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. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017 Open to Public Inspection

<u>A</u>	For the	2017 cale	endar year, or tax year beginning , 2017, and er	nding		, 20
В	Check if	applicable.	C Name of organization Glenwood Springs Association of	Realtors	D Employe	er identification number
	Address	change	Doing business as		84-07	177133
	Name ch		Number and street (or P.O box if mail is not delivered to street address) Roor	n/suite	E Telephor	
$\overline{\Box}$	Initial retu	•	2520 S GRAND AVE	3	(970)	945-9762
$\overline{\sqcap}$		n/terminated		·	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	310 3.02
$\vec{\sqcap}$	Amended		GLENWOOD SPRINGS, CO 81601		G Gross re	oounte \$ 255 260
Ξ			F Name and address of principal officer.			
L	Аррисати	on pending				subordinates? Yes No
			CHERYL BURNS, 2520 S GRAND AVE #108, GLENWOOD SPRINGS, CO	115 # # 1		
<u></u>		npt status.		7 / If "N	io," attach a	list (see instructions)
<u>J</u>	Website:		I/A		exemption	
K			Corporation ☐ Trust ☐ Association ☐ Other ➤ ☐ L Year of fo	rmation 197	6 M State	of legal domicile: CO
P	art I	Summ				
	1	Briefly de	escribe the organization's mission or most significant activities: Bo	ard of Rea	ltors	
θņ						
Governance						
ē	2	Check th	is box ▶ ☐ if the organization discontinued its operations or dispose	ed of more than	25% of	its net assets.
Š	3				3	9
Š			of independent voting members of the governing body (Part VI, line		<u> </u>	9
es			nber of individuals employed in calendar year 2017 (Part V, line 2a)	,	5	2
Activities &	1		nber of volunteers (estimate if necessary)		6	40
Ę			elated business revenue from Part VIII, column (C), line 12			
4	1		• • • • • • • • • • • • • • • • • • • •		7a	177,312.
	b	iver atte	lated business taxable income from Form 990-T, line 34	Prior Ye	7b	-6,869.
		^ . .	tions and grants (Part VIII, line 1h) RECEIVED	<u> </u>		
ņ	1		· / [[]	(0,067.	169,021.
Revenue	9	Program	service revenue (Part VIII, line 2g)	190	0,950.	186,003.
ě			nt income (Part VIII, column (A), line 3 4, and 7d) 1 2018 . Q		192.	244.
			venue (Part VIII, column (A), lines 5, ddɔ &c, 9c, 10c, and 11e) .]			
			enue-add lines 8 through 11 (must equal Part VIII, column (A); line 12)	311	1,209.	355,268.
	13	Grants ar	nd similar amounts paid (Part IX, column (A) lines 1-3)	10	0,000.	10,000.
	14	Benefits	paid to or for members (Part IX, column (A), line 4)			
Ø	15	Salaries, d	other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,451.	87,930.	
use	16a		onal fundraising fees (Part IX, column (A), line 11e)			
Expenses	b .		draising expenses (Part IX, column (D), line 25) ▶			
ŭ	17		penses (Part IX, column (A), lines 11a-11d, 11f-24e)	211	470.	211,879.
			enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		,921.	309,809.
			less expenses. Subtract line 18 from line 12		5,288.	45,459.
- 2		TOVOTIGO	toss experieses. Cubitaet into to nom into the	Beginning of Cu		End of Year
Net Assets or Fund Balances	20	Total aca	ets (Part X, line 16)	<u></u>		
Sage	24		• • •		7,440.	626,198.
Set /	21		ilities (Part X, line 26)		3,125.	1,313.
			ts or fund balances. Subtract line 21 from line 20	5/9	,315.	624,885.
_	art II		ure Block			
Un	der penalt	ies of perjui	ry, I declare that I have examined this return, including accompanying schedules and s	tatements, and to ti	he best of m	ly knowledge and belief, it is
~	e, correct,	and compi	ete. Declaration of preparer (other than officer) is based on all information of which prep	arer nas any knowi	eage. 	4.)
			My Surve		06/06	//8
Sig		Signa	ature of officer	Da	te /	
He	re	Che	eryl Burns, Executive Director			
	1		or print name and title			
Pa	۳	Print/Typ	pe preparer's name Preparer's signedure	Date	Charle	PTIN
		David	M Reynolds	06/01/2018	Check L self-empl	J (loyed P00936184
	eparer					
US	e Only	,	ddress ► PO BOX 773, GLENWOOD SPRINGS, CO 81602-0			4-1157599
Ma	v the IR		s this return with the preparer shown above? (see instructions)	113 PNO	ne no. (9/	70) 945-7734 V Vas C No
				DEM 40/25/25 25 5	-:-:-	X Yes No
ror	raperwe	urk Heau(ction Act Notice, see the separate instructions. BAA	REV 12/05/17 PRO		Form 990 (2017)

