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.

Open to Public Inspection

Dep Inte	artment of th	ne Treasury e Service	► Go to www.irs.gov/Form990 for instructions and the latest information.		Inspection			
A			dar year, or tax year beginning , 2017, and ending	<u>,</u>	,			
В	Check if ap	plicable	C D (Employer iden	tification number			
	Addre	ss change		84-1179				
	Name	change		Telephone nun	nber			
	Initial	return	301 WILCOX STREET CASTLE ROCK, CO 80104	303-663-6220				
	Final ref	turn/terminated	CASIBE ROCK, CO 80104					
	Amend	ded return		Gross receipts	-01/1011			
	Applic	ation pending	F Name and address of principal officer H(a) Is this a ground the second that	•	H res			
-	-		SAME AS C ABOVE H(b) Are all subor f No. attack	ainates include a a list (see in	ed? Yes No			
<u>.</u>		not status	501(c)(3) X 501(c) (4) (Insert no.) 4947(a)(1) or 52)					
7	Websi		W.E-CAA.COM H(c) Group exemp					
K		organization Summar	X Corporation Trust Association Other ► L Year of formation 1972	IVI State of	legal domicile CO			
1 6	1 Bri	efly descri	y be the organization's mission or most significant activities ASSISTANCE TO COLO	אַ חמק	SCECCORC			
ಕ್ಕಾ	l Ti		EDUCATION AND TRAINING.	IVIDO VI	<u> </u>			
25								
6 E								
VED MAR 2 0 2019 Activities & Governance	2 Ch	eck this bo						
A S S	3 Nu		ting members of the governing body (Part VI, line 1a)	3	5			
S ≥	4 Nu		dependent voting members of the governing body (Part VI, line 1b) of individuals employed in calendar year 2017 (Part V, line 2a)	5	0			
	6 To		of volunteers (estimate if necessary)	6	0			
関す	7a To		ed business revenue from Part VIII, column (C), line 12	7a	0.			
Ž		t unrelated	business taxable income from Form 990-T, line 34	7b	0.			
SCANNED Revenue Activit			Prior		Current Year			
<u>့</u> လိ	1			98,943.	101,710.			
eur	1	-		55,303.	129,628.			
É	1		come (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	36.	66.			
_	1			54,282.	231,404.			
				5,000.	15,000.			
	1		to or for members (Part IX, column (A), line 4)					
			er compensation, employee benefits (Part IX, column (A), lines 5-10)					
Expenses	16a Pro	ofessional	fundraising fees (Part IX, column (A), line 11e)	-				
pen			sing expenses (Part IX, column (D), line 25) ▶					
型				14,001.	186,671.			
				9,001.	201,671.			
			expenses Subtract line 18 from line 12	5,281.	29,733.			
გ წ			Reginner of		End of Year			
Net Assets or Fund Balances	20 To	tal assets	1—1 IAN 1 (2010 IC) 1 ——————	04,615.	234,348.			
A B	21 To	tal liabilitie	s (Part X, line 26)	0.	0.			
5 5	22 Ne	t assets or	fund balances Subtract line 21 from line 20 OGDEN, UT 20	04,615.	234,348.			
Pa	irt II	Signatur						
Unde	er penalties	of perjury, I de	clare that I have examined this return, including accompanying schedules and statements, and to the best of my knowner (other) is based on all information of which preparer has any knowledge	vledge and be	lief, it is true, correct, and			
	piete Deciai	T. Trepa	rer (other printed) is based of an information of which preparer has any knowledge	70 A	2010			
۵.		Signatur	re of officer Date	10-2	017			
Sig He	gn ro	I. •	ν	CD.				
пе	16		A FRIZELL TREASURI	<u>sk</u> _				
			reparer's name Preparer's signature Date Chec	k If	PTIN			
Pa	id	1	TP. 8	mployed	P00518631			
	iu eparer	Firm's name			1.00010001			
	e Only	Firm's addre		sEIN► 84	-1206938			
	•		LITTLETON, CO 80160 Phon					
May	y the IRS	discuss th	is return with the preparer shown above? (see instructions)		X Yes No			
_			eduction Act Notice, see the separate instructions. TEEA0113L 08/08/17		Form 990 (2017)			

