## **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

<u>A</u>	For the 2	2013 cale	ndar year, or tax year beginning , 2013, and ending			, 20			
В	Check if a	pplicable	C Name of organization Rocky Mountain Gun Owners, Inc.		D Employ	er identification nu	ımber		
	Address c	hange	Doing Business As			84-1368137			
	Name cha	nge	Number and street (or P O box if mail is not delivered to street address) Room/suit	e	E Telepho	E Telephone number			
	Initial retur	'n	PO Box 27			888-874-3006			
	Terminate	d	City or town, state or province, country, and ZIP or foreign postal code			•			
	Amended	return	Windsor, CO 80550		<b>G</b> Gross r	eceipts \$	916,308		
	Applicatió	n pending	F Name and address of principal officer	H(a) Is this a g	roup return for	subordinates? Yes	✓ No		
			Dudley Brown PO Box 27 Windsor, CO 80550	H(b) Are all	subordinate	es included? 🗌 Yes	☐ No		
$\overline{}$	Tax-exem		□ 501(c)(3)	_ ``		a list (see instructio			
J	Website:		W.RMGO.ORG	H(c) Group	exemption	number ►			
K	Form of ord		✓ Corporation ☐ Trust ☐ Association ☐ Other ►			of legal domicile	CO		
_	art I	Summ				<u> </u>			
			escribe the organization's mission or most significant activities						
ė	1	ee sched	-						
anc	=	00 301100							
& Governance	2 0	heck th	is box ▶☐ if the organization discontinued its operations or disposed o	f more that	1 25% of	ıts net assets			
<b>₹</b> ŏ	3 1		of voting members of the governing body (Part VI, line 1a)				3		
62	4 1		of independent voting members of the governing body (Part VI, line 1b)						
e's			nber of individuals employed in calendar year 2013 (Part V, line 2a)		5		1		
<u>-≅</u>	1		nber of volunteers (estimate if necessary)	, , .	6		<u>.</u>		
Activities	1		elated business revenue from Part VIII, column (C), line 12	, , , ,	7a				
ふ	1		ated business taxable income from Form 990-T, line 34	, .	7b				
$\overline{}$		tot unito	ated business taxable income norm cool 1, into of 1	Prior Y		Current Ye	ar		
Sevenue C	8 0	Contribut	tions and grants (Part VIII line 1h)		199,815		916,308		
	9 F	Program	service revenue (Part VIII line 2g)		100,010		010,000		
₹ <u>\$</u>	10 li	nvestme	nt income (Part VIII, column (A), lines 3, 4 and 70	<i>}</i>					
7	11 (	Other rev	sions and grants (Part VIII, line 1h). service revenue (Part VIII, line 2g) nt income (Part VIII, column (A), lines 3, 4 and 2d) renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e), 2014. renue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u> </u>			<del></del>		
, ,	12 T	otal reve	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	199,815		916,308		
					12,600		66,500		
	14 E	Benefits i	nd similar amounts paid (Part IX, column (A), lines 1–3) paid to or for members (Part IX, column (A), line 4) other compensation, employee benefits (Part IX, column (A), lines 5–10)		0		0		
<b>'</b> 0	15 8	Salaries (	other compensation, employee benefits (Part IX, column (A), lines 5-10)		41,400		59,181		
Se		-	onal fundraising fees (Part IX, column (A), line 11e)		0		00,.01		
Expenses			draising expenses (Part IX, column (D), line 25) ► 118,114	istasianis / E		ري أَمَّا الْمِي	-		
Ä			penses (Part IX, column (A), lines 11a-11d, 11f-24e)		129,003		689,090		
			enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		183,003	<del></del>	814,771		
			less expenses. Subtract line 18 from line 12		16.812		101,537		
- s		10101100	B	eginning of Ci					
Net Assets or Fund Balances	20 T	otal ass	ets (Part X, line 16)		36,412		138,037		
Ass I Bal	21 T		Ilities (Part X, line 26)		0		3,510		
E.E.	22 N		ts or fund balances. Subtract line 21 from line 20		36,412		134,527		
_	art II		ture Block		,	L.			
_			ny declare that I have examined this return, including accompanying schedules and staten	ents, and to	he best of	mv knowledge and	belief, it is		
tru	e, correct,	and comp	ete. Declaration of preparer (other than officer) is based on all information of which preparer	has any know	ledge	,			
		1			0,-	-15-201	<u></u>		
Sig	an l	Sign	ature of officer	7. Da	ate,		<del></del>		
He			udley W. Brown Executive	1)irec	tor				
		Type	or print name and title	<u> </u>	, _ ,				
_		<del>,</del>	pe preparer's name Preparer's signature Date	e	Check	PTIN			
Pa					self-em				
	eparer	Firm's n	ame •	Fire	n's EIN ▶				
Us	e Only		ddress ▶		one no				
Ma	v the IRS		s this return with the preparer shown above? (see instructions)		, ic IIO	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	No		
				11282Y			90 (2013)		