	0 (2017)			Page ∡
Part				
1	Check if Schedule O contains a resp		rt III	<u> </u>
ţ	Briefly describe the organization's mission: Board of Realtors			
	Doard Of Realtors			
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
2	Did the organization undertake any signific			
	prior Form 990 or 990-EZ?			☐ Yes ⊠ No
•	If "Yes," describe these new services on So			
3	Did the organization cease conducting, services?			
				☐ Yes ⊠ No
4	If "Yes," describe these changes on Sched		bras largest are grown somicos	as massired by
4	Describe the organization's program service expenses. Section 501(c)(3) and 501(c)(4) or	ce accomplishments for each of its to	the amount of grants and allow	, as measured by
	the total expenses, and revenue, if any, for		the amount of grants and anot	Cations to others,
	,	,		
4a	(Code. ) (Expenses \$	including grants of \$	) (Revenue \$	)
	PROFESSIONAL STANDARD, GRIEVA			
	LISTING SERVICE, CONTINUING E			
	ETHICS ENFORCEMENT, AND RELAT			
		~~~~		
	**			
4b	(Code:) (Expenses \$	including grants of \$	\ (Revenue \$	·····
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
		~~~~		
			~~~~~~	
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
4c	(Code:) (Expenses \$	including grants of \$) (Payanua \$	
70	(Code:) (Expenses 4) (Heveline &	/
	***************************************	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	~~~~~~~~~~~~~~~~~

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		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
	011			
4d	Other program services (Describe in Schedu		1	
4e	(Expenses \$ including grant Total program service expenses ▶	ts of \$ ) (Revenue \$		
	p g o. 1100 o.po11000 P			

POCI

Part	IV Checklist of Required Schedules			
1	Is the organization described in section 501/a)/2) or 4047/a)/1) (other than a private foundation)? If "Vee"		Yes	No
•	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		×
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		×
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		×
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	×	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
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		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		×
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		×
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.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	×	A
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		×
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		×
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		×
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		×
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		×
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		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	4.6%		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	14b		×
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		^ ×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		^_

Part	V Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		ļ
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		×
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	×	<b> </b>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		×
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			١.,
<b>.</b>		24a		×
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
·	to defease any tax-exempt bonds?	24c		
٦	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	24u		
Lou	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		•
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	200		
b	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	-02		<del> </del>
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		×
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	100	Tisted.	1020
	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		×
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		×
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
0.4	conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
20	Part I	31		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		×
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	00		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33		×
0-7	or IV, and Part V, line 1	34		v
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	33a		
~	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		v
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	330		×
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
•	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37	ĺ	×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
-	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	×	
		لستتسا	لنبيب	

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
1a		기 🥸	3 2 3	ا منظم المنظم
b		기기		200
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		NA.	1.
2a		1c	1760 EN	1 Species /
20	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements, filed for the calendar year ending with or within the year covered by this return  2a			
b	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	2b	Cath per	8, ,
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	20	×	* 2.
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	\(\frac{1246}{\times}\)24	151.13.
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	×	<del> </del>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		<del>  ^</del>	<del> </del>
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			
b	If "Yes," enter the name of the foreign country:	4a	K List	X
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			100
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	150000	×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	ļ	1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			1
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		×
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	10.00		7
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		A Company	
	and services provided to the payor?	7a	ļ	ļ
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	ļ	ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	4849		12.00
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	ļ	<b> </b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		<del> </del>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<del> </del>
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	300 S. S. S.	1. E. Albert
0	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			Ale
9	sponsoring organization have excess business holdings at any time during the year?	8	Brillyn 5	Appendict v
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	1837	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<del> </del>
10	Section 501(c)(7) organizations. Enter:		9357	8500
а	Initiation fees and capital contributions included on Part VIII, line 12	1.5		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	7		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		L
b	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.			1
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	a de la companya de l	- ALLEY CO.
	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			
	Enter the amount of reserves on hand		13.7%	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
O	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		i

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions, Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year. . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 × 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 × 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a × d8 X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. . . . . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No Did the organization have local chapters, branches, or affiliates? 10a × If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b × Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. ☐ Another's website Own website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: CHERYL BURNS, 2520 S GRAND AVENUE #108, GLENWOOD SPRINGS,, CO 81601 (970)945-9762

Form 990 (201	7)					Page 7
Part VII	Compensation of Officers, Directors,	Trustees, Ke	y Employees,	<b>Highest Comp</b>	ensated Employe	ees, and

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.

☐ Check this box if neither the organization in	or any relate	d org	aniz	atic	n c	ompe	nsa	ited any currer	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted	of or directo	unles er an	Pos neck ss pe	rson	e than of the state of the stat	n an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		tee	ustee			ensated				
(1) KONNIE KRAHN-PROSENCE IMMEDIATE PAST CHAIR	3.00	×						0.	0.	0.
(2) SHANNO KYLE CHAIR	3.00	×						0.	0.	0.
(3) BRANDY SWANSON CHAIR ELECT	3.00	×						0.	0.	0.
(4) ERIN BASSETT DIRECTOR	3.00	×						0.	0.	0.
(5) MIKE DUNN DIRECTOR	3.00	×						0.	0.	0.
(6) TRAVIS COX DIRECTOR	3.00	×						0.	0.	0.
(7) KENT LOHSE DIRECTOR	3.00	×						0.	0:	0.
(8) COURTNEY TSCHANZ DIRECTOR	3.00	×						0.	0.	0.
(9) JEFF ZIMMERMAN DIRECTOR	3.00	×						0.	0.	0.
(10) CHERYL BURNS CEO	40.00				×			70,980.	0.	0.