Yes No

84-1179322

Checklist of Required Schedules	

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
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	3	Х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
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	х	
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
0	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		Х
1	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
ā	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a		Х
t	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	11 Ь		Х
(: 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	11 c		Х
C	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	11 d		Х
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		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	11 f		Х
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		Х
t	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		Х
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		Х
ł	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
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	15		Х
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		Х
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		Х
8	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		Х
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		Х

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Form 990 (2017) COLORADO ASSESSORS ASSOCIATION

[Part] V Checklist of Required Schedules (continued)

			res	NO
20a	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
t	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь		
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	Х	
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		Х
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? <i>If 'Yes,' complete Schedule J</i>	23		Х
	a 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		Х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u></u>
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
	a 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		Х
ı	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II	26		Х
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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
i	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
ı	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	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		Х
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
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		Х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ı	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		
	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		
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990 ((2017)

Form 990 (2017) COLORADO ASSESSORS ASSOCIATION 84-1179322 Page 5 |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 1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 a 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c (gambling) winnings to prize winners? 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 0 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3 a 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O 3 b 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4 a **b** 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 (FBAR) X 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a 5 b X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 c 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Х solicit any contributions that were not tax deductible as charitable contributions? 6 a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were 61 not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and 7 a services provided to the payor? 7 b b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7 c Form 82827 d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 e e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 g as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7 7 h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring Х 8 organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. 9 a a Did the sponsoring organization make any taxable distributions under section 4966? 9 b b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10 a 10 b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter 11 a a 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) 11 b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a 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. 13 a a is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in 13b which the organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand

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

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

13c

14 a

X

Form 990 (2017) COLORADO ASSESSORS ASSOCIATION 84-1179322 Page 6 Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Χ Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1 b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 X Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors, or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents Х since the prior Form 990 was filed? 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 Did the organization have members or stockholders? 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х members of the governing body? 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 a Х a The governing body? X Яb **b** Each committee with authority to act on behalf of the governing body? 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 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No X 10 a Did the organization have local chapters, branches, or affiliates? 10 a b 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? 10 b X 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O 12a X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 120 Schedule O how this was done X 13 13 Did the organization have a written whistleblower policy? \overline{X} 14 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a X X b Other officers or key employees of the organization 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16 a Х taxable entity during the year? b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website Upon request Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records

LISA

FRIZELL 301 WILCOX STREET

CASTLE ROCK CO 80104 303-663-6220

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

- 1 a 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

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

		(C)								
(A) Name and Title	(B) Average hours per	verage is both an officer and a Reportable Reportable compensation from compensation		Reportable compensation from	(F) Estimated amount of other compensation					
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099 MISC)	from the organization and related organizations
(1) MIGUEL MARTINEZ	$-\frac{1}{0}$			Х				0.	0.	0.
2ND VICE PRESNT	1	-	├─┤			\vdash	\vdash	0.	0.	<u></u>
(2) NATALIE WOODRUFF PRESIDENT				Х				0.	0.	0.
(3) STEPHEN SCHLEIKER 1ST VICE PRESNT	1			Х				0.	0.	0.
(4) DEBBIE GRIFFITH	1									
SECRETARY	0			Х				0.	0.	0.
(5) LISA FRIZELL TREASURER	$-\frac{1}{0}$			Х				0.	0.	0.
(6)								-		
<u>(7)</u>										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)	,									
(14)										

