Form **990-EZ**

Short Form

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4047(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form
980 All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the
end of the year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements

2006

OMB No. 1545-1150

Open to Public Inspection

A For the 2008 calendary year, or tax year beginning 2006, and enableg 58 Additional Company 200612 060030000 29 1 A A street A street 11119 S ELK CREEK RD S 200612 060030000 International Picture 11119 S ELK CREEK RD S 200612 060030000 International Picture 11119 S ELK CREEK RD S 200612 060030000 International Picture 11119 S ELK CREEK RD S 200612 060030000 International Picture 11119 S ELK CREEK RD S 200612 060000 Amendment 11119 S ELK CREEK RD S 200612 060000 Amendment 11119 S ELK CREEK RD S 200612 060000 Amendment 11119 S ELK CREEK RD S 200612 060000 Amendment 11119 S ELK CREEK RD S 200612 060000 Additional Picture 11119 060000 A	Department of the Treasury Internal Pevenue Service The organization may have to use a copy of this return to satisfy state reporting requirements								Inspection	
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Website: ► ELKFALLSPOA. O BAS Organization type (check only one) — \$501(6) (6) + (Insert no.)				a completed defectue A (Form 200 of 200 LL).					enenization	
C Check № The organization is not a section 500(s)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return not required, but if the organization chooses to the a return, be sure to the a complete return. Add lines 0, 50, and 7b, to the 3 to determine goes receipts, 18 400,000 or more, the Form 900 instead of Form 1900-EZ. ▶ 3 1 Contributions, gifts, grants, and similar amounts received. 1 2 Program service revenue including government fees and contracts 2 3 Membership class and assessments 4 Investment income 5 Gross amount from sale of assets other than inventory (see 5 less line 55) (attach schedule), 6 Special events and activities expenses 9 5 Less, cost or other basis and activities (attach schedule). If any amount is from gaming, check here ▶ 6 6 Special events and activities (attach schedule). If any amount is from gaming, check here ▶ 6 5 C Resident of the complete strums and allowances 1 Pa 1	1 W	/ebeit	e: >	LKFAUSPOA.ORG						
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	-					Cat			Form 990-EZ (2008	

Page	2

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	Statement of Program Service Accom	plishments (See page 51	of the instruction	ns.)	/P	Experience for		(a)(2)	
What is the organization's primary exempt purpose? MAINTAIN/IMPROVE OFEN SPACE						Required for 501(c)(3) and (4) organizations			
Des des	cribe what was achieved in carrying out the organization of the services provided, the number of persons ber	nefited, or other relevant info	rmation for each p	rogram title.	and option	4947(a onal for)(1) tr Other:	usts; s.)	
28	MAINTENANCE AND IMPROVEMEN	UTS TO BOADS AN.	d open sal	<u> </u>			_		
	FOR COMMUNITY AT - LANGE		******						
·	(Grants \$) If this amount inclu	ides foreign grants, check	here	. ▶ 🗀	28a				
29	MEETINGS FOR COMMUNITY-AT-LARGE								
	(Grants \$) If this amount inclu	ides foreign grants, check	here	. 🕨 🗆	29a				
30									
		udes foreign grants, check	here	. ▶ □	30a				
31	Other program services (attach schedule)								
		ides foreign grants, check	here	. ▶ □	31a				
	Total program service expenses (add lines 28a th		<u> </u>	<u> </u>	32				
Pa	List of Officers, Directors, Trustees, and Key								
	(A) Name and address	(B) Title and average hours per week	(C) Compensation (if not paid,	(D) Contribution (D) Co	pians &	acc	Expension and	nd	
	VICKI STARED, PRESIDENT	devoted to position	enter -0)	deferred compe	nsation	other	allowa	nces	
	34298 BERG LN PINE, CO 80470	3	-0-	-0-	-		0 -		
	THOMAS SCHUSTER, VICE PRESIDENT 11852 ELK CREEK ROAD PINE, CO	1	-0-	-0-		_	0 -		
	SUSAN PATTERSON, SECRETARY								
	34151 JENSEN BOAD PINF, CO	2	-0-	-0-		-	0 -		
	DAVID PETERSEN, TREASUREE					_			
	34018 BERG LANE PINE, CO 80470	3	-0-	-0-			_		
P3	ort V Other Information (Note the statemen					1	Yes	No	
33	Did the organization engage in any activity not pro- description of each activity	eviously reported to the IR:	S? If "Yes," attacl	h a detailed		33		1	
34	Were any changes made to the organizing or government attach a conformed copy of the changes	erning documents but not	reported to the IF	RS? If "Yes,"		34	1		
35	35 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not								
	reported on Form 990-T, attach a statement explaining y	• •				-	-	┼╌┚	
8	Did the organization have unrelated business gross		e or 6033(e) notice	e, reporting,	and	359	ļ		
	proxy tax requirements?					35b		_	
36 36	Was there a liquidation, dissolution, termination, o		· · · · · · · · · · · · · · · · · · ·	· · · ·	 .h.a	333			
-	statement.)					36		1	
	Enter amount of political expenditures, direct or ind		structions. \triangleright 137	1 -0-		074			
	Did the organization file Form 1120-POL for this y		-			37Ь		1	
38 a	Did the organization borrow from, or make any loa					38a		1	
any such loans made in a prior year and still unpaid at the start of the period covered by this return? b If "Yes," attach the schedule specified in the line 38 instructions and enter the amount									
IJ	involved		the amount 38	ь			1		
39	501(c)(7) organizations. Enter:					٦			
a	Initiation fees and capital contributions included or	n line 9	39	•				[·	
b	Gross receipts, included on line 9, for public use	of club facilities	39	b		1			