(11)										
(12)										
(13)										
(14)										

(15) (16) (17) (18) (19) (20) (21) (22) (23) (23) (24) (25) (25) (27) (28) (29) (29) (29) (29) (20) (20) (21) (22) (22) (23) (24) (25) (25) (27) (28) (29) (29) (29) (29) (20) (20) (20) (21) (22) (22) (23) (24) (25) (27) (28) (29) (29) (29) (29) (20) (20) (20) (20) (21) (22) (22) (23) (24) (25) (27) (28) (29) (29) (29) (29) (20) (20) (20) (20) (21) (22) (22) (23) (24) (25) (27) (27) (28) (29) (29) (29) (29) (20) (20) (20) (20) (20) (20) (20) (20		(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office Individua	unles er and	Pos leck is pe	more rson	e that is or/trusi employee	an	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E) Reporta compensation relates organizat (W-2/1099-	on from	(F) Estimate amount other compensa from the organizations of the organizations of the control of	of ation e ion ed
(16)   (17)   (18)   (19)   (20)   (21)   (22)   (23)   (24)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (26)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)   (27)	}				6			ted						
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(29)  (21)  (22)  (23)  (24)  (25)  1b Sub-total .	)													
[20]  [21]  [22]  [23]  [24]  [25]  1b Sub-total  1c Total from continuation sheets to Part VII, Section A  1d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organizatio year.  (A)  Name and business address  Description of services  Compensation for services	)													
[20]  [21]  [22]  [23]  [24]  [25]  1b Sub-total  1c Total from continuation sheets to Part VII, Section A  1d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organizatio year.  (A)  Name and business address  Description of services  Compensation for services	·													
[21]  [22]  [23]  [24]  [25]  1b Sub-total  c Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c).  70,980.  0.  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►  3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization year.  (A) (B) (C) (Compense)														
[22]  [23]  [24]  [25]  1b Sub-total .														
(23)   (24)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)   (25)		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~												
(24)  (25)  1b Sub-total	)													
[24]  [25]  1b Sub-total	)													
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Total from continuation sheets to Part VII, Section A  Total (add lines 1b and 1c).  Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶  Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual														
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	c To	otal from continuation sheets to Part otal (add lines 1b and 1c)	VII, Section	n A 	•					70,980.	ore than \$	0.	O of	0.
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	Di en	id the organization list any former off mployee on line 1a? If "Yes," complete S	ficer, direct	for su	ıch i	ndı	vidu	ıal .			<i>.</i> .		3	
for services rendered to the organization? If "Yes," complete Schedule J for such person	or ind	ganization and related organizations dividual	greater tha	an \$1 	50,0		? If	"Yes	s," ·	complete Sch	edule J fo	or sucl	h 4	×
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization year.  (A)  (B)  (C)  Compensation of services  (A)  Name and business address  (B)  Compensation of services  (C)  Compensation of services  (B)  Compensation of services  (C)  Compensation of services  (C)  Compensation of services  (C)	fo	r services rendered to the organization?												*
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Name and business address Description of services Compensation	co	ompensation from the organization. Rep												tax
											ervices	(C) Compensation		1
2 Total number of independent contractors (including but not limited to those listed above) who	To	otal number of independent contractor	rs (includin	ıg bu	t no	ot li	mite	ed to	the	ose listed abo	ve) who	W. Soldie		

	990 (201) t <b>VIII</b>	·	enue	<del></del>	<del>, , , , , , , , , , , , , , , , , , , </del>			Page \$
		Check if Schedule O		ponse or note t	o any line in this	s Part VIII		
25.00					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Grants	1a	Federated campaigns						
ira our	ь	Membership dues .	1b	169,021.		4-12 No. 25-50	the bottom was	
s, C	C	Fundraising events .	1c			1		
Gifts, ilar Ar	d	Related organizations	1d					
is, (	e	Government grants (con	tributions) 1e					
tion r S	f	All other contributions, gi	ifts, grants,					
the in	1	and similar amounts not inc	luded above 1f					
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions includ	led in lines 1a-1f: \$					
<u>දු</u>	h	Total. Add lines 1a-1	f	<i>.</i> <b>&gt;</b>	169,021.			
re				Business Code				
Ye.	2a	MLS		531390	177,312.	0.	177,312.	0.
8	b	EDUCATION		611430	4,753.	4,753.	0.	0.
Ş.	C	MEETINGS		611430	1,610.	1,610.	0.	0.
Sen	d	MISC		611430	2,328.	2,328.	0.	0.
Program Service Revenue	e							
ogr	f	All other program sen	vice revenue .					<u> </u>
<u>ā</u>	g	Total. Add lines 2a-2		<u> ▶</u>	186,003.		NA MANAGERIA (N. 1867). Na manageria (n. 1868).	
	3	Investment income		ends, interest,				
	}	and other similar amo		>	244.	244.	0.	0.
	4	Income from investment	t of tax-exempt b	ond proceeds ►				
	5	Royalties	<i>ـنــنيبنين</i> ـنــ	<u>, ▶</u>	the s M. Brath Adv. Mark. Mr. Let Seller, L	NAME AND	SORTHON COLUMN OF THE STATE OF MICHAEL STATE	and or train or
		_	(ı) Real	(ii) Personal				
	6a	Gross rents						
	b	Less. rental expenses		}		1.5		
	C	Rental income or (loss)		1			4.7.4	Service And Service Service
	d	Net rental income or (			be true author by builty demand reduced	National transfer which are	other at our Americanistics is the series.	www. Matt. mills and arthropolical W. St.
	7a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory						
	b	Less: cost or other basis						100
		and sales expenses .						