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Part	VII Section A. Officers, Directors, Tru		\ey	<u> </u>		_	es, a	anc	nighest con	ipensated Emp	Toyees (continued)
	v	(B)			(C						
	(A)	Average hours			check		than o		(D) Reportable	(E) Reportable	(F) Estimated
	Name and title	per week		er ar	nd a	dırect	or/trust	tee)	compensation from	compensation from	amount of other compensation
		(list any hours	Indiv	nstit	Officer	€ €	empl High	om -	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization
		for related	ndividual t r director	ntor	œ	emp	est co	ner			and related organizations
		organiza - tions below	Individual trustee or director	nal tn		Key employee	ompe				
		dotted line)	lee	nstitutional trustee		"	Highest compensated employee				
							မြ				
(15)										.	
(16)			ļ								
<u> </u>		_	1								
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(23)			1]								
(24)											
							ļ				
(25)			1								
1 b S	ub-total		ш			<u> </u>		>	0.	0.	0.
сТ	otal from continuation sheets to Part VII, Section	on A						> [0.	0.	0.
	otal (add lines 1b and 1c)							<u> </u>	0.	0.	0.
	otal number of individuals (including but not limited	to those I	sted	abo	ve) v	who	receiv	ved	more than \$100,00	0 of reportable comp	pensation
	om the organization ► 0										Yes No
3 C	id the organization list any former officer, direct	tor or tru	stee	kev	/ em	יסומר	vee. i	or h	ughest compensa	ted employee	
0	n line 1a ⁷ If 'Yes,' complete Schedule J for suci	h individu	al	,	,		, ,				3 X
4 F	or any individual listed on line 1a, is the sum of ne organization and related organizations greate	reportab	le coi	mpe	nsa	tion	and	oth	er compensation	from	
	ne organization and related organizations greate uch individual	er (nan şı	50,00	JU !	11 1	es,	COIII	ipiei	le Scriedule 3 loi		4 X
5 [id any person listed on line 1a receive or accrue or services rendered to the organization? If 'Yes	e compen	satio	n fr	om	any	unre	late	d organization or	ındıvıdual	5 X
	on B. Independent Contractors	, comple	16 30	.1100	uic	3 10	1 340	πρ.	ersorr		T A
1 0	omplete this table for your five highest compensorpensation from the organization. Report compens	sated inde	epend	den	t co	ntra	ctors	tha	t received more the	han \$100,000 of	
			ine ca	alen	uai j	year	Cridii	ilg v	(B)	i	(C)
	(A) Name and business addr	ess							Description (of services	Compensation
	-										
	otal number of independent contractors (including b		ted to	o tho	se I	isted	d abov	ve) '	who received more	than	. 1
BAA	100,000 of compensation from the organization	<u>`</u>	TEEA0	1081	USI	08/17					Form 990 (2017)
			~ 0		JON	JUI 1 /					(201/)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) (D) (B) Total revenue Related or Unrelated Revenue excluded from tax exempt business under sections 512-514 function revenue revenue Contributions, Gifts, Grants 1 a Federated campaigns 1 a **b** Membership dues 1 b 101,710 1 c c Fundraising events d Related organizations 1 d and Other Similar e Government grants (contributions) 1 e f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f 101,710 Business Code Program Service Revenue 611710 70,161 70,161 2a EDUCATIONAL SUPPORT SERVI 43,908 43,908 611430 b EDUCATIONAL REVENUE 10,315 10,315 531390 c OTHER REAL ESTATE ACTIVIT 5,244 5,244 611710 d MISCELLANEOUS INCOME f All other program service revenue g Total. Add lines 2a-2f 129,628 Investment income (including dividends, interest and 3 other similar amounts) 66 66 Income from investment of tax-exempt bond proceeds. 5 Royalties (ı) Real (ii) Personal 6 a Gross rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory **b** Less cost or other basis and sales expenses. c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events 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. 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a C d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions 129,628 0 231 404 66

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 (A) (B) (D) Do not include amounts reported on lines Total expenses Program service Management and Fundraising 6b, 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments 15,000 See Part IV, line 21 15,000 Grants and other assistance to domestic individuals See Part IV. line 22 Grants and other assistance to foreign organizations, foreign governments, and for-eign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 0 0 0. 0. 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) 0 0 0 7 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) èmployer contributions) Other employee benefits Payroll taxes 11 Fees for services (non-employees) 39,584 a Management 39,584 125 125 b Legal 1,250 c Accounting ,250 d Lobbying 22,000 22,000 e Professional fundraising services See Part IV, line 17 f Investment management fees g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) Advertising and promotion Office expenses 338 338 Information technology 15 Royalties 16 Occupancy 1,258 1,258 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 373 Conferences, conventions, and meetings 373 19 20 Interest Payments to affiliates Depreciation, depletion, and amortization 23 Insurance 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) 120,044 120,044 a SCHEDULE_0 271 b DUES AND SUBSCRIPTIONS 271 354 354 • WEB - SITE MAINTENANCE 64 64 d AWARDS/GIFTS 10 10. e All other expenses 201,671. 44,627 0. 25 Total functional expenses Add lines 1 through 24e 157,044 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)