Form 990 (2013) -

Rocky Mountain Gun Owners 89-1368 13 7 Page 2

	(2013) CMM68)	age Z
Part	*Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III	<b>V</b>
1	Briefly describe the organization's mission	
	see schedule O	<b></b>
	Did the organization undertake any significant program services during the year which were not listed on the	
2	prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	.,,
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ners,
	the total expenses, and revenue, if any, for each program service reported.	
4-	(Code: ) (Expanses \$ 527.994 including greats of \$ 66.500 \ /Payanua \$	
4a	(Code ) (Expenses \$ 637,884 including grants of \$ 66,500) (Revenue \$ )  To promote and defend the right to keep and bear arms of every law abiding Colorado citizen.	
4b	(Code) (Expenses \$including grants of \$) (Revenue \$)	
		<b></b>
		. <b></b>
4c	(Code) (Expenses \$including grants of \$) (Revenue \$)	
		<b></b> -
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses ▶	

RMGO

Part I	Checklist of Required Schedules			
•			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			_
•	complete Schedule A	1	<del> </del>	<b>✓</b>
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2		<b>-</b>
3	candidates for public office? If "Yes," complete Schedule C, Part I	3_		1
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? If "Yes," complete Schedule C, Part II	4		
	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		1
	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		1
	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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		· /
	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.	4		
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	<b>✓</b>	324224 1
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		1
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		1
	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		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
	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		<b> </b> ✓
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		1
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		1
	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		1
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		1
	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		1
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>

Part	Checklist of Required Schedules (continued)	_		
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 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 individuals in the United States on Part IX, column (A), line 2° If "Yes," complete Schedule I, Parts I and III	22		1
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			<b>√</b>
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	23 24a		<b>▼</b>
	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 to defease any tax-exempt bonds?	24b 24c		<b>√</b>
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		1
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		<b>✓</b>
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)	<b>*</b>		***
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
С	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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<b>√</b>
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		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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	35a 35b		✓
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R</i> ,			<b>√</b>
38	Part VI  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	37	1	
	<del></del>	Голи	, aan	/0040

D 11/	<sup>∗</sup> Statements	P 11	A		

	Check if Schedule O Contains a response of note to any line in this Part V			. L
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<b>⊣</b>	22,712	C Mary
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	4		a be for
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	<b>√</b>	2 pt 3 = 1191
Za				
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	<b>V</b>	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
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		<b>-</b>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			_
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
b	If "Yes," enter the name of the foreign country: ▶	24.3	375	188.50
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	X, 3	1971,75°	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	The manifest date and	✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	<b>√</b>	
7	Organizations that may receive deductible contributions under section 170(c).	8885.A		1932
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			.3 *.
_	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b></b> _		
		7c	* · · · · · · · · · · · · · · · · · · ·	
d e	If "Yes," indicate the number of Forms 8282 filed during the year	7e	1,~~	7.3
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	_	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	(a)	
10	Section 501(c)(7) organizations. Enter		ej, Cr	
а	Initiation fees and capital contributions included on Part VIII, line 12	ļ. "	115	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]		¥ 23	
11	Section 501(c)(12) organizations. Enter  Gross income from members or shareholders	3. Ft	\$	a ser e
a b	Gross income from members or shareholders			
D	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	22.22	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	- 24		300t-?
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	5 NATION 200 - 38 W.	- nakeshi:
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	177		
b	Enter the amount of reserves the organization is required to maintain by the states in which	7.5	NE Pú	jaerse ?
	the organization is licensed to issue qualified health plans	ja ja		14 2 4
С	Enter the amount of reserves on hand	16		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 98	·			Page <b>o</b>
Part				
•	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Se		truct	ions.
Socti	Check if Schedule O contains a response or note to any line in this Part VI	<del>· · ·</del>	•	<u>.                                    </u>
Secu	on A. Governing Body and Management		Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year .	S Selections	en S	100
Id	If there are material differences in voting rights among members of the governing body, or			W.E.
	if the governing body delegated broad authority to an executive committee or similar	1,000		
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 0	.,		
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	****	Î√ Î
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		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		<b>✓</b>
6	Did the organization have members or stockholders?	6		<b>/</b>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		<b>-</b>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			1
•	stockholders, or persons other than the governing body?	7b	3.	
8	the year by the following:	30. AUS.		
_	, ,	8a	3 Ž	12026
a	The governing body?	8b	<u> </u>	<u> </u>
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	OD		<del> </del>
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revent		ode.	)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
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?	10b		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		✓_
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	* * 741 →	1: 30	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		<b>  √</b> _
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<del> </del> -
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		
14	Did the organization have a written winstieblower policy?	14		1
15	Did the process for determining compensation of the following persons include a review and approval by		100	Street
••	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	@= xxxx	✓
b	Other officers or key employees of the organization	15b		1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	#3.5	73525 2003	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		W.	(
	with a taxable entity during the year?	16a	660 D.J. N. 1994.	<b>√</b>
þ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	4CL	1	
Coati	on C. Disclosure	16b		Щ
<u>Secur</u>	List the states with which a copy of this Form 990 is required to be filed ► None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501(	c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.	• `	, , -	
	✓ Own website ☐ Another's website ✓ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest of the control of the con	erest :	oolic	y, and
	financial statements available to the public during the tax year.	- 1		: =
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the		
	organization. ► Dudley Brown 501 Main St. Windsor, CO 80550 877-405-4570			