	C	Gain or (loss)		L				
	d	Net gain or (loss) .		<del>,</del>			MARKET FOR THE STATE OF THE STA	Tinth who he will is the State of the State
enne	8a	Gross income from fu events (not including \$	ndraising					
Other Revenue		of contributions reported See Part IV, line 18	ed on line 1c).					
₹	b	Less: direct expenses						
	С	Net income or (loss) fr		events . >				
	9a	Gross income from ga					1	market in the second
			a					
	b	Less: direct expenses		L				AND THE PROPERTY OF THE PARTY O
	C	Net income or (loss) fr		vities	COT OF MAN TO A MAN TO A SERVER		980 J Paris & Sept. 102 & C. 1. 12 June 1	77.00
	10a	Gross sales of in- returns and allowance	•					
			_	<del></del>				
	b	Less: cost of goods so						
	C	Net income or (loss) fr		Business Code			AND THE SECOND CONTRACTOR SEC	With I have the state of the
	14-	iviscellarieous H		business Code				
	11a					<del></del>		
	b			ļ				
	d	All other revenue .		}				
	_					neral and the first of the	聖文中等於此一, 納,	1 +p 2
	e Total. Add lines 11a-11d					8.935.	177.312.	0.

Par Section	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must con		All other organizatio	ns must complete co	olumn (A).
	Check if Schedule O contains a respor				
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	10,000			4.
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	10,000.			
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	70,980.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	3,501.			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,069.			
9	Other employee benefits	3,456.			
10	Payroll taxes	7,924.			
11	Fees for services (non-employees):				{
a b	Management	<del> </del>			
c	Accounting	5,945.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
9	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	2,281.			
13	Office expenses	2,201.			
14 15	Information technology	}			
16	Royalties	1,454.		<del></del>	
17	Travel	1,151.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	29,397.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	7,708.			
23	Insurance	798.		The state of the s	The life of the state of the state of
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.)				
а	POSTAGE	985.		Section 1 and Property and Section 2	Particular Committee Contraction of the Contraction
b	Bank fees	2,667.			
C	Dues	39,509.			
d	EDUCATION	2,804.			
e	All other expenses  Total functional expenses. Add lines 1 through 24e	116,130.			
25 26	Joint costs. Complete this line only if the	309,809.			
20	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)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . (B) Beginning of year End of year 409,397. 1 362,930. 1 2 2 3 3 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . . . . 6 7 8 8 9 Prepaid expenses and deferred charges . . . 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 368,564. Less: accumulated depreciation . . . . 10b 210,760. 165,513. 10c 203,051. 11 Investments—publicly traded securities . . . . . 11 13,750. 13,750. 12 12 Investments—other securities. See Part IV, line 11 . . . . . . . . . 13 Investments—program-related. See Part IV, line 11 . . . . . . . 13 14 14 15 15 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . 626,198. 16 587,440. 16 17 17 8,125. 1,313. 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . . 22 23 Secured mortgages and notes payable to unrelated third parties . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 26 Total liabilities. Add lines 17 through 25 26 8,125. 1,313 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets . . . . . . 27 579,315. 27 624,885. 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. Capital stock or trust principal, or current funds . . . . . . . . . 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds. 32 33 579,315. 33 624,885. 587,440. 34 34 Total liabilities and net assets/fund balances . . . . . 626,198. of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Schedule O.

Form **990** (2017)

2c

За

3b

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

### **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047 2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

• Se	ection 501(c)(3) organizations	that have NOT filed Form 5768 (election	n under section 501	(h)) Complete Part II-B. Do	not complete Part II-A
	organization answered "Yes ee separate instructions), t	s," on Form 990, Part IV, line 5 (Proxy	y Tax) (see separate	e instructions) or Form 990	-EZ, Part V, line 35c (Proxy
	•	anizations: Complete Part III.			
	of organization			Employer ide	ntification number
Glen	wood Springs Asso	ciation of Realtors		84-07773	133
Part	I-A Complete if th	e organization is exempt und	er section 501(	c) or is a section 527	organization.
1	Provide a description o definition of "political car	f the organization's direct and in mpaign activities")	direct political ca	mpaign activities in Par	t IV. (see instructions for
2		ty expenditures (see instructions)		<i>.</i> <b></b> \$	S
3	Volunteer hours for politi	cal campaign activities (see instruc	ctions)		
Part		e organization is exempt und			
1	Enter the amount of any	excise tax incurred by the organiza	ation under sectio	n 4955 ▶ 🦠	
2	Enter the amount of any	excise tax incurred by organization	n managers under	3600001 4300 P	,
3		ed a section 4955 tax, did it file Fo			
4a	Was a correction made?			· · · · · · · · · · ·	Yes No
b Part	If "Yes," describe in Part	e organization is exempt und	er section 501/	a) except section 501	(0)(3)
1		ly expended by the filing organization	<del></del>		(0)(0).
•	activities			<i></i> <b>&gt;</b> \$	
2	527 exempt function acti	filing organization's funds contrib		\$	
3		expenditures. Add lines 1 and 2			
4	Did the filing organization	n file Form 1120-POL for this year	?		Yes No
5	organization made payme the amount of political co	ses and employer identification nur ents. For each organization listed, ontributions received that were pro fund or a political action committe	enter the amount   mptly and directly	paid from the filing organ delivered to a separate p	ization's funds. Also enter political organization, such
	(a) Name	<b>(b)</b> Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
					L

Cob	adula C./C	, n 990 or 990-EZ) 2017					
	edule CAFOIII art II-A	Complete if the organization	n is exempt	under section !	501(c)(3) and file	d Form 5768 (ele	Page 2
		section 501(h)).			00 . (0)(0) and me	a	outer, arrao.
