			1	Poturn	of Organiz	ation Exemp	nt Erc	om Income '	Тах				3 No. 1545	-0047
Form	, Ç	990	Unde		Ū	a)(1) of the Interna				lung			2010	C
					benefit	trust or private fou	undatior	ר)				On	en to Pul	blic
		the Treasury nue Service	▶ т	he organizatio	n mav have to use	a copy of this retu	urn to sa	tisfv state reportin	a reaui	rements.			Inspection	
-				year beginnin				, 2010, and er			06-3		20 11	
_		applicable:		, <u>,</u>	ango Film Institut	e			0			-	er identificatio	on no.
A A	dress	change	Doing Busi	ness As Dur	ango Independen	t Film Festival					2	20-3395	808	
Na Na	ame cha	ange	Number an	d street (or P.O.	box if mail is not del	ivered to street addre	ess)		Room	/suite	E	Teleph	one numbe	ər
In	itial ret	urn	PO Box	1587										
те	erminate	ed	City or town	n, state or count	ry, and ZIP + 4								217,231	
Ar	nended	return	Durango	o, CO 81301-1	587						G	Gross	receipts \$	
L Ap	oplicatio	on pending	F Name and	d address of prin	cipal officer: Julie C	ooley			H(a) Is this 2 o		urn for	_	-
				s C above						a) Is this a g affiliates?	loup let		Yes	X No
I Ta	ax-exen	npt status: 🛛 🛛	501(c)(3)	501(c) () 🖣 (insert no.)	4947(a)(1) or	52	27	H(t	 Are all aff If "No " at 	iliates ir tach a li	ncluded? st (see i	Yes	
	ebsite:		v.durangofilm	n.org					H(c		-		nstructions	
		organization: 🛛		Trust Ass	ociation 🗌 Other	•	L	Year of formation:	2007	M State	e of lega	l domicile	: CO	
Part		Summary												
	1			zation's missio	n or most significa	nt activities:	To edu	ication and enter	tain wi	th diverse f	ilms			<u> </u>
A		and worksho	pps.											
сG to														
i v		<u></u>												
v e i r	2			0		perations or dispos	sed of m	iore than 25% of it	is net a	ssets.				
t n i a	3		-	-	ing body (Part VI,						3			9
e n	4			-		ody (Part VI, line 1	1b)		••		4			9
s c e	5				calendar year 2010				•		5			1
&	6			s (estimate if ne							6			
					art VIII, column (C	,.					7a			0
	b	Net unrelated	business tax	kable income fr	om Form 990-T, li	ne 34					7b			0
R										Prior Year		С	urrent Year	
е	8		•	Part VIII, line 1										31,306
v e	9	-		(Part VIII, line 2									3	3,769
n u	10				, lines 3, 4, and 7d									182
e	11	Other revenue	e (Part VIII, c	olumn (A), line	s 5, 6d, 8c, 9c, 10	c, and 11e)		····						(2,360)
	12			•		I, column (A), line 1	12)						21	2,897
	13				, column (A), lines									0
Е	14	•			column (A), line 4)									0
x p	15	-	•			column (A), lines 5-	-10)						3	88,604
e			-		lumn (A), line 11e)			_						0
n s	b		0 1		mn (D), line 25)	-		0						
e s	17	•		().	es 11a-11d, 11f-24	,		• _						4,460
	18	•		(qual Part IX, colur	nn (A), line 25)		·····					21	3,064
	19	Revenue less	expenses.	Subtract line 18	B from line 12 .									(167)
Net Assets								-	Beginnir	ng of Current Ye		E	End of Year	
or	20	Total assets (-		21	,171		2	25,313
Fund Bal-	21	Total liabilities		,				-			720			1,657
ances	22			es. Subtract lin	e 21 from line 20					20	,451		2	3,656
Part		Signatur												
						companying schedule icer) is based on all i					ge			
		<u> </u>		· · · ·		,								
Cian		Julie C	,											
Sign			re of officer								Date			
Here			Cooley, Chair											
		Type or	print name and	a title	[
_			eparer's name		Preparer's signatur			Date		Check	if P	TIN		
Paid		Erin Swee	t Neer, CPA		Erin Sweet Neer,	CPA	1	10-28-2011		self-employ	/ed			
Prep		Firm's name	<u> </u>	SweetBooks					Firm's	s EIN 🕨				
Use	Only	Firm's addres	ss 🕨	27696 High					Phon	e no.	9	70-729	-1619	
				Dolores CO										
May th	ne IRS	discuss this re	eturn with the	preparer show	vn above? (see ins	structions)							Yes	X No

For Paperwork Reduction Act Notice, see the separate instructions.