		Check if Schedule O contains a response or note to	any line in this Part X						
				(A) Beginning of year		(B) End of year			
	1	Cash - non-interest-bearing		133,616.	1	164,813.			
	2	Savings and temporary cash investments		59,999.	2	60,035.			
l	3	Pledges and grants receivable, net		3					
	4	Accounts receivable, net			4				
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated e Part II of Schedule L		5					
	6	Loans and other receivables from other disqualified p	ersons (as defined under		3	- " - 1			
	Ū	section 4958(f)(1)), persons described in section 4958(c)(employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions) Complete	3)(B), and contributing (9) voluntary employees'		6				
2	7	Notes and loans receivable, net			7				
Assets	8	Inventories for sale or use			8				
As	9	Prepaid expenses and deferred charges		11,000.	9	9,500.			
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			}				
	b	Less accumulated depreciation	10b		10 c				
	11	Investments – publicly traded securities		-	11				
	12	Investments – other securities See Part IV, line 11			12				
	13	Investments - program-related See Part IV, line 11			13				
	14	Intangible assets			14				
	15	Other assets See Part IV, line 11		· ·	15				
	16	Total assets. Add lines 1 through 15 (must equal line	34)	204,615.	16	234,348.			
\dashv	17	Accounts payable and accrued expenses			17				
	18	Grants payable			18				
	19	Deferred revenue			19				
	20	Tax-exempt bond liabilities			20				
ဖွ	21	Escrow or custodial account liability Complete Part	IV of Schedule D		21				
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and	ers, directors, trustees, d disqualified persons						
اڌ		Complete Part II of Schedule L			22				
	23	Secured mortgages and notes payable to unrelated the			23				
	24	Unsecured notes and loans payable to unrelated third			24				
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24) Com	es to related third parties, inplete Part X of Schedule D		25 26				
	26	Total liabilities. Add lines 17 through 25		0.	20	0.			
S		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.	ere ► X and complete						
١٤	27	Unrestricted net assets		204,615.	27	234,348.			
<u>a</u>	28	Temporarily restricted net assets		204,015.	28	234,340.			
ĕ	29	Permanently restricted net assets			29				
밀	29	Organizations that do not follow SFAS 117 (ASC 958), cl	nack here >			,			
3		and complete lines 30 through 34.	leck liefe .						
Net Assets or Fund Balances	20	Capital stock or trust principal, or current funds	•						
ets	30	Paid-in or capital surplus, or land, building, or equipm	nent fund		30 31				
SS	31	Retained earnings, endowment, accumulated income			32				
it A	32	Total net assets or fund balances	, or other failes	204,615.	33	234,348.			
ž	33	Total liabilities and net assets/fund balances			34	234, 348.			
	34	rutai naunities anu net assets/iunu palances		204,615.	_~_	234,340.			

BAA

Form **990** (2017)

COLORADO ADDESDORO REDOCTATION	01 11/752			,
Part 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	23	1,4	04.
2 Total expenses (must equal Part IX, column (A), line 25)	2	20	1,6	71.
3 Revenue less expenses Subtract line 2 from line 1	3	2	9,7	33.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	20	4,6	15.
5 Net unrealized gains (losses) on investments	5			
6 Donated services and use of facilities	6			
7 Investment expenses	7			
8 Prior period adjustments	8			
9 Other changes in net assets or fund balances (explain in Schedule O).	9			0.
10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	23	4,3	48.
Part XII Financial Statements and Reporting				
Check if Schedule O contains a response or note to any line in this Part XII				П
		1	/es	No
1 Accounting method used to prepare the Form 990 X Cash Accrual Other		- 2.2.		
If the organization changed its method of accounting from a prior year or checked 'Other,' ex in Schedule O	plain		-r	e ²
2 a Were the organization's financial statements compiled or reviewed by an independent account	ntant?	2 a		X
If 'Yes,' check a box below to indicate whether the financial statements for the year were cor	mpiled or reviewed on a	,	٠,	•
separate basis, consolidated basis, or both			<u>. </u>	1,,1
Separate basis Consolidated basis Both consolidated and separate basis	S			
b Were the organization's financial statements audited by an independent accountant?		2 b		_X
If 'Yes,' check a box below to indicate whether the financial statements for the year were aud	dited on a separate	,-	٠,	٠٤٦٠
basis, consolidated basis, or both	•	'	<u>`</u>	
Separate basis Consolidated basis Both consolidated and separate basis		<u></u>	<u>-</u> -	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for ove review, or compilation of its financial statements and selection of an independent accountant	t?	2 c		
If the organization changed either its oversight process or selection process during the tax your schedule O	ear, explain	<u> </u>	42,2	27
3 a As a result of a federal award, was the organization required to undergo an audit or audits as set fo Audit Act and OMB Circular A-133?	rth in the Single	3 a		Х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not underg	o the required audit			
or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b		
BAA		Form 9	990 (2	2017