A	Check ▶	If the filing organization belor				liated group memb	er's name,
_		address, EIN, expenses, and			•		
В	Check ▶	if the filing organization chec		<del></del>	provisions apply.	T	
		Limits on Lobl (The term "expenditures" m			41	(a) Filing organization's totals	(b) Affiliated group totals
	la Total lo	obbying expenditures to influence	<del> </del>	<del></del>		bigainzation o totalo	group totals
		obbying expenditures to influence	•		, U,		
		obbying expenditures (add lines 1	_				
		• • • •					
		exempt purpose expenditures (ad-					
		ing nontaxable amount. Enter		•			
	columi	ns.			J.	}	
	If the ar	mount on line 1e, column (a) or (b) is	: The lobbying	nontaxable amou	int is:	Salar Sa	*5 " " "
	Not ove	er \$500,000					
	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000.					The state of the state of	
	}	,000,000 but not over \$1,500,000		s 10% of the excess			
	<del></del>	,500,000 but not over \$17,000,000		5 5% of the excess	over \$1,500,000.		
		7,000,000	\$1,000,000.			a the second of	
	_	oots nontaxable amount (enter 25	•				
		ict line 1g from line 1a. If zero or le ict line 1f from line 1c. If zero or le	· ·				
		e is an amount other than zero	•	th or line to di		file Form 4720	<u> </u>
		ng section 4911 tax for this year	-	·	· · · · · ·		Yes No
		- <del></del>		Period Under se		<del></del>	
	(Som	e organizations that made a se				of the five colum	ns below.
	-				s 2a through 2f.)		
		Lobbying	Expenditures	During 4-Year	Averaging Period	<del></del>	<del> </del>
	Cale	endar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) Total
2	2a Lobbyi	ing nontaxable amount					
		of line 2a, column (e))					
	c Total lo	obbying expenditures					
	d Grassr	oots nontaxable amount					

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

descriptio		(€	3)		(b)
1 Dur	"Yes," response on lines 1a through 1i below, provide in Part IV a detailed on of the lobbying activity.	Yes	No	A	mount
legi refe	ring the year, did the filing organization attempt to influence foreign, national, state or local islation, including any attempt to influence public opinion on a legislative matter or erendum, through the use of:	·	, , ,		
	unteers?			- 1, - 1	
	d start of management (include compensation in expenses reported on lines 10 through 11)?				
	illings to members, legislators, or the public?				
	plications, or published or broadcast statements?				
	ants to other organizations for lobbying purposes?				<del></del>
	ect contact with legislators, their staffs, government officials, or a legislative body?				
	lies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Oth	ner activities?				
j Tot	al. Add lines 1c through 1i				
2a Did	the activities in line 1 cause the organization to be not described in section 501(c)(3)?				·
	Yes," enter the amount of any tax incurred under section 4912	1 1 1 1	200		
	Yes," enter the amount of any tax incurred by organization managers under section 4912 .	1 1/4	, ² , ,		<del></del>
	ne filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				·
Part III-A	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	)(5), c	or se	ction	
					Yes No
	re substantially all (90% or more) dues received nondeductible by members?		•	1	×
	the organization make only in-house lobbying expenditures of \$2,000 or less?			2	×
	the organization agree to carry over lobbying and political campaign activity expenditures from the			3	×
Part III-B	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Of answered "Yes."				line 3, is
	es, assessments and similar amounts from members		1		68 <b>,</b> 307.
2 Sec poli	ction 162(e) nondeductible lobbying and political expenditures (do not include amounts itical expenses for which the section 527(f) tax was paid).	of			68 <b>,</b> 307.
2 Sec poli a Cur	ction 162(e) nondeductible lobbying and political expenditures (do not include amounts itical expenses for which the section 527(f) tax was paid).  Trent year	of	2a		
2 Sec poli a Cur b Car	ction 162(e) nondeductible lobbying and political expenditures (do not include amounts itical expenses for which the section 527(f) tax was paid).  Trent year	of	2a 2b		68 <b>,</b> 307.
2 Sec poli a Cur b Car c Tota	ction 162(e) nondeductible lobbying and political expenditures (do not include amounts itical expenses for which the section 527(f) tax was paid).  Trent year	. of	2a 2b 2c		68 <b>,</b> 307.
<ul> <li>2 Secondary</li> <li>a Cur</li> <li>b Car</li> <li>c Total</li> <li>3 Agg</li> <li>4 If no</li> </ul>	ction 162(e) nondeductible lobbying and political expenditures (do not include amounts itical expenses for which the section 527(f) tax was paid).  Trent year	the	2a 2b		68 <b>,</b> 307.
2 Secondary politics of the control	ction 162(e) nondeductible lobbying and political expenditures (do not include amounts itical expenses for which the section 527(f) tax was paid).  Trent year	the	2a 2b 2c 3		68 <b>,</b> 307.
2 Secondary politics a Current b Carrent Carrent Total 3 Agg 4 If no excondary	ction 162(e) nondeductible lobbying and political expenditures (do not include amounts itical expenses for which the section 527(f) tax was paid).  Trent year	the /ing	2a 2b 2c		68 <b>,</b> 307.