EEA

Form	n 990 (2010) Durango Film Institute	20-339580	8 Page 2
Pa	rt III Statement of Program Service Accomplishments		_
	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission:		
	To education and entertain with diverse films and workshops.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	L Y	es X 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?	L Y	es 🗴 No
	If "Yes," describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and		
	allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$184,734 including grants of \$) (Revenue	\$	135,808)
	The 6th annual Festival was presented in 2011. Diverse programming and sessions with		
	filmmakers brought many sold out performances with over 5,200 attendees.		
4b	(Code:) (Expenses \$ 8,340 including grants of \$) (Revenue	\$	1,235)
	The School program brought global, thought provoking and educational films to the local area	·	,
	with over 830 students and 50 teachers involved in the program.		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
		÷	/
4.1			
4d	Other program services. (Describe in Schedule O.)	`	
<u> </u>	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 193,074		F 000 (00 (-)
	EEA		Form 990 (2010)

Form		20-3395808	F	Page 3
Pa	rt IV 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments,			
	or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; 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		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
-	quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
ŭ	Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more	- Thu		
~	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
Ũ	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
h	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110		
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
۵		11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
		11f		X
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
120	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	120		
D	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	. 12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
14a		144		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	146		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	14b		
15		. 15		X
16	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	. 15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	16		X
17	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	47		X
10	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	40		X
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			X
00-	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some			
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	1	1

Form 990 (2010)

Form	990 (2010) Durango Film Institute 20-3395808		F	Page 4
Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and 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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
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 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
200	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disgualified person in a	200		
b	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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	200		
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20		
21				
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	27		x
00	If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	00-		Х
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			x
	Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			x
~~	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	v	<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			V
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			V
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			V
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	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 Yes 🕅 No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			1
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			1
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form 990 (2010)

Form	1 990 (2010) Durango Film Institute 20-3395808		F	Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
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?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	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?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, and 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.			
a	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
a k	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
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		
u	Note. See the instructions for additional information the organization must report on Schedule O.	100		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
2	the organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form	990 (2010) Durango Film Institute 20-3395808		F	Page 6
Pa	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and			
	for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in			
	Schedule O. See instructions.			_
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
-	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	00	~	
3	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	3		
000			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	100	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	iou		
Ŭ	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	100		
Πa	form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	TTU		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	120	~	
b	rise to conflicts?	12b	Х	
<u> </u>	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	~	<u> </u>
U		12c	Х	
13		13	X	
	Does the organization have a written document retention and destruction policy?	14	X	<u> </u>
14	Did the process for determining compensation of the following persons include a review and approval by	14	<u> </u>	
15				
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-		Х
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	40-		X
	with a taxable entity during the year?	16a		
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	10		
	the organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed CO			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply.			
4.5	Own website Another's website Don request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
_	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization: Joanie Fraughton (970)375-7779			
	802 E 2nd Ave Durango, CO 81301			

Form 990 (20	10) Durango Film Institute	20-3395808	Page 7					
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated							
	Employees, and Independent Contractors		_					
	Check if Schedule O contains a response to any question in this Part VII							
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.

