expenses describ	bed above? If "No," complete Part III to			
	explain		1b		<u> </u>
				l	
2	Did the organization require substantiation prior to reimburs	sing or allowing expenses incurred by all		ŀ	ļ
	directors, trustees, and officers, including the CEO/Executiv	ve Director, regarding the items checked in line			1
	1a?		2		L
3	Indicate which, if any, of the following the filing organization	uses to establish the compensation of the			1
-	organization's CEO/Executive Director Check all that apply	•			
	related organization to establish compensation of the CEO	•	1	l	
	read .				1
	Compensation committee	Written employment contract		1	
	Independent compensation consultant	Compensation survey or study			İ
	Form 990 of other organizations	X Approval by the board or compensation committee	-	ļ	-
_					ŀ
4	During the year, did any person listed in Form 990, Part VII	I, Section A, line 1a, with respect to the filing		ļ	
	organization or a related organization		1	Ì	
а	Receive a severance payment or change-of-control payme	nt?	4a		X
b	Participate in, or receive payment from, a supplemental no	nqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based co	ompensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide th	ne applicable amounts for each item in Part III		1	
	·				
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organize	zations must complete lines 5–9.	1	1	
5	For persons listed in Form 990, Part VII, Section A, line 1a	•			
•	compensation contingent on the revenues of	, and the organization pay or aborate any		l	
_	The organization?		5a	ľ	X
	Any related organization?		5b	+	X
L			130	+	1
	If "Yes" to line 5a or 5b, describe in Part III			1	
_			İ	}	
6	For persons listed in Form 990, Part VII, Section A, line 1a	, did the organization pay or accrue any			
	compensation contingent on the net earnings of				l
а	The organization?		6a	ļ	X
b	Any related organization?		6b	<u> </u>	X
	If "Yes" to line 6a or 6b, describe in Part III			1	
				1	
7	For persons listed in Form 990, Part VII, Section A, line 1a	, did the organization provide any non-fixed	1	1	
	payments not described in lines 5 and 6? If "Yes," describe		7		X
8					
-	to the initial contract exception described in Regulations se				1
	in Part III	שנו בשנו לבי יוביות אינים ולמולים	8		x
	mr with		۲	+	+
•	If "Voc" to line 9, did the arganization also falless the	table procumption procedure described in		1	1
9	If "Yes" to line 8, did the organization also follow the rebutt	lable presumption procedure described in	_		
	Regulations section 53 4958-6(c)?		9		

Page 2

Schedule J (Form 990) 2014 ROCKY MOUNTAIN CONSERVANCY 84-0472090 Property of the property of t

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

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

	ļ		W-2 and/or 1099-M	ISC compensation	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation in column (B) reported
(A) Name and Title		(i) Base compensation	(II) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(ı)-(D)	as deferred in prior Form 990
CHARLES MONEY	(1)	132,516	7,500	0	11,890	12,200	164,106	
1 EXECUTIVE DIRECTOR	(11)	0	0	0	0	0	0	
	(1)							
l <u> </u>	(11)							
	(i)							
·	(8)							
	(11)							
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Schedule J (Form 990) 2014

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Schedule J (Form 990) 2014 ROCKY MOUNTAIN CONSERVANCY 84-0472090 Page 3

Reactive Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

ROCKY MOUNTAIN CONSERVANCY

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

OMB No 1545-0047

84-0472090

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990.

Open To Public Inspection Employer identification number

Pa	rt I Types of Property							
		(a) Check if	(b) Number of contributions or	(c) Noncash contribution amounts reported on	(d) Method of determinir	-		
		applicable	items contributed	Form 990, Part VIII, line 1g	noncash contribution am	ounts		
1	Art Works of art							
2	Art — Historical treasures							
3	Art — Fractional interests							
4	Books and publications		<u> </u>					
5	Clothing and household goods		· .					
6	Cars and other vehicles		<u>"</u>					
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded	X	6	25,807	FMV	_		
10	Securities — Closely held stock							
11	Securities — Partnership, LLC,							
	or trust interests							
12	Securities — Miscellaneous							
13	Qualified conservation							
	contribution — Historic							
	structures							
14	Qualified conservation							
	contribution — Other							
15	Real estate — Residential							
16	Real estate — Commercial							
17	Real estate — Other	<u> </u>						
18	Collectibles	<u> </u>						
19 20	Food inventory		· · · · · · · · · · · · · · · · · · ·					
21	Drugs and medical supplies Taxidermy							
22	Historical artifacts							
23	Scientific specimens	-						
24	Archeological artifacts							
25	Other ►(SOFTWARE)	X	1	10,166	FMV			
26	Other >(SUPPLIES)	X	1	1,980				
27	Other ►(<u> </u>						
28	Other ►(
29	Number of Forms 8283 received b	y the orga	inization during the tax	year for contributions for				
	which the organization completed				29			
					·		Yes	No
30a	During the year, did the organization	on receive	by contribution any pro	perty reported in Part I, III	nes 1 through			
	28, that it must hold for at least thr	ee years f	rom the date of the initi	al contribution, and which	is not required	1		l ··
	to be used for exempt purposes fo	r the entire	e holding period?			30a		<u> </u>
b	If "Yes," describe the arrangement	ın Part II						
31	Does the organization have a gift a	acceptanc	e policy that requires th	e review of any non-stand	lard	- }		
	contributions?					31	X	<u> </u>
32a	Does the organization hire or use to	third partie	es or related organization	ons to solicit, process, or s	ell noncash			
	contributions?					32a		X
b	If "Yes," describe in Part II						1	
33	If the organization did not report a	n amount	ın column (c) for a type	of property for which colu	mn (a) is checked,		1	
	describe in Part II					1	l	l

Page 2

Part II - Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

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. Inspection

OMB No 1545-0047

Open to Public

Internal Revenue Service

Name of the organization

ROCKY MOUNTAIN CONSERVANCY

Employer identification number 84-0472090

FORM 990 - ORGANIZATION'S MISSION

THE CORPORATION IS ORGANIZED SOLELY FOR PUBLIC, CHARITABLE, AND EDUCATIONAL PURPOSES, INCLUDING SUCH PURPOSES AS THE MAKING OF DISTRIBUTIONS TO THE UNITED STATES GOVERNMENT FOR THE BENEFIT OF ITS NATIONAL PARKS, AND THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE.

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT STRUCTURES.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 BOARD MEMBERS ARE PROVIDED WITH A COPY OF THE 990 TO REVIEW PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
THE BOARD GOES OVER THE CONFLICT OF INTEREST POLICY ANNUALLY AT THE ANNUAL
MEETING AND EACH BOARD MEMBER PROVIDES A WRITTEN STATEMENT REGARDING ANY
POSSIBLE CONFLICTS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE BOARD COMPLETES AN EVALUATION FOR THE EXECUTIVE DIRECTOR AND COMPARES

HIS SALARY WITH THE SALARIES OF EXECUTIVE DIRECTORS AT COMPARABLE

ORGANIZATIONS.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization

ROCKY MOUNTAIN CONSERVANCY

Employer identification number

84-0472090

THE BOARD COMPLETES AN EVALUATION FOR THE EXECUTIVE DIRECTOR AND COMPARES HIS SALARY WITH THE SALARIES OF EXECUTIVE DIRECTORS AT COMPARABLE ORGANIZATIONS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION UPON REQUEST