Form 990-EZ	(2006)					P	age 3	
Part V	Other Information (Note the statement requirement in	General Instru	ction V.) (Co	ontinued)				
40a 501(c	(3) organizations. Enter amount of tax imposed on the organization 4911 ▶; section 4912 ▶	tion during the : : section 49	year under: 55 ▶					
	(3) and (4) organizations. Did the organization engage in any section			ion dunna the		Yes	No	
year o	or did it become aware of an excess benefit transaction from a prior	r year? If "Yes,"	attach an ex	planation	40b	ļ		
the ye	amount of tax imposed on organization managers or disqualific par under sections 4912, 4955, and 4958		. >		-		74.	
d Enter	amount of tax on line 40c reimbursed by the organization		. ▶		-		i	
	ganizations. At any time during the tax year, was the organization?	on a party to a p	prohibited ta	x shelter	40e			
41 List th	ne states with which a copy of this return is filed.							
42a The t	ooks are in care of ► DAYID PETERSETH red at ► 34018 BEEG LIN PINE		Telephor	ne no. ▶ (. 50	7 816	, - 40	73	
Locat	ed at > 34018 BZRG CN PINY, C	.O	. ZIP	+4 ▶ 80	410-	9 10	<u> </u>	
accor if "Ye See t	s," enter the name of the foreign country: ▶he instructions for exceptions and filing requirements for Form	TD F 90-22.1.			42b	Yes		
	y time during the calendar year, did the organization maintain a	n office outside	or the U.S.		780		L	
43 Section	s," enter the name of the foreign country: ► on 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in inter the amount of tax-exempt interest received or accrued du	ing the tax year	r	. 🕨 43			▶ □	
Please	Under penalties of perjury, I declare that I have examined this return, including and belief, it is true, correct, and complete. Declaration of preparer (other the	accompanying sch in officer) is based	edules and stat on all information	ements, and to the on of which preparagrams, APEIC 27,	rer has an	ry know	viedge viedge.	
Sign Here	Signature or offices Date DAVID PETERSEN, TREASURED							
	Type or print name and title			· · · · · · · · · · · · · · · · · · ·				
Paid Preparer's	Preparer's signature	Date	Check if self- employed ▶	Preparer's SSN	or PTIN (S	See Gen	inst. X)	
Use Only	Firm's name (or yours of self-employed),		EIN	> :				
Cae Olhy	address, and ZIP + 4		Phon	e no. ▶ ()				
					Form 99	0-EZ	(2006)	