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

Name and Title Average vector Partice (text all text serve) vector Reportable compensation from reliable compensatementer from reliable	(A)	(B)	(C)		(D)	(E)	(F)				
Director 1.00 X 0 0 0 0 (2) Daniel Wiggins 1.00 X 1 <	Name and Title	hours per week (describe hours for related organizations in Schedule	Itd nri dur ise vtc iet deo u r	I t n r s u t s i t t e u e t i o n a	O f f c e	K e y e m p l o y e	H c e i o m g m p h p l e e o s n y t s e t e t	F o r m e	compensation from the organization	compensation from related organizations	amount of other compensation from the organization and related
(2) Daniel Wiggins 1.00 X 0 0 0 (3) Karen McCarthy 1.00 X 0 0 0 0 (4) Ron Martin 1.00 X 0 0 0 0 (5) Ben Martinez 1.00 X 0 0 0 0 (6) Bud Poe 2.00 X 0 0 0 0 Vice Chair 2.00 X 0 0 0 0 (7) Julie Cooley 2.00 X 0 0 0 0 Board Chair 5.00 X 0 0 0 0 (9) 2.00 X 0 0 0 0 (10) 1		1.00	v								
Director1.00XIIII(3) Karen McCarthy Director1.00XII000(4) Ron Martin Director1.00XII0000(5) Ben Martinez Treasurer1.00XII00000(6) Ben Martinez Treasurer2.00XII00000(6) Ben Martinez Treasurer2.00XII00000(6) Bud Poe Vice Chair2.00XIII00000(7) Julie Cooley Beard Chair5.00XII		1.00							0	0	0
(3) Karen McCarthy 1.00 X 0 0 0 0 (4) Ron Martin 0 0 0 0 0 0 0 Director 1.00 X 0 0 0 0 0 0 (4) Ron Martine 1.00 X 0		1.00	v								
Director 1.00 X 0 0 0 (4) Ron Martin 1.00 X 0 0 0 0 Director 1.00 X 0 0 0 0 0 (5) Ben Martinez Treasurer 2.00 X 0 0 0 0 Treasurer 2.00 X 0 0 0 0 0 (6) Bud Poe 2.00 X 0 0 0 0 0 (7) Julie Cooley 5.00 X 0 0 0 0 0 (8) Lisa Marie Jacobs Secretary 2.00 X 0 0 0 0 (10) Image: Im		1.00									
(4) Ron Martin 1.00 X 0 0 0 0 (5) Ben Martinez 7reasurer 2.00 X 0 0 0 0 (6) Bud Poe 2.00 X 0 0 0 0 0 0 (7) Julie Cooley 2.00 X 0 0 0 0 0 (8) Lisa Marie Jacobs 5.00 X 0 0 0 0 0 (8) Lisa Marie Jacobs 5.00 X 0 0 0 0 0 (9) 2.00 X 0 0 0 0 0 0 (10) 1 <td></td> <td>4.00</td> <td>v</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		4.00	v								
Director 1.00 X 0 0 0 0 (5) Ben Martinez Treasurer 2.00 X 0		1.00							0	0	0
(6) Ben Martinez 2.00 X 0 0 0 0 (6) Bud Poe 2.00 X 0 0 0 0 0 (7) Julie Cooley 2.00 X 0 0 0 0 0 (7) Julie Cooley 5.00 X 0 0 0 0 0 (8) Lisa Marie Jacobs 5.00 X 0 0 0 0 0 (8) Lisa Marie Jacobs 2.00 X 0 0 0 0 (9) 2.00 X 0 0 0 0 0 0 (10) 1		1.00	v								
Treasurer 2.00 X 0 0 0 (6) Bud Poe 2.00 X 0 0 0 Vice Chair 2.00 X 0 0 0 (7) Julie Cooley 5.00 X 0 0 0 Board Chair 5.00 X 0 0 0 (8) Lisa Marie Jacobs 2.00 X 0 0 0 Secretary 2.00 X 0 0 0 (9) 1 1 1 1 1 1 (10) 1 1 1 1 1 1 (11) 1 1 1 1 1 1 1 (12) 1		1.00							0	0	0
(6) Bud Poe 2.00 X 0 0 0 (7) Julie Cooley 5.00 X 0 0 0 Board Chair 5.00 X 0 0 0 (8) Lisa Marie Jacobs 2.00 X 0 0 0 (9) 2.00 X 0 0 0 0 (10) X 0 0 0 0 0 (11) X 0 0 0 0 0 (12) X 0 0 0 0 0 (14) X 0 0 0 0 0 (15) X 0 0 0 0 0		0.00			v					0	0
Vice Chair 2.00 X 0 <		2.00							0	0	0
(7) Julie Cooley Board Chair 5.00 X 0 0 0 (8) Lisa Marie Jacobs Secretary 2.00 X 0 0 0 0 (9) 2.00 X 0 0 0 0 0 (10) 1 1 1 1 1 1 1 1 (11) 1 1 1 1 1 1 1 1 (12) 1 1 1 1 1 1 1 1 (13) 1 1 1 1 1 1 1 1 1 (15) 1 <		2.00			x				0	0	0
Board Chair 5.00 X 0		2.00							0	0	0
(8) Lisa Marie Jacobs 2.00 X 0 0 0 0 (9) 1 <td< td=""><td></td><td>5.00</td><td></td><td></td><td>x</td><td></td><td></td><td></td><td>0</td><td>0</td><td>0</td></td<>		5.00			x				0	0	0
Secretary 2.00 X 0 <t< td=""><td></td><td>5.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td>0</td><td>0</td><td>0</td></t<>		5.00							0	0	0
(9) (10) (11)		2.00			x				0	0	0
$\begin{array}{c c c c c c c c c c c c c c c c c c c $		2.00				-			0	0	0
$\begin{array}{c c c c c c c c c c c c c c c c c c c $	(9)										
(12) (13) (14) (14) (15) (15) (16) (17)	(10)										
(13) (14) (15) (14) (14) (14) (14) (14) (14) (15)	(11)										
(14) (15) (15) (16) (17)	(12)										
(15)	(13)										
	(14)										
(16)	(15)										
	(16)										