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 no	r any relate	d orga	anız	atic	n c	ompe	nsa	ted any currer	t officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per	box,	unles er and	Pos neck	rson	e than o is both or/trust	an tee)	(D)  Reportable compensation	(E)  Reportable compensation from related	
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Dudley Brown, Exec. Director	20	<b>✓</b>		✓				48,000	0	0
(2) Barry Walter, Chairman	5			<b>√</b>				0	0	0
(3) Joel Garzoli, Board Member	1			1				0		0
(4)				_						
(5)										
(6)										
(7)									-	
(8)										
(9)		_								
(10)										
(11)										
(12)										
(13)										
(14)										

	Part	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees			lighe	st C	ompensated E	mployees	(continue	ed)
Name and tine  Name and tine to compensation from the organization of the organization		•				•	•						
Competence   Com			1	(do n	ot ch			e than o	one		1		
Compensation   Comp		Name and title											
Complete this align of the organization of t			week (list any		,	_	_	_	<del></del>	from	related	d	other
Complete this align of the organization of t			1	divid	stit	ffice	ey e	ngle gle	l a				
(15) (16) (17) (19) (20) (21) (22) (23) (24) (25)  1 b Sub-total .				dual	ition	=	를	st co	4				organization
(15) (16) (17) (19) (20) (21) (22) (23) (24) (25)  1 b Sub-total .				rus	al tr		) Vec	duc	ļ				
(15)			,	stee e	uste		"	ensa					
(15) (17) (18) (20) (21) (22) (23) (24) (25)  1b Sub-total					e			ited					
(17) (19) (20) (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)  48,000  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 ▶ o  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 are 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  1 Complete this table for your five highest compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  1 Complete this table for your five highest compensation from any unrelated organization or midvidual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or midvidual for such person  Compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Description of services  Compensation  Compensation of independent contractors (including but not limited to those listed above) who	(15)												
(17) (19) (20) (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)  48,000  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 ▶ o  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 are 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  1 Complete this table for your five highest compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  1 Complete this table for your five highest compensation from any unrelated organization or midvidual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or midvidual for such person  Compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Description of services  Compensation  Compensation of independent contractors (including but not limited to those listed above) who									i				
(19) (20) (21) (22) (23) (24) (25)  1b Sub-total .	(16)		ļ								-"		
(19) (20) (21) (22) (23) (24) (25)  1b Sub-total .							_						
(29) (21) (22) (23) (24) (25)  1b Sub-total .	<u>(17)</u>		ļ										
(29) (21) (22) (23) (24) (25)  1b Sub-total .	140		-				ļ.,				_		
[20]  [21]  [22]  [23]  [24]  [25]  1b Sub-total	(18)												
[20]  [21]  [22]  [23]  [24]  [25]  1b Sub-total	(40)			-	$\vdash$	_	<u> </u>						
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(21)  (22)  (23)  (24)  (25)  1b Sub-total	(20)												
(22)  (23)  (24)  (25)  1b Sub-total	(20)								}				
(22)  (23)  (24)  (25)  1b Sub-total	(21)						-					-+	
[23]  1b Sub-total	<u> </u>		<del> </del>										
[23]  1b Sub-total	(22)			_				-					<del>_</del>
24	35.57		<b></b>										
24	(23)											_	
1b Sub-total	3												
1b Sub-total	(24)							-		-			
1b Sub-total													
Total from continuation sheets to Part VII, Section A  d 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 ▶ 0  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  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 individual.  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.  Section B. Independent Contractors  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's tax year.  (A)  Name and business address  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who	(25)												
Total from continuation sheets to Part VII, Section A  d 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 ▶ 0  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  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 individual.  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.  Section B. Independent Contractors  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's tax year.  (A)  Name and business address  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who													
Total (add lines 1b and 1c).  1 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 0  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  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's tax year.  (A)  Name and business address  Compensation  (B)  C)  Compensation  Compensation  Compensation  Compensation  Compensation  Compensation	1b	-							▶	48,000			
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 0  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 isted 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	С		VII, Section	n A		•			▶				
Total number of independent contractors (including but not limited to those listed above) who  Yes No							· ·	•					
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 issed 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 individua	2	Total number of individuals (including but	not limited	to th	ose	lıst	ed a	above	e) wl	ho received mo	ore than \$1	00,000	of
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  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		reportable compensation from the organi	zation ► 0						_			<u> </u>	
employee on line 1a? If "Yes," complete Schedule J for such individual  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	2	Did the examination list any former of	ficar divad		. <b>.</b>			(0)( 0		lavaa au byab			
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	J								mp	loyee, or nigh	est compe	insated	Acceptante and Acceptance of the Acceptance of t
organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such Individual										ad athar aamn	aaastiss fu		3 7
Individual	7												
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					00,0		. "			complete den	caule b le	Jacii	4
for services rendered to the organization? If "Yes," complete Schedule J for such person	5	Did any person listed on line 1a receive o	r accrue co	mper	ısatı	ıon	fron	n anv	unr	related organiz	ation or inc	tividual	- V
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's tax year.  (A)  (B)  (C)  Compensation  Description of services  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who													5 /
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's tax year.  (A)  (B)  (C)  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who	Section	n B. Independent Contractors								<u>.</u>			<u> </u>
year.  (A) Name and business address  Description of services  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who		·	compensate	ed ind	epe	ende	ent o	contra	acto	ors that receive	d more tha	ın \$100,	000 of
(A) Name and business address  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who													
Name and business address  Description of services  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who		year											
2 Total number of independent contractors (including but not limited to those listed above) who											_		
		Name and business addi	ress							Description of se	ervices	C	ompensation
		·				_							
		Total	/			<del>.</del> .							7,179,271
	2								the	ose listed abo	ve) who		