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

	, and 01 <b>92</b> 11111111		Employer identification number
	nwood Springs Association of Realt		84-0777133
Pai	Organizations Maintaining Donor Ad		
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6	
		(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 dono		
	funds are the organization's property, subject to t	he organization's exclusive legal contr	ol? 🗌 Yes 🗌 No
6	Did the organization inform all grantees, donors,	and donor advisors in writing that gra	ant funds can be used
	only for charitable purposes and not for the bene		
	conferring impermissible private benefit?		· · · · · · Yes . No
Par	Conservation Easements.		
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held by the		
	Preservation of land for public use (e.g., recre		of a historically important land area
	Protection of natural habitat		of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization h	neld a qualified conservation contributi	on in the form of a conservation
	easement on the last day of the tax year.	•	Held at the End of the Tax Year
а			2a
b	Total acreage restricted by conservation easemer		\\
C	Number of conservation easements on a certified		
ď	Number of conservation easements included in		
3	Number of conservation easements modified, tran	nsferred, released, extinguished, or ter	L
	tax year ►	•	
4	Number of states where property subject to cons	ervation easement is located >	
5	Does the organization have a written policy re		spection, handling of
	violations, and enforcement of the conservation e		
6	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of violations, and enforcing	conservation easements during the year
	<b>&gt;</b>		-
7	Amount of expenses incurred in monitoring, inspecti	ng, handling of violations, and enforcing	conservation easements during the year
	<b>▶</b> \$		-
8	Does each conservation easement reported on line	e 2(d) above satisfy the requirements o	f section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		· · · · · · · · · · · · · · · · · · ·
9	In Part XIII, describe how the organization reports	conservation easements in its revenue	e and expense statement, and
	balance sheet, and include, if applicable, the text		
	organization's accounting for conservation easem	ents.	
Par	III Organizations Maintaining Collection	ns of Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 8.	•
1a	If the organization elected, as permitted under SI	AS 116 (ASC 958), not to report in its	s revenue statement and balance sheet
	works of art, historical treasures, or other similar	r assets held for public exhibition, e	ducation, or research in furtherance of
	public service, provide, in Part XIII, the text of the	footnote to its financial statements tha	at describes these items.
b	If the organization elected, as permitted under 5	SFAS 116 (ASC 958), to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other similar	r assets held for public exhibition, ed	ducation, or research in furtherance of
	public service, provide the following amounts rela	-	
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
	<ul><li>(i) Revenue included on Form 990, Part VIII, line 1</li><li>(ii) Assets included in Form 990, Part X</li></ul>		
2	If the organization received or held works of an	t, historical treasures, or other similar	r assets for financial gain, provide the
	following amounts required to be reported under \$		
а	Revenue included on Form 990, Part VIII, line 1		• \$
b	Assets included in Form 990, Part X	·	•

Part IV   Crganizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued):	Schedu	le D (Form 990) 2017							Page <b>2</b>
oollection items (check all that apply):  a	Pari								
b   Scholarly research   Provide a description of the organization solicit or receive donations of an, historical treasures, or other similar essets to be sold to raise funds rather than to be maintained as part of the organization's collection?   Yes   No   Part N   Escrive and Custodial Arrangements.   Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1b Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.  1c Beginning balance   1c   Amount   1c   Amount	3			ther reco	rds, chec	ck any of the	ne follo	wing that are a s	ignificant use of its
c	а	☐ Public exhibition		d	Loan	or exchan	ge prog	rams	
c	b	Scholarly research		е	☐ Othe	r			
XIII.  During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	c	☐ Preservation for future generations	3						
Sessets to be sold to raise funds rather than to be maintained as part of the organization's collection?   Yes   No	4		tion's collections	and expl	ain how t	hey further	the or	ganization's exer	npt purpose in Part
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	5								
990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  b If Yes,* explain the arrangement in Part XIII and complete the following table:  C Beginning balance	Par	IV Escrow and Custodial Arra	angements.						