	990 (2010) Durango Film Institute									20-3395808	3	Page 8
Pa	t VII	Section A. Officers, Directors, Trustees, K	ey Employee	s, and	l Hig	ghes	t Co	mpens	ateo	d Employees (conti	inued)	1	
		(A)	(B)				C)			(D)	(E)		(F)
		Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	Itd nri dur ise vtc iet deo	I t n r s u t s i t t e u e	f f i c e e	k all K e y e m p I o y e e	that app H c e i o m g m p h p l e e o s n y t s e t e d	F	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	am comp fro orga and	timated iount of other opensation oom the anization d related unizations
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
(26)													
(27)													
(28)													
c d	Total (add	continuation sheets to Part VII, Section A lines 1b and 1c)		· · · · · ·		· •			► ► ►	0	0		0
2		per of individuals (including but not limited to the compensation from the organization	nose listed abo	ove) w	ho r	eceiv	/ed r	nore th	an \$	5100,000 in	0		
4	employee For any in the organi individual Did any pe for service	ganization list any former officer, director or on line 1a? If "Yes," complete Schedule J for dividual listed on line 1a, is the sum of reportal zation and related organizations greater than s erson listed on line 1a receive or accrue compo- s rendered to the organization? If "Yes," comp	such individua ble compensa \$150,000? If "` ensation from	l tion ar Yes," c any ur	nd ot comp	her o plete	comp Sch	pensati edule c	on fr J for n or i	rom such		3 4 5	Yes No X X X X
		ndependent Contractors					:-			\$400.000 -f			
		this table for your five highest compensated ir tion from the organization.	dependent co	ntracto	ors ti	nat r	ecei	vea mo	retr	nan \$100,000 of			
		(A) Name and business addre	55							(B) Description of	services	(Compe	C) nsation
		per of independent contractors (including but r \$100,000 in compensation from the organiza		nose lis	sted	abo	ve) v	vho rec	eive	d			