Form 990 (2013) R M 60 84-1368137 Page												
Par	Part VIII Statement of Revenue  Check if Schedule O contains a response or note to any line in this Part VIII											
To Seek P.	20 10 2 2 2000		) contains a res	ponse or note t				<u>.</u>				
2002	i parte		2 - enter 1 1 - 1771 1 - 1787   1 - 1787	AP A	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514				
nts	1a	Federated campaigns	s   1a									
ts, Grants Amounts	b	Membership dues .										
ts, An	С	Fundraising events .					estiller de	e a				
Gifts, ıılar Ar	d	Related organizations					it is seen to	e energy affiliation —				
Sir	e f	Government grants (cor All other contributions, g			1		PM 144					
utic	'	and similar amounts not inc	- ·	916,308	1.4	diene.	TA					
Contributions, Gif and Other Similar	g	Noncash contributions include		310,300								
Sol and	h	Total. Add lines 1a-1		<b>.</b>	916,308	-	Entitie					
- an				Business Code		3.72	85.7.483					
ever	2a											
ě	b											
ervic	C d											
Program Service Revenue	e				-	†-						
gra	f	All other program ser	vice revenue .									
<u> </u>	g	Total. Add lines 2a-2		▶			nu periodos	<b>M</b> FAR <b>A</b> FARA				
	3	Investment income		ends, interest,								
		and other similar amo	•	<b>-</b>								
	4 5	Income from investmen Royalties	it of tax-exempt be	ona proceeas -								
		rioyanics	(ı) Real	(II) Personal	To produce	Survives.						
	6a	Gross rents										
	b	Less rental expenses					F44000	an Carry				
i	С	Rental income or (loss)						A COLUMN TO THE PARTY OF THE PA				
	d	Net rental income or (	<del></del>		₹ .% & H2		( Table 1 ( Tabl					
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		17.000	grandari					
	ь	Less: cost or other basis			Park in	19 22 - 1940 (1947						
		and sales expenses .			South		A1					
	С	Gain or (loss)										
40		Net gain or (loss) .		▶		<b>建一维二类</b>	\$6. <b>5.</b> 82 (5.8)					
Other Revenue	8a	Gross income from fu	ındraısıng		14.	A CONTRACTOR	45.5					
eve		events (not including \$										
Ä		of contributions reported See Part IV, line 18 .	ed on line (c).			37 3 <del>49</del> 443	en i de	Tables				
the	b	Less direct expenses		-	Series and the series of the s	The state of the s	April 1975					
0	c	Net income or (loss) fi		events . ►			Addition Addition a property of	3 (Ann. 1)				
	9a	Gross income from ga						en j				
		See Part IV, line 19 .	-									
	b	Less: direct expenses		vities ▶				TOWN CREAT AND IN				
	с 10а	Net income or (loss) for Gross sales of in		villes	***********		2.76	in inferioritimes and the				
	104	returns and allowance				Alleria December 1987		And the second s				
	b	Less: cost of goods s	old <b>b</b>	:	ar Landinger		4.4					
	С	Net income or (loss) f	rom sales of inve	entory 🕨		300000000000000000000000000000000000000	33333.650	and the second s				
		Miscellaneous R	levenue	Business Code	iji pirata i	17. XX						
	11a											
	b											
	c d	All other revenue .										
	e	Total. Add lines 11a-		▶		The State of the s		ja varanta ja				
	12	Total revenue. See in	nstructions		916,308		4944					

