

Short Form

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-1150

2008

Open to Public Inspection

Form 990-EZ

Department of the Treasury Internal Revenue Service

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 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.

A For the 2008 calendar year, or tax year beginning and ending

B Check if applicable: C Name of organization: COALITION FOR THE UPPER SOUTH PLATTE D Employer identification number: 84-1469785 E Telephone number: 719-748-0033 F Group Exemption Number

G Accounting method: X Accrual Other (specify) H Check if the organization is not required to attach Schedule B

I Website: WWW.UPPERSOUTHPLATTE.NET

J Organization type (check only one) X 501(c) (3) (insert no.) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ. \$ 226,801.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Table with 3 main sections: Revenue (lines 1-9), Expenses (lines 10-17), and Net Assets (lines 18-21). Includes sub-rows for detailed revenue and expense categories.

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.

Table with 3 columns: Line number, Description, (A) Beginning of year, and (B) End of year. Rows 22-27 show assets and liabilities.

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch. N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. 37a <u>0.</u>		
b	Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b <u>N/A</u>		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 39a <u>N/A</u>		
b	Gross receipts, included on line 9, for public use of club facilities 39b <u>N/A</u>		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 <u>0.</u> ; section 4912 <u>0.</u> ; section 4955 <u>0.</u>		
b	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I		X
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.		
d	Enter amount of tax on line 40c reimbursed by the organization 0.		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41	List the states with which a copy of this return is filed. CO		
42a	The books are in care of <u>THE ORGANIZATION</u> Telephone no. <u>719-748-0033</u> Located at <u>P.O. BOX 726, LAKE GEORGE, CO</u> ZIP + 4 <u>80827</u>		
b	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)? If "Yes," enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Yes	No
			X
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? _____ If "Yes," enter the name of the foreign country: _____		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year 43 <u>N/A</u>		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization **COALITION FOR THE UPPER SOUTH PLATTE** Employer identification number **84-1469785**

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only **one** organization.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete the Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii) A family member of a person described in (i) above?	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	
- h Provide the following information about the organizations the organization supports.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	479,851.	627,343.	547,849.	228,346.	206,732.	2090121.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...	206,910.					206,910.
4 Total. Add lines 1 - 3	686,761.	627,343.	547,849.	228,346.	206,732.	2297031.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4.						2297031.

Section B. Total Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	686,761.	627,343.	547,849.	228,346.	206,732.	2297031.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...					49.	49.
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		2,742.	1,067.		2,611.	6,420.
11 Total support. Add lines 7 through 10						2303500.
12 Gross receipts from related activities, etc. (see instructions)					12	61,494.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	99.72 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	99.85 %
16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
6 Total. Add lines 1 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

FORM 990-EZ	OTHER EXPENSES	STATEMENT	1
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DESCRIPTION	AMOUNT
EQUIPMENT MAINTENANCE AND REPAIR	4,074.
MATCHING FUNDS	12,000.
COST SHARE	5,076.
INSURANCE	9,236.
MORTGAGE INTEREST	7,101.
MISCELLANEOUS EXPENSES	585.
OFFICE SUPPLIES	15,207.
PAYROLL TAXES	9,397.
DUES AND SUBSCRIPTIONS	567.
SMALL EQUIPMENT	1,435.
TELECOMMUNICATIONS	4,940.
TRAVEL AND MEETINGS	757.
DEPRECIATION	14,192.
ADVERTISING	80.
TOTAL TO FORM 990-EZ, LINE 16	84,647.

FORM 990-EZ	OTHER ASSETS	STATEMENT	2
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
ACCOUNTS RECEIVABLE	31,989.	27,750.
PREPAID EXPENSES	2,480.	2,480.
OTHER DEPRECIABLE ASSETS	12,257.	5,733.
TOTAL TO FORM 990-EZ, LINE 24	46,726.	35,963.

FORM 990-EZ	OTHER LIABILITIES	STATEMENT	3
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
ACCOUNTS PAYABLE	732.	381.
ACCRUED PAYROLL LIABILITIES	10,658.	6,716.
DEFERRED REVENUE	0.	11,687.
NOTE PAYABLE	111,185.	107,569.
TOTAL TO FORM 990-EZ, LINE 26	122,575.	126,353.

FORM 990-EZ

INFORMATION REGARDING TRANSFERS
ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

STATEMENT 4

A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS,
DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL
BENEFIT CONTRACT? [] YES [X] NO

B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS,
DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [] YES [X] NO