Form 99	<u>`</u>	,					20-3395808	Page 9
Part \	/	Statement of Revenue			-			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
	1a	Federated campaigns	1a					
	b	Membership dues	1b					
Contri- butions,	с	Fundraising events	1c	11,922				
gifts,	d	Related organizations	1d					
grants and	e	Government grants (contributions)	1e	169,384]			
other	f	All other contributions, gifts, grants,						
similar		and similar amounts not included above	1f					
amounts	g	Noncash contributions included in lines 1a	1f: \$	100,065				
	h	Total. Add lines 1a-1f		•	181,306			
				Business Code				
	2a	Festival Income		713990	33,769	33,769		
Dreaman	b							
Program Service	с							
Revenue	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		•	33,769			
	3	Investment income (including dividends, inte		nd				
		other similar amounts)		•	182	182		
	4	Income from investment of tax-exempt bond	l procee	eds 🕨				
	5	Royalties						
		(i) Re	al	(ii) Personal	_			
	1	Gross Rents			_			
		Less: rental expenses			_			
		Rental income or (loss)			_			
	d	Net rental income or (loss)						
	7a	Gross amount from sales of (i) Secu	rities	(ii) Other	-			
	b	Less: cost or other basis						
0		and sales expenses			_			
t	1	Gain or (loss)						
h e	1	Net gain or (loss)	•					
r	8a	Gross income from fundraising						
R		events (not including \$ 11,92	22					
e		of contributions reported on line 1c).						
V		See Part IV, line 18	a		-			
e n	1	Less: direct expenses	b	3,079	(0.070)			(0.070)
u		Net income or (loss) from fundraising events	;	····· •	(3,079)			(3,079)
е	9a	Gross income from gaming activities.						
	l .	See Part IV, line 19	a		-			
		Less: direct expenses	b	L				
		Net income or (loss) from gaming activities		▶				
	10a	Gross sales of inventory, less		1,974				
	h	returns and allowances	a b	1,974	-			
	1	Less: cost of goods sold	· · · · · ·	719	710			
	C	Net income or (loss) from sales of inventory		Γ	719	719		
	11a	Miscellaneous Revenue		Business Code				
	b							
	c b							
		All other revenue						
		Total. Add lines 11a-11d		►				
	1	Total revenue. See instructions			212,897	34,670	0	(3,079)
								. /

Form 990 (2010)

Part IX	Statement of Functional Expenses				
	Section 501(c)(3) and 50		•		
	All other organizations must complete column (A	1			
Do not inc	ude amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b, 8b, 9b	and 10b of Part VIII.		expenses	general expenses	expenses
Grants	and other assistance to governments and				
organi	zations in the U.S. See Part IV, line 21				
2 Grants	and other assistance to individuals in				
the U.S	S. See Part IV, line 22				
Grants	and other assistance to governments,				
organi	zations, and individuals outside the				
U.S. S	See Part IV, lines 15 and 16				
Benefi	ts paid to or for members				
Comp	ensation of current officers, directors,				
trustee	es, and key employees				
Comp	ensation not included above, to disqualified				
persor	is (as defined under section $4958(f)(1)$) and				
persor	ns described in section 4958(c)(3)(B)				
Other	salaries and wages	35,850	35,850		
8 Pensio	on plan contributions (include section 401(k)				
and se	ction 403(b) employer contributions)				
Other	employee benefits				
0 Payrol	taxes	2,754	2,754		
1 Fees f	or services (non-employees):				
a Manag	jement				
b Legal					
c Accou	nting	5,616		5,616	
d Lobby	ng				
e Profes	sional fundraising services. See Part IV, line 17 .				
f Investi	ment management fees				
g Other		1,315	1,315		
2 Advert	ising and promotion	57,846	57,846		
3 Office	expenses	2,214		2,214	
4 Inform	ation technology	12,709	12,709		
5 Royalt	ies				
6 Occup	ancy	8,039		8,039	
7 Travel					
8 Payme	ents of travel or entertainment expenses				
for any	r federal, state, or local public officials				
9 Confei	ences, conventions, and meetings	20		20	
0 Interes	st				
1 Payme	ents to affiliates				
2 Depre	ciation, depletion, and amortization				
3 Insura	nce	2,238		2,238	
4 Other	expenses. Itemize expenses not covered				
above	(List miscellaneous expenses in line 24f. If				
line 24	f amount exceeds 10% of line 25, column				
(A) am	ount, list line 24f expenses on Schedule O.)				
a Filmm	aker Lodging	16,229	16,229		
b Partie	s and events	34,050	34,050		
c Venue	es	8,450	8,450		
d Other	School Program Costs	4,514	4,514		
e Other	Festival expenses	14,130	14,130		
f All oth	er expenses	7,090	5,227	1,863	
	unctional expenses. Add lines 1 through 24f	213,064	193,074	19,990	
6 Joint (Costs. Check here 🕨 🗌 if following				
	8-2 (ASC 958-720). Complete this line				
	the organization reported in column				
	nt costs from a combined educational hign and fundraising solicitation				