### 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 Do not include amounts reported on lines 6b, 7b, (B) Program service (A) Total expenses (C) Management and (**D**) Fundraising 8b, 9b, and 10b of Part VIII. general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 66,500 2 Grants and other assistance to individuals in the United States, See Part IV, line 22 . . . Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16... Benefits paid to or for members . Compensation of current officers, directors, trustees, and key employees . . . . . 54,000 14,400 25,200 14,400 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 10 Payroll taxes. . . 5,181 1,581 2,019 1,581 11 Fees for services (non-employees). Management . . . . 53,808 31,095 12,572 10,141 Legal . . . . . 30.588 30.588 Accounting . . . . . . 1,691 1,691 42,200 42,200 Professional fundraising services. See Part IV, line 17 Investment management fees . . . . . Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . 12 Advertising and promotion . . . 291.009 230,630 60.379 13 Office expenses . . . 9,388 9,388 14 Information technology . . . . . 15 Rovalties . . . . . . . Occupancy . . . . . . 16 Travel . . . . . . 17 11,736 9,542 2,194 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 20 21 Payments to affiliates . . . . . . . 22 Depreciation, depletion, and amortization . 23 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Mail Communications 106.253 132.816 Telephone Communications 30,940 30,940 Training 28,580 28,580 Internet Communications 22,223 22,223 All other expenses 34,111 23,304 5,757 5,050 25 **Total functional expenses.** Add lines 1 through 24e 814,771 637,836 58,821 118,114 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) | If following SOP 98-2 (ASC

## Part X Balance Sheet

	•	Check if Schedule O contains a response or note to any line in this Pa	art X		<u>.</u> . 🛘
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	36,412	_1	113,387
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,		3	
		trustees, key employees, and highest compensated employees.	2.45		All Programs
		Complete Part II of Schedule L	200000	5	(MCHAIL
S	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
Set	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or	*	3 ·	
		other basis. Complete Part VI of Schedule D	AND THE PROPERTY OF		politica some company
	ь	Less. accumulated depreciation 10b		10c	24.000
	11	Investments—publicly traded securities		11	24,650
	12	Investments—publicly traded securities		12	
Ī	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)	36,412		138,037
_	17	Accounts payable and accrued expenses	30,412	17	3,510
	18	Grants payable		18	3,310
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
s	22	Loans and other payables to current and former officers, directors,	933		14.2
Liabilities		trustees, key employees, highest compensated employees, and		to sa	
<u> </u>		disqualified persons. Complete Part II of Schedule L		22	Filming and Marketine 2 and a sill filming an extensible from the
쁜	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	-
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	,		
- 1		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	3,510
		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			Constant Constant
Ses		complete lines 27 through 29, and lines 33 and 34.			
ā	27	Unrestricted net assets		27	
Bal	28	Temporarily restricted net assets		28	
ᅙ		Permanently restricted net assets		29	
2		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and	4	Services	Estator e en como en c
Net Assets or Fund Balances		complete lines 30 through 34.		7441 FF	SAPA EN
ţ	30	Capital stock or trust principal, or current funds		30	
SSe		Paid-in or capital surplus, or land, building, or equipment fund		31	
ا <u>ک</u>		Retained earnings, endowment, accumulated income, or other funds .		32	134,527
<u>ت</u>	33	Total net assets or fund balances	36,412		134,527
<b>~</b>		Total liabilities and net assets/fund balances	36,412	34	138,037