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

Schedule C (Form 990 or 990-EZ) 2017

Openito Public

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to at 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
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered 'Yes,' on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	xy Tax) (see separate instruc t Section 501(c)(4), (5), or (6) o	tions), then rganizations Complete Part III		•	
Name	of organization COLORADO	ASSESSORS ASSOCIATION		Employer identifica	
		ZELL, ASSESSOR		84-117932	
		rganization is exempt under section			zation.
1		organization's direct and indirect political on of 'political campaign activities')	ampaign activities in	Part IV	
2	Political campaign activity ex	kpenditures (see instructions)		▶\$	22,000.
3	Volunteer hours for political	campaign activities (see instructions)			
Par	· · · · · · · · · · · · · · · · · · ·	rganization is exempt under section			
1	•	ise tax incurred by the organization under		► \$	
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	►\$	
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a correction made?				Yes No
_	If 'Yes,' describe in Part IV				
		rganization is exempt under section			
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt functio	n activities > \$	
2	Enter the amount of the filing of function activities	organization's funds contributed to other organ	izations for section 527	' exempt ►\$	
3	Total exempt function expen line 17b	ditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	► \$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes X No
5	organization made payments	and employer identification number (EIN) s. For each organization listed, enter the ail is received that were promptly and directly delal action committee (PAC). If additional spa	mount paid from the f ivered to a separate of	iling organization's fund ditical organization, such	ds. Also enter the as a separate
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Part II-A Complete if	the organization	n is exempt under se	ection 501(c)(3) and	filed Form 5768 (ele	ection under
section 501(
		igs to an affiliated group (and		ited group member's name	•
	•	nd share of excess lobbying			
B Check ► ☐ If the filir	ng organization che	ecked box A and 'limited co	ontrol provisions apply		
(The term		ying Expenditures ans amounts paid or incu	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	ures to influence p	ublic opinion (grass roots l	obbying)		
		legislative body (direct lob	bying)		
c Total lobbying expenditu	•	and 1b)			
d Other exempt purpose e	•	4 14 8			
e Total exempt purpose e	xpenditures (add li	nes Ic and Id)			
f Lobbying nontaxable an both columns	nount Enter the ar	mount from the following ta	ible in		
If the amount on line 1e, colo	umn (a) or (b) is	The lobbying nontaxable	amount is		i
Not over \$500,000		20% of the amount on line 1e			ì
Over \$500,000 but not over \$1,		\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the excess			i
Over \$1,500,000 but not over \$	17,000,000	\$225,000 plus 5% of the excess	over \$1,500,000.		
g Grassroots nontaxable a	amount (onter 25%	\$1,000,000 of line 15			
h Subtract line 1g from lin					
i Subtract line 1f from lin					
	er than zero on eithe	r line 1h or line 1i, did the or	ganızatıon file Form 4720	reporting	☐Yes ☐No
					<u> </u>
(Som		4-Year Averaging Period at made a section 501(h) e elow. See the separate ins	election do not have to o		
	Lob	bying Expenditures During	g 4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					
BAA					1 990 or 990-EZ) 2017

11

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		1)	(b)
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of. a Volunteers?	-		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements?			
d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities?			
j Total Add lines 1c through 1i			
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or	

section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	Х	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		Х
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		X

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part III-A, line 3, is answered 'Yes.'

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2 a	
b Carryover from last year	2 b	
c Total	2 c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	0.
5 Taxable amount of lobbying and political expenditures (see instructions)	5	0.

Part IV | Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

ADDITIONAL INFORMATION

MONITORING OF LEGISLATIVE ACTIVITY CONCERNING PROPERTY ASSESSMENT AND TAXATION FOR THE BENEFIT OF ALL PROPERTY TAXPAYERS IN THE STATE OF COLORADO.