Form	990 (20	10) Durango Film Institute	2	0-3395808	Page 11
Part	: X	Balance Sheet			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	21,171	1	22,243
	2	Savings and temporary cash investments		2	2,670
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	400
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
٨		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
A s		employers and sponsoring organizations of section 501(c)(9) voluntary			
S		employees' beneficiary organizations (see instructions)		6	
e t	7	Notes and loans receivable, net		7	
s	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	21,171	16	25,313
	17	Accounts payable and accrued expenses	720	17	1,657
	18	Grants payable		18	
L	19	Deferred revenue		19	
i	20	Tax-exempt bond liabilities		20	
a b	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
i	22	Payables to current and former officers, directors, trustees, key			
l		employees, highest compensated employees, and disqualified			
t		persons. Complete Part II of Schedule L		22	
i	23	Secured mortgages and notes payable to unrelated third parties		23	
e s	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	720	26	1,657
		Organizations that follow SFAS 117, check here			
NF		complete lines 27 through 29, and lines 33 and 34.			
e u t n	27	Unrestricted net assets	20,451	27	23,656
d	28	Temporarily restricted net assets		28	
A s B	29	Permanently restricted net assets		29	
s a		Organizations that do not follow SFAS 117, check here			
e l		and complete lines 30 through 34.			
ta sn	30	Capital stock or trust principal, or current funds		30	
С	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
o e r s	32	Retained earnings, endowment, accumulated income, or other funds		32	
-	33	Total net assets or fund balances	20,451	33	23,656
	34	Total liabilities and net assets/fund balances	21,171	34	25,313

Form 990 (2010)

Form 990 (2010) Durango Film Institute	20-3395808		Pa	age 12
Part XI Reconciliation of Net Assets				
Check if Schedule O contains a response to any question in this Part XI				X
1 Total revenue (must equal Part VIII, column (A), line 12)	1		212,89	97
2 Total expenses (must equal Part IX, column (A), line 25)	2		213,06	64
3 Revenue less expenses. Subtract line 2 from line 1	3		(1	167)
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		20,45	51
5 Other changes in net assets or fund balances (explain in Schedule O)	5		3,3	72
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
column (B))	6		23,65	56
Part XII Financial Statements and Reporting				
Check if Schedule O contains a response to any question in this Part XII				
			Yes	No
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," explain in				
Schedule O.				
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
b Were the organization's financial statements audited by an independent accountant?		2b		Х
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		X
If the organization changed either its oversight process or selection process during the tax year, explain in				
Schedule O.				
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
issued on a separate basis, consolidated basis, or both:				
Separate basis Consolidated basis Both consolidated and separate basis				
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
the Single Audit Act and OMB Circular A-133?		3a		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
required audit or audite, evelopin why in Schedule O and departies any stone taken to undergo such audite		3b		
EEA		Form	990 (2010)