Pari	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		916,308
2	Total expenses (must equal Part IX, column (A), line 25)	2		814,771
3	Revenue less expenses. Subtract line 2 from line 1	3		101,537
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		36,412
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		(3,422)
9	Other changes in net assets or fund balances (explain in Schedule O)	9		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10		134,527
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			_
1	Accounting method used to prepare the Form 990:  Cash  Accrual  Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain i	n Salas	Yes No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were comreviewed on a separate basis, consolidated basis, or both:			<b>√</b>
b	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	 ed on	. <b>2b</b>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
С	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o of the audit, review, or compilation of its financial statements and selection of an independent account	intant?	2c	-
	If the organization changed either its oversight process or selection process during the tax year, exchedule O.			i de la companya di
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	forth II	n <b>3a</b>	1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	_	e <b>3b</b>	
				n <b>990</b> (2013)

## **SCHEDULE D** (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Rocky	Mountain Gun Owners, Inc.		84-1368137
Pari		or Advised Funds or Other Similar Fu	
	Complete if the organization answ	vered "Yes" to Form 990, Part IV, line 6	
		(a) Donor advised funds	(b) Funds and other accounts
	Total number at end of year		
	Aggregate contributions to (during year) .		
	Aggregate grants from (during year)		
	Aggregate value at end of year Did the organization inform all donors and	depart advisors in writing that the appets	hold in donor advised
	funds are the organization's property, subje	•	
	Did the organization inform all grantees, do	_	
	only for charitable purposes and not for the		
	conferring impermissible private benefit?		
Part			
	Complete if the organization answ	vered "Yes" to Form 990, Part IV, line 7	·
1	Purpose(s) of conservation easements held	by the organization (check all that apply).	
	Preservation of land for public use (e.g.,	recreation or education)   Preservation	of an historically important land area
	<ul> <li>Protection of natural habitat</li> </ul>	☐ Preservation	of a certified historic structure
	Preservation of open space		
	Complete lines 2a through 2d if the organiza	ation held a qualified conservation contribut	
	easement on the last day of the tax year.		Held at the End of the Tax Year
	Total acreage restricted by conservation eas		
	Number of conservation easements on a ce		
	Number of conservation easements includ historic structure listed in the National Regis		
	Number of conservation easements modified		
	tax year ►	a, transferred, reloaded, extinguished, or te	minated by the organization during the
	Number of states where property subject to	conservation easement is located ▶	
	Does the organization have a written pol		nspection, handling of
	violations, and enforcement of the conserva	tion easements it holds?	· · · · · · · · · · · · · · · · · · ·
6	Staff and volunteer hours devoted to monito	oring, inspecting, and enforcing conservatio	n easements during the year
	<b>&gt;</b>		
	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation eas	sements during the year
	<b>&gt;</b> \$		
	Does each conservation easement reported		····· — —
	(i) and section 170(h)(4)(B)(ii)?		· · · · · · · L Yes L No
	In Part XIII, describe how the organization re	•	•
	balance sheet, and include, if applicable, the organization's accounting for conservation $\epsilon$	<del>_</del>	mancial statements that describes the
Part		ections of Art, Historical Treasures, o	or Other Similar Assets
ı ai t		vered "Yes" to Form 990, Part IV, line 8	
	If the organization elected, as permitted und		
	works of art, historical treasures, or other		
	public service, provide, in Part XIII, the text of	of the footnote to its financial statements th	at describes these items.
	If the organization elected, as permitted ui		
	works of art, historical treasures, or other	similar assets held for public exhibition, e	education, or research in furtherance of
	public service, provide the following amount		
	(i) Revenues included in Form 990, Part VIII (ii) Assets included in Form 990, Part X	, line 1	<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works	of art, historical treasures, or other similar	ar assets for financial gain, provide the
	following amounts required to be reported u	· · · · · · · · · · · · · · · · · · ·	
а	Revenues included in Form 990, Part VIII, lin	ne 1	• \$
b	Assets included in Form 990, Part X		🟲 💲