SCHEDULE I (Form 990)		Gov Gov	ants and Othernments, ar	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	to Organization In the United St	is, ates		OMB No 1545-0047 .
Department of the Treasury Internal Revenue Service			te ii tile organiizatit	Complete it the organization answered, res. On Form 990. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for the latest information	of information	.; 5	I	Open to Public Inspection
Name of the organization C	COLORADO ASSESSORS LISA FRIZELL, ASSE	SSORS ASSOCIATION ASSESSOR	rion				Employer identification number 84-1179322	ation number
Part General In	Iformation on Gr	General Information on Grants and Assistance	nnce .					
1 Does the organizate the selection crite 2 Describe in Part IV	ton maintain records teria used to award the	Does the organization maintain records to substantiate the amount of the game selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of	ount of the grants or se? the use of grant fur	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	eligibility for the grants	or assistance, and		X Yes No
=	d Other Assistar Part IV, line 21,	nce to Domestic for any recipient	Organizations at that received n	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Ye 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.	. —	Complete if the organization answered 'Yes' on be duplicated if additional space is needed.	tion answered 'Y	es' on d.
1 (a) Name and addr	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
$\begin{array}{c c} \hline (1) & \underline{\text{CO}} & \underline{\text{ASSOC}} & \underline{\text{OF}} & \underline{\text{TA}} \\ \hline - & \underline{\text{P}} \cdot \underline{\text{O}} & \underline{\text{BOX}} & \underline{276} & \underline{\text{C}} \\ \hline & & \underline{\text{BRECKENRIDGE, C}} \end{array}$	TAX APPRAISERS	20-1914757		15,000.	0			SCHEDULE 0
<u></u>								
(3)								
(4) 								
(5)								
<u>@</u>								
(8) 								
2 Enter total number 3 Enter total number	er of section 501(c)(. er of other organizati	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	rganizations listed 1 1 table	in the line 1 table			•	0 1
BAA For Paperwork Reduction Act Notice, see the Instructions for Form	Reduction Act Notice	s, see the Instruction	s for Form 990.		TEEA3901L 08/10/17	08/10/17	Schedu	Schedule I (Form 990) (2017)

Page 7 Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2017) COLORADO ASSESSORS ASSOCIATION Part III | Grants and Other Assistance to Domectic Individuals

	call be duplicated if additional space is liceasu.	שכני ואינים איני				
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
-						
8						
m						
4	a					
r.					,	
9						
7						
Part IV	Part IV. Supplemental Information. Provide the information	de the information	required in Part I,	line 2; Part III, col	umn (b); and any othe	required in Part I, line 2; Part III, column (b); and any other additional information.

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.

> Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

COLORADO ASSESSORS ASSOCIATION LISA FRIZELL, ASSESSOR

Employer identification number

84-1179322

PART IX - STATEMENT OF FUNCTIONAL EXPENSES - LINE 24A

PROGRAM EXPENSES - CONSULTING FEES	16,500
PROGRAM EXPENSES - CONFERENCES	68,348
PROGRAM EXPENSES - ASSESSOR EDUCATION	35,196
,	

120,044

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS - LINE 1

THE COLORADO ASSESSORS ASSOCIATION IS DEDICATED TO "VALUING COLORADO' WITH THE HIGHEST STANDARDS OF PROFESSIONALISM, USING THE BROADEST APPLICATION OF PROPER APPRAISAL METHODS, TECHNIQUES AND STANDARDS AVAILABLE, IN ORDER TO ASSURE STATEWIDE EQUALIZATION IN THE VALUATION OF REAL AND PERSONAL PROPERTY, WHILE MAINTAING THE PRINCIPLE OF LOCAL CONTROL; TO PROVIDE INFORMATION TO THE PUBLIC SO THEY MIGHT ACQUIRE A BETTER UNDERSTANDING OF THE APPRAISAL AND ASSESSMENT PROCESS; AND TO ASSIST WITH AND PROVIDE INFORMATION TO THE COLORADO GENERAL ASSEMBLY, IN ORDER TO ACHIVE A "FAIR AND EQUITABLE" AD VALOREM SYSTEM.

SCHEDULE I - PART 2- COLUMN (H)

GRANTS AND SIMILAR AMOUNTS

CONTRIBUTION TO COLORADO ASSOCIATION OF TAX APPRAISERS FOR CONTINUING EDUCATION CLASSES FOR COUNTY ASSESSMENT APPRAISERS AND STAFF.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

REVIEWED WITH THE TREASURER, THE EXECUTIVE DIRECTOR AND THE PAID PREPARER IN CONJUNCTION WITH THE 990 PREPARATION PROCESS.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

GOVERNING DOCUMENTS ARE PUBLISHED ON THE COMPANY'S WEBSITE. FORM 990 IS AVAILABLE UPON REQUEST.