FORM 990-EZ PART IV - LIST OF OFFICERS, DIRECTORS,
TRUSTEES AND KEY EMPLOYEES STATEMENT 5

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE	
			BEN PLAN CONTRIB	EXPENSE ACCOUNT
KAREN BERRY, 1313 SHERMAN ST., RM. 175, DENVER, CO 80203	CHAIR 5.00	0.	0.	0.
TOM EISENMAN BOX 219, FAIRPLAY, CO 80440	VICE-CHAIR 5.00	0.	0.	0.
GREG APLET, 1660 WYNKOOP ST., STE. 850, DENVER, CO 80202	TREASURER 5.00	0.	0.	0.
DAN DRUCKER 177 RANGE VIEW DR., BAILEY, CO 80421	SECRETARY 5.00	0.	0.	0.
DENNY GIBSON 100 3RD. ST., CASTLE ROCK, CO 80104	DIRECTOR 5.00	0.	0.	0.
MARIE CHISHOLM P.O. BOX 235, FAIRPLAY, CO 80440	DIRECTOR 5.00	0.	0.	0.
PAUL CLARKSON, P.O. BOX 1886, WOODLAND PARK, CO 80866	DIRECTOR - ALTERNATE 5.00	0.	0.	0.
KURT DAHL, P.O. BOX 1886, WOODLAND PARK, CO 80866	DIRECTOR - ALTERNATE 5.00	0.	0.	0.
SWITHIN DICK, 62 W. PLAZA DR., HIGHLANDS RANCH, CO 80126	DIRECTOR 5.00	0.	0.	0.
DAVE WISSEL P.O. BOX 636, FAIRPLAY, CO 80440	DIRECTOR 5.00	0.	0.	0.
DON KENNEDY, 1600 W. 12TH AVE., DENVER, CO 80204-3412	DIRECTOR 5.00	0.	0.	0.
SARA MAYBEN P.O. BOX 219, FAIRPLAY, CO 80440	DIRECTOR 5.00	0.	0.	0.
DAVID NICKUM, 1966 13TH ST., STE. LL60, BOULDER, CO 80302	DIRECTOR 5.00	0.	0.	0.
JEFF STEMAS, 3405 JON ST., COLORADO SPRINGS, CO 80907	DIRECTOR 5.00	0.	0.	0.

COALITION FOR THE UPPER SOUTH PLATTE

84-1469785

MARY DAWSON, 15151 E. ALAMEDA PKWY, AURORA, CO 80011	DIRECTOR 5.00	0.	0.	0.
DAVE BROWN 161 CR 2, DIVIDE, CO 80814	DIRECTOR 5.00	0.	0.	0.
CONNOR BAKER, P.O. BOX 50602, COLORADO SPRINGS, CO 80949	DIRECTOR 5.00	0.	0.	0.
JEFF SPOHN BOX 726, LAKE GEORGE, CO 80827	DIRECTOR 5.00	0.	0.	0.
JEFF ZEPP P.O. BOX 186, EVERGREEN, CO 80439	DIRECTOR 5.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990-EZ, PART IV		<u>0.</u>	<u>0.</u>	<u>0.</u>

FOREST HEALTH & RESTORATION: THE COALITION ACTIVELY WORKS ON FOREST HEALTH ISSUES BY FACILITATING A SLASH DROP OFF SITE, WORKING WITH NEIGHBORHOODS & LAND OWNERS ON DEFENSIBLE SPACE AND PROVIDING SLASH/MULCH SERVICES, EDUCATING THE PUBLIC & GOVERNMENTAL AGENCIES ON COMMUNITY WILDFIRE PROTECTION, AND FACILITATING ON THE GROUND WORK WITH VOLUNTEERS DOING PLANTINGS, CONTOUR STRUCTURES, NOXIOUS WEED MANAGEMENT, AND EROSION CONTROL. \$57,200 IN DONATED SERVICES WERE PROVIDED IN 2008 TO SUPPORT THESE PROGRAMS. TRAILS & CARBON ARE INCLUDED IN FOREST HEALTH.

FUELS MITIGATION: THE COALITION PROVIDES ASSESSMENT AND MITIGATION SERVICES TO PROPERTY OWNERS WITHIN THE WATERSHED AS WELL AS FACILITATING THE SLASH DROP OFF SITE IN TELLER COUNTY. OVER \$24,900 IN DONATED SERVICES WERE PROVIDED IN SUPPORT OF THIS PROGRAM IN 2008.

ENVIRONMENTAL EDUCATION: THE COALITION HAS MULTIPLE PROGRAMS WHICH EDUCATE STUDENTS, AS WELL AS TEACHERS, ON ENVIRONMENTAL ISSUES SUCH AS STREAM MONITORING, FOREST HEALTH AND MONITORING, NOXIOUS WEED IDENTIFICATION AND TREATMENT, INSECT EFFECTS ON PLANT LIFE, ETC. OVER \$280 IN DONATED SERVICES SUPPORTED THESE PROGRAMS IN 2008.

THE MISSION OF THE COALITION IS TO PROVIDE ON-SITE MANAGEMENT OF A LONG-TERM, LARGE-SCALE EROSION STABILIZATION AND ECOLOGICAL RESTORATION PROGRAM WHICH IS BEING CARRIED OUT PRIMARILY BY VOLUNTEERS. THE MISSION ALSO INCLUDES EXPANDING THE PUBLIC'S AWARENESS OF ISSUES SURROUNDING THE WATER QUALITY AND ECOLOGICAL HEALTH OF THE WATERSHED.

FORM 990-EZ

OTHER PROGRAM SERVICES

STATEMENT 10

DESCRIPTION

GRANTS

EXPENSES

RIVER RESTORATION: THE COALITION RESTORES AND REHABILITATES SECTIONS OF RIVER/STREAM IN THE WATERSHED TO REDUCE HEAVY EROSION, SEDIMENT POCKETS AND IMPROVE FISH HABITAT. OVER \$5,400 IN DONATED SERVICES WERE PROVIDED IN 2008 TO SUPPORT THESE EFFORTS.

0. 3,355.

TOTAL TO FORM 990-EZ, LINE 31

3,355.