Part IV Escrow and Custodial Arrangements.  Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on 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  d Additions during the year  e Distributions during the year  f Ending balance  2 Did the organization include an amount on Form 990, Part X, line 21?  b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.  Part V Endowment Funds.  Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  1a Beginning of year balance  b Contributions  Contributions  Contributions  Gerants or scholarships  d Grants or scholarships  e Other expenditures for facilities and programs  f Administrative expenses  g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment   Permanent endowment   %  The percentages in 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(iii) Telated organizations  3a(iii) Telated organizations  3a(iii) Part XIII the intended uses of the organization's endowment funds  Part VI Land, Buildings, and Equipment.	se in Pari
b   Scholarly research   e   Other   c   Preservation for future generations   4 Provide a description of the organization's collections and explain how they further the organization's exempt purpr XIII. 5 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?	se in Pari
c	se in Pari
c	se in Pari
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?	s No
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?    Part IV	Form
Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on 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?	
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	
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 . 1c	s 🗌 No
included on Form 990, Part X?  b If "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance	s 🗌 No
b if "Yes," explain the arrangement in Part XIII and complete the following table:  Amount  C Beginning balance  d Additions during the year  Ending balance  Distributions during the year  f Ending balance  Distributions during the year  Distribution has been provided in Part XIII  Distribution has been	s   No
C Beginning balance	
c Beginning balance	
d Additions during the year e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21?  2 Did the organization include an amount on Form 990, Part X, line 21?  2 Did the organization include an amount on Form 990, Part X, line 21?  3 Did the organization include an amount on Form 990, Part IV, line 21?  4 Deat V Endowment Funds.  Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  5 Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  6 Deat IV Endowment Funds.  6 Contributions 6 Net investment earnings, gains, and losses 7 Cother expenditures for facilities and programs 8 Death of year balance 9 End of year balance 9 End of year balance 9 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment    6 Permanent endowment    7 Administrative expenses 8 Deard designated or quasi-endowment    8 Permanent endowment    7 A The percentages in 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 9 Sa(ii) 1 In "Yes" to 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.	
e Distributions during the year  f Ending balance  2a Did the organization include an amount on Form 990, Part X, line 21?  2b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.  Part V Endowment Funds.  Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  (a) Current year (b) Pnor year (e) Two years back (d) Three years back (e) Four Beginning of year balance  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  Permanent endowment ► %  Permanent endowment ► %  The percentages in 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 If "Yes" to 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.	
f Ending balance	
Did the organization include an amount on Form 990, Part X, line 21?	
Beginning of year balance   Contributions	s $\square$ No
Part V Endowment Funds.  Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four 1a Beginning of year balance	
Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    (a) Current year   (b) Pnor year   (c) Two years back   (d) Three years back   (e) Four the strength of the current year   (b) Pnor year   (c) Two years back   (d) Three years back   (e) Four the strength of the current year end balance   (e) Two years back   (e) Four the strength of the strength of the current year end balance   (e) Two years back   (e) Four the strength of the strength of the strength of the years back   (e) Four the years back   (e) Two years back   (e	
to Contributions	
b Contributions	ears back
b Contributions	
d Grants or scholarships	
e Other expenditures for facilities and programs	
e Other expenditures for facilities and programs	
f Administrative expenses	
g End of year balance	
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment ▶ %  Permanent endowment ▶ %  Temporarily restricted endowment ▶ %  The percentages in lines 2a, 2b, and 2c should equal 100%.  Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	
a Board designated or quasi-endowment ► %  b Permanent endowment ► %  c Temporarily restricted endowment ► %  The percentages in 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 Permanent endowment ▶ %  c Temporarily restricted endowment ▶ %  The percentages in 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 Permanent endowment ▶ %  c Temporarily restricted endowment ▶ %  The percentages in 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	
The percentages in 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	
Are there endowment funds not in the possession of the organization that are held and administered for the organization by  (i) unrelated organizations	
organization by  (i) unrelated organizations	
(i) unrelated organizations	
(ii) related organizations	res No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	
Describe in Part XIII the intended uses of the organization's endowment funds     Part VI Land, Buildings, and Equipment.	
Part VI Land, Buildings, and Equipment.	
	L
	l
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, I  Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Boo	
Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Boo (investment)	
1a Land	ne 10.
b Buildings	
c Leasehold improvements	
d Equipment	
e Other	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶	

Schedule D (For	m 990) 2013	BM 6	0-84-1368137 Page 3
Part VII			
	Complete if the organization answered "Yes" to Form	m 990, Part IV, line	e 11b. See Form 990, Part X, line 12.
,	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial	derivatives		
(2) Closely-h	eld equity interests		
(3) Other			
(A)		•	
(B)			
(C)			
(D)			
(E)			
(F)		-	
(G)			
(H)		-	
Total. (Column (b	o) must equal Form 990, Part X, col (B) line 12.) ▶		
Part VIII	Investments – Program Related.		
	Complete if the organization answered "Yes" to Form	m 990, Part IV, line	e 11c. See Form 990, Part X, line 13.
_	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
			Cost of end-of-year market value
(1)			
(2)		<del></del>	
(3)	· · · · · · · · · · · · · · · · · · ·		
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
<u>`</u>	n) must equal Form 990, Part X, col. (B) line 13.) ▶		是 接近
Part IX	Other Assets.		
	Complete if the organization answered "Yes" to Form	m 990, Part IV, line	
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			

### Other Liabilities. Part X

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) .