SCH	HED	ULE A	P	ublic Charity Sta	tus and	1 Public	Supp	ort		F	OMB No. 1545-0047
(Form 990 or 990-EZ)				e if the organization is a section 501(c)(3) organization or a section						2010	
•		t of the Treasury	N 4	4947(a)(1) noi						_	Open to Public
		venue Service	Atta	ch to Form 990 or Form 9	990-EZ.	See	separate	instructions			Inspection
		organization								dentification nu	mber
		Film Institute		Nation (All 1						95808	
Pa			or Public Charity S				· /	ee instructi	ons.		
	orgar			e it is: (For lines 1 through		-					
1	Ц			ssociation of churches d		section 1	70(b)(1)(A	.)(i).			
2											
3	Ц	A hospital or a co	operative hospital ser	vice organization descril	ped in sect	ion 170(b)	(1)(A)(iii).				
4		A medical resear	ch organization opera	ted in conjunction with a	hospital d	escribed ir	n section 1	70(b)(1)(A	.)(iii). Ente	r the hospi	tal's name,
	_	city, and state:									
5		An organization o	perated for the benefit of	of a college or university o	wned or op	erated by a	a governme	ental unit de	escribed in		
	_	section 170(b)(1)	(A)(iv). (Complete Par	t II.)							
6		A federal, state, o	or local government or	governmental unit desc	ribed in se	ction 170(b)(1)(A)(v)				
7		An organization th	at normally receives a	substantial part of its supp	ort from a	governmen	tal unit or f	rom the ge	neral publi	С	
		described in sect	ion 170(b)(1)(A)(vi). (0	Complete Part II.)							
8		A community true	st described in section	170(b)(1)(A)(vi). (Comp	lete Part II	.)					
9	Х	An organization th	at normally receives: (1) more than 33 1/3% of its	s support fr	om contrib	utions, mer	nbership fe	es, and gr	OSS	
		-		pt functions - subject to ce					-		
		•		nd unrelated business taxa			.,				
				30, 1975. See section 5				,			
10	Π		-	d exclusively to test for p				a)(4)			
11	П	-	-	exclusively for the benefit					it the		
		•	•	orted organizations desc				•		section	
				-						3601011	
				s the type of supporting	1 -				-		II Othor
		a Type I	b 🗌 Type			Functionall			d	Пірреі	II-Other
е				anization is not controlled	-						
		•	•	and other than one or mo	re publicly	supported	organizatio	ons describ	ed in sectio	n	
,		509(a)(1) or section			· · · · · ·				_		
f		-		rmination from the IRS the				II supportin	ig		
		organization, cheo									
g		-	-	tion accepted any gift or c	ontribution	from any o	t the				
		following persons									[]
				ontrols, either alone or tog		persons de	scribed in	(ii)			Yes No
				of the supported organizat	ion?						11g(i)
		(ii) A family mer	nber of a person descri	bed in (i) above?				•			11g(ii)
		(iii) A 35% contr	olled entity of a person	described in (i) or (ii) abov	re?						11g(iii)
h		Provide the follow	ing information about th	e supported organization	(s).		1		1		
	(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization		organization		ou notify		Is the	(vii) Amount of
		organization		(described on lines 1-9 above or IRC section	in col. (i) lis governing	•	-	nization in of your	Ŭ	tion in col. zed in the	support
				(see instructions))	<u> </u>			port?		.S.?	
					Yes	No	Yes	No	Yes	No	
(A)											
(B)											
()											
(C)											
(-)											
(D)											<u> </u>
(2)											
(E)											
(-)											

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

Total

EEA

Schedule A (Form 990 or 990-EZ) 2010

		go Film Institute				20-3395808	Page 2
Pa	rt II Support Schedule for Orga	nizations Desc	ribed in Sectio	ons 170(b)(1)(A	(iv) and 170	b)(1)(A)(vi)	
	(Complete only if you checked the t	oox on line 5, 7, or 8	3 of Part I or if the o	rganization failed to	qualify under		
	Part III. If the organization fails to qu	alify under the test	s listed below, pleas	se complete Part III	.)		
Sec	tion A. Public Support		-				
Caler	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
4	Total. Add lines 1 through 3						
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 In 4						
Sec	tion B. Total Support		1	1	-		
Caler	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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.)						
11	Total support. Add lines 7 through 10 .						
12	Gross receipts from related activities, etc. (see	e instructions)				12	
13	First five years. If the Form 990 is for the or organization, check this box and stop here					c)(3)	
	tion C. Computation of Public Supp	U					
14	Public support percentage for 2010 (line 6, cc	()				14	%
15	Public support percentage from 2009 Schedu					15	%
16a	33 1/3% support test - 2010. If the organiza						
	and stop here. The organization qualifies a		•				
b	33 1/3% support test - 2009. If the organization						
17a	box and stop here. The organization qualifi 10%-facts-and-circumstances test - 2010. I more, and if the organization meets the "fa	f the organization	did not check a bo	ox on line 13, 16a,	or 16b, and line 1	4 is 10% or	
b	organization meets the "facts-and-circumstan 10%-facts-and-circumstances test - 2009. I more, and if the organization meets the "fa	ces" test. The organitation	nization qualifies as did not check a bo	a publicly supporte ox on line 13, 16a,	ed organization 16b, or 17a, and l	ine 15 is 10% or	
18	organization meets the "facts-and-circumstan Private foundation. If the organization did n	ces" test. The orga	nization qualifies as	a publicly supporte	ed organization		▶ [] ▶ []