included on Form 990, Part X?  C Beginning balance  Beginning balance  C Beginning balance  C Beginning balance  Distributions during the year  Distributions during the year  1 Ending balance  Distributions during the year  Distributions during the year  Distributions  Complete if the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Part V Endowment Funds.  Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  Descributions  C Net investment earnings, gains, and losses  G Grants or scholarships  C Other expenditures for facilities and programs  Administrative expenditures for facilities and programs  Administrative expenditures for facilities and programs  A Endowment P  Permanent endowment P  S Temporantly restricted endowment Indus not in the possession of the organization that are held and administered for the organization by:  Yes No  1 If "Yes" on line 3a(i), are the related organization's endowment tunds.  Describen of property  (a) Cost or other base (b) Cast or other base (c) Cost or other base (c) Accumulated (d) Book value depreciation by:  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other base (b) Cast or other base (c) Accumulated (d) Book value depreciation of property  (a) Cost or other base (b) Cast or other base (c) Accumulated (d) Book value depreciation of property  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other base (b) Cast or other base (c) Accumulated (d) Accu			answered "Yes	" on For	m 990, I	Part IV, lin	e 9, or	reported an an	nount on Form
b If "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance . 1c	1a								
c Beginning balance .	b								
d Additions during the year  Ending balance  Distributions during the year  Ending balance  Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?						a	-	A	mount
d Additions during the year  Ending balance  Distributions during the year  Ending balance  Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	С	Beginning balance					10	;	
Distributions during the year   1	d								
Ending balance   Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?   Yes   No b It "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII   Part V   Endowment Funds.    Complete if the organization answered "Yes" on Form 990, Part IV, line 10.	e						ļ		
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  □ Yes □ No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.  □  Part V ■ Endowment Funds.  Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  1a Beginning of year balance .  □ (e) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years b	f						ļ		
Part V Endowment Funds.  Complete if the organization answered "Yes" on Form 990, Part IV, line 10.    Part V	2a								? 🗌 Yes 🗍 No
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 10.    Contributions	b								
(a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four years					<del></del>	<del></del>	<del></del>		· · · · · · · · · · · · · · · · · · ·
Beginning of year balance  b Contributions  c Net investment earnings, gains, and losses  d Grants or scholarships  e Other expenditures for facilities and programs  f Administrative expenses  g End of year balance  End of year balance  b Permanent endowment ▶ %  b Permanent endowment ▶ %  c Temporarily restricted endowment ▶ %  The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations  (ii) related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (nivestment) (other)  b Buildings  c Leasehold improvements  d Equipment  72,576. 71,278. 1,298.  d Other		Complete if the organization	answered "Yes	" on For	m 990, I	Part IV, lin	e 10.		
b Contributions c Net investment earnings, gains, and losses			(a) Current year	(b) Pr	or year	(c) Two yea	rs back	(d) Three years back	(e) Four years back
c Net investment earnings, gains, and losses	1a	Beginning of year balance							
d Grants or scholarships	b	Contributions							
e Other expenditures for facilities and programs	С								
e Other expenditures for facilities and programs	d	Grants or scholarships							
f Administrative expenses	e								
g End of year balance		programs		<b>,</b>		<u> </u>			
g End of year balance	f	Administrative expenses						\	
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶ %  b Permanent endowment ▶ %  The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	g	-				[		·	
a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	2	Provide the estimated percentage of t	he current year er	nd balanc	e (line 1g	, column (a	a)) held	as:	
b Permanent endowment    c Temporarily restricted endowment    he percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations    (ii) related organizations    3a(ii)    b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?    4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (d) Book value (investment) (other) (2) Accumulated depreciation (d) Book value (investment) (other) (2) Accumulated depreciation (2) Accumulated depreciation (3) Buildings    c Leasehold improvements (2) Accumulated (3) Accumulated (3) Accumulated (3) Accumulated (4) Book value (5) Accumulated (5) Accumulated (6) Book value (7) Accumulated (6) Book value (7) Accumulated (7) Accumulat	а	Board designated or quasi-endowmer	nt ▶	%			.,		
The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	b								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	c	Temporarily restricted endowment ▶	%						
organization by:  (i) unrelated organizations									
(i) unrelated organizations (ii) related organizations  b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  1a Land  b Buildings  295,988  94,235  201,753.  c Leasehold improvements  d Equipment  72,576  71,278  1,298  e Other	За		e possession of th	ne organi	zation tha	at are held	and ad	ministered for th	е
(ii) related organizations		organization by: `							Yes No
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (investment) (other) (other) (295, 988. 94, 235. 201, 753.  Leasehold improvements		(i) unrelated organizations							3a(i)
4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (other)  (investment)  (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  295, 988.  94, 235.  201, 753.  c Leasehold improvements  d Equipment  72, 576.  71, 278.  1, 298.		(ii) related organizations							3a(ii)
Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (other) (other) (other) (d) Book value (d) Book value (other) (ot	b	, • ·	*	•					3b
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.    Description of property   (a) Cost or other basis (other)   (b) Cost or other basis (other)   (c) Accumulated depreciation			<del></del>	on's endo	wment fu	unds.	<del></del>		
Description of property   (a) Cost or other basis (other)   (b) Cost or other basis (other)   (d) Book value	Part			_					
tall Land         (investment)         (other)         depreciation           b Buildings         295,988         94,235         201,753           c Leasehold improvements         201,753         71,278         1,298           e Other         72,576         71,278         1,298		Complete if the organization	answered "Yes	" on For	m 990, F	Part IV, lin	e 11a.	See Form 990,	Part X, line 10.
b Buildings       295,988       94,235       201,753         c Leasehold improvements       72,576       71,278       1,298         e Other       71,278       1,298		Description of property					de	epreciation	(d) Book value
b Buildings       295,988       94,235       201,753         c Leasehold improvements       72,576       71,278       1,298         e Other       71,278       1,298	1a	Land					2/13/2 BY: 15	Myssion of the first of the	
c Leasehold improvements          d Equipment          e Other	b	Buildings	. 29	5,988.					201,753.
d Equipment	c							<del>-</del>	
	d	Equipment	7	2,576.				71,278.	1,298.
· · · · · · · · · · · · · · · · · · ·			nust equal Form 9	90, Part )	K, column	(B), line 10	)c.)		203,051.