\_(7) (8)

> Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶	•	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

. ▶

Part				Retu	rn.
,	Complete if the organization answered "Yes" to Form 990, F				
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:			4 <b>(3</b> €	
а	Net unrealized gains on investments	2a		and the	
b	Donated services and use of facilities	2b		14/19/12	
С	Recoveries of prior year grants	2c		442	
d	Other (Describe in Part XIII.)	2d		23.2 25.19.1	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			775	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		2:4	
b	Other (Describe in Part XIII.)	-	· -		
C	Add lines <b>4a</b> and <b>4b</b>			4c	
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line			5	
Part					turn
rart	Complete if the organization answered "Yes" to Form 990, F				idi ii.
	Total expenses and losses per audited financial statements	artiv	, mic 12a.	1	<del></del>
1	Amounts included on line 1 but not on Form 990, Part IX, line 25:			-	
2		ا مما		l	
a	Donated services and use of facilities	2a		4	
b	Prior year adjustments	2b		4	
C .	Other losses	2c			
d	Other (Describe in Part XIII.)	2d		**1	
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			24	
а	Investment expenses not included on Form 990, Part VIII, line 7b			ke li f	
b	Other (Describe in Part XIII.)				
_C	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, III			4c 5	
5 Part	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, lin Supplemental Information.	e 18.)		5	VI. 4. D. 4. V. F.
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, lin Supplemental Information.	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4, Pa	art IV, lines 1b and 2b	5 ; Part	

# SCHEDULEI (Form 990)

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

OMB No 1545-0047

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

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?

General Information on Grants and Assistance

Rocky Mountain Gun Owners, Inc.

Part |

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990.

Open to Publio Inspection

Employer identification number

84-1368137

**%** □

√Yes

. . . . . . . . . .

Desc	zation's procedu	res for monitoring	the use of grant fu	nds in the United	States.		1
Part II Grants and Other Assistance to Governments Part IV, line 21, for any recipient that received m	<b>sistance to Go</b> / recipient that	vernments and received more the	Organizations   Ian \$5,000. Part	I <b>n the United S</b> i II can be duplic	s and Organizations in the United States. Complete if the organization fore than \$5,000. Part II can be duplicated if additional space is needed.	tne organization answ bace is needed.	<b>Grants and Other Assistance to Governments and Organizations in the United States.</b> Complete if the organization answered "Yes" to 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.
1 (a) Name and address of organization or government	( <b>b</b> ) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) RMGO - Ind. Expend. Committee 501 Main St. Windsor, CO 80550			19,000				Fund Operations
(2) RMGO PAC 501 Main St. Windsor, CO 80550			47,500				Fund Operations
(3)							
(4)							
(5)							
(9)							
(7)	I						
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	501(c)(3) and go	vernment organizati	tions listed in the l	ine 1 table			0
Citte total lidiliber of other of	gal lization is lister	חווו ווופ ווופ ו ומחוב					7
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ee the Instruction	IS for Form 990.		3	Cat No 50055P		Schedule I (Form 990) (201

Schedule I (Form 990) (2013)

AM60 84-136 8137

Schedule (Form 990) (2013)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

Page 2

(f) Description of non-cash assistance								onal information.	and the mission of the organization.			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(e) Method of valuation (book, FMV, appraisal, other)								(b), and any other addition	tions of the state of Colorado			
(d) Amount of non-cash assistance								ie 2, Part III, columr	according to the regula			
(c) Amount of cash grant								equired in Part I, lin	funds are being used a			
(b) Number of recipients								the information r	sis to verify that the			
(a) Type of grant or assistance	1	2	3	4	5	9	7	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	RMGO management reviews expenses on a periodic basis to verify that the funds are being used according to the regulations of the state of Colorado and the mission of the organization.			

# RM 60

## **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.

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Rocky Mountain Gun Owners, Inc	84-1368137
Form 990 - Organization's Mission or Most Significant Activities	
	••
As an advocacy group, the Rocky Mountain Gun Owner's (RMGO) purpose is to educate Colorado gun	owners and gun rights' supporters
on firearms issues at the local, state and federal levels.	
From 990 Part VI, line 11b - Organization's Process to Review Form 990	
No review was or will be conducted.	
Form 990 Part VI, line 19 - Governing Documents Disclosure Explanation	
No documents available to the public.	
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