Schedule A (Form 990 or 990-EZ) 2010

Sche	dule A (Form 990 or 990-EZ) 2010 Duran	go Film Institute				20-3395808	Page 3
Pa	rt III Support Schedule for Orga	nizations Descr	ibed in Section	509(a)(2)			
	(Complete only if you checked the b	ox on line 9 of Part I	or if the organizatio	on failed to qualify u	nder Part II.		
	If the organization fails to qualify und	der the tests listed be	elow, please comple	ete Part II.)			
Sec	tion A. Public Support			,			
	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
		(1)					()
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		91,201	87,987	60,522	181,306	421,016
2	Gross receipts from admissions, merchan-		01,201	01,001	00,022	101,000	421,010
_	dise sold or services performed, or faci- lities furnished in any activity that is related to the organization's tax-exempt purpose		34,341	40,757	32,318	33.769	141,185
3	Gross receipts from activities that are not an unrelated trade or bus. under sec 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 through 5		125,542	128,744	92,840	215,075	562,201
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 \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						562,201
Sec	ction B. Total Support						,
	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6		125,542	128,744	92,840	215,075	562,201
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		13	61	17	182	273
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с	Add lines 10a and 10b		13	61	17	182	273
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.)	0	125,555	128,805	92,857	215,257	562,474
14	First five years. If the Form 990 is for the orgorganization, check this box and stop here		cond, third, fourth,	or fifth tax year as	a section 501(c)(3)	►⊠
	ction C. Computation of Public Suppo	v					
15	Public support percentage for 2010 (line 8, colu	.,	e 13, column (f))			15	%
16	Public support percentage from 2009 Schedule					16	%
Sec	ction D. Computation of Investment I	ncome Percent	age				
17	Investment income percentage for 2010 (line		•	.,,		17	%
18	Investment income percentage from 2009 S	chedule A, Part III,	line 17			18	%
	33 1/3% support tests - 2010. If the organiza 17 is not more than 33 1/3%, check this box	and stop here. The	e organization qual	ifies as a publicly s	supported organiz	ation	
b	33 1/3% support tests - 2009. If the organization line 18 is not more than 33 1/3%, check this						. ▶□
20	Private Foundation: If the organization did n	•	•	• •			▶□

Schedule A (Form 990 or 990-EZ) 2010

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

• Complete if the organizations answered "Yes" on Form

2010 Open to Public

Department							
Internal Rev							
Name of the organization							
Durango Film Institute							
Part I Types of Prope							

990, Part IV, lines 29 or 30.▶ Attach to Form 990.

20-3395808

Pa	rt I Types of Property				
		(a)	(b)	(c)	(d)
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of determining
		applicable	items contributed	Form 990, Part VIII, line 1g	noncash contribution amounts
1	Art-Works of art				
2	Art-Historical treasures				
3	Art-Fractional interests				
4	Books and publications				
5	Clothing and household				
	goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities-Publicly traded				
10	Securities-Closely held stock				
11	Securities-Partnership, LLC,				
	or trust interests				
12	Securities-Miscellaneous				
13	Qualified conservation				
	contribution - Historic				
	structures				
14	Qualified conservation				
	contribution - Other				
15	Real estate-Residential				
16	Real estate-Commercial				
17