1) Financial d 2) Closely-he 3) Other (A) (B) (C) (D) (E) (F) (G) (H)  Total. (Column (b) r	Complete if the organization answered "Yes" on f  (a) Description of security or category (including name of security)  erivatives	(b) Book value	(c) Met	hod of valuation i-of-year market value
2) Closely-hell 3) Other (A) (B) (C) (D) (E) (F) (G) (H)  Total. (Column (b) r	ld equity interests			
2) Closely-hell 3) Other (A) (B) (C) (D) (E) (F) (G) (H)  Total. (Column (b) r	ld equity interests			
(A) (B) (C) (D) (E) (F) (G) (H)  [otal. (Column (b) r				
(A) (B) (C) (D) (E) (F) (G) (H)  otal. (Column (b) r				
(C) (D) (E) (F) (G) (H) otal. (Column (b) r				
(D) (E) (F) (G) (H)  otal. (Column (b) r				
(E) (F) (G) (H) Fotal, (Column (b) r			1	
(F) (G) (H) [otal. (Column (b) r Part VIII			i	
(G) (H) otal. (Column (b) r Part VIII			1	
(H) otal. (Column (b) r Part VIII				
otal. (Column (b) r Part VIII				
Part VIII				
	nust equal Form 990, Part X, col. (B) line 12 ) ▶		Branch And The Control	
	nvestments-Program Related.			
(	Complete if the organization answered "Yes" on I	form 990, Part IV, lin	ne 11c. See Form	990, Part X, line 13.
	(a) Description of investment	(b) Book value		thod of valuation l-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nust equal Form 990, Part X, col. (B) line 13 ) ▶		1 5 5 3 1 2 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1 3 1	
Part IX	Other Assets.			
(	Complete if the organization answered "Yes" on F	orm 990, Part IV, lin	e 11d. See Form	990, Part X, line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 15.) .		<b>.</b> ▶	
(	Other Liabilities. Complete if the organization answered "Yes" on Fine 25.	form 990, Part IV, lin	e 11e or 11f. Se	e Form 990, Part X,
	(a) Description of liability (b) Book valu		I WANTO COM	
(1) Federal inco				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nust equal Form 990, Part X, col. (B) line 25.)			
	ncertain tax positions. In Part XIII, provide the text of the foo	tnote to the organization	n's financial stateme	ents that reports the

					- ruge .
Part				Return.	
	Complete if the organization answered "Yes" on Form 990,				
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			\$ ^ +	
а	Net unrealized gains (losses) on investments	2a		3 6 4	
b	Donated services and use of facilities	2b		E TO THE STATE OF	
С	Recoveries of prior year grants	2c		10 m 1 m	
d	Other (Describe in Part XIII.)	2d		یر بی کر افتحسف	
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			5 58 az	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С 5	Add lines 4a and 4b			4c	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5 Detus	<del></del>
Part				r Heturn.	
	Complete if the organization answered "Yes" on Form 990,				
1	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:			1 265 4	
2	Donated services and use of facilities	1001			
a b	Prior year adjustments	2a   2b			
C	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d	20		2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1		W.	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	·		
c	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 18.) .     .		5	
Part	XIII Supplemental Information.				
	te the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part				
			***************************************		
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REV 11/13/17 PRO

Page 4

Schedule D (Form 990) 2017

Schedule D' (Form 990) 2017

BAA

# **SCHEDULE 1** (Form 990)

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

2017

OMB No. 1545-0047

	ပိ	mplete if the organ	nization answered "	Yes" on Form 990,	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.	ď	( <u>4</u>
Department of the Treasury Internal Revenue Service		► Go to v	► Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.	Form 990. Of for the latest info	ormation,		Open to Publi Inspection
Name of the organization						Employe	Employer identification number
Glenwood Springs Association of	tion of Rea	Realtors				84-0777133	77133
Part I General Information on Grants and Assistan	on Grants and	Assistance					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	n records to subs	tantiate the amou	unt of the grants or	assistance, the g	rantees' eligibility f	or the grants or assistance,	
the selection criteria used to award the grants or assistance?	ward the grants o	or assistance?					. X Yes No
Sesc	ation's procedure	es for monitoring	the use of grant fur	nds in the United	States.	-	1 10 / 11
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization ans 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	sistance to Doi or any recipient	<b>nestic Organiz</b> that received m	ations and Dom ore than \$5,000.	iestic Governm Part II can be d	<b>ents.</b> Complete i uplicated if additi	<b>Grants and Other Assistance to Domestic Organizations and Domestic Governments.</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	red "Yes" on Form
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(e) Amount of non-cash assistance (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(6)							
(4)							
(5)							
(9)							
Ø							
(8)							
(6)							
(10)							
(11)							

For Paperwork Reduction Act Notice, see the Instructions for Form 990. BAA

Enter total number of other organizations listed in the line 1 table

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Schedule I (Form 990) (2017)

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Schedule I (Form 990) (2017)

Page 2

Schedule I (Form 990) (2017) (f) Description of noncash assistance Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of noncash assistance 10,000. (c) Amount of cash grant Part III can be duplicated if additional space is needed. 14 (b) Number of recipients (a) Type of grant or assistance 1 SCHOLARSHIPS Part IV Part III BAA က Ŋ 9 N 4

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

#### 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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Glenwood Springs Association of Realtors	84-0777133
Pt VI, Line 11b: AVAILABLE TO ALL BOARD MEMBERS	
Pt VI, Line 15a: BOARD REVIEWS ALL SALARY AND COMPENSATION	
Pt VI, Line 6: ORGANIZATION HAS MEMBERS	
Pt VI. Line 7a: BOARD ELECTS MEMBERS OF GOVERNING RODY	
***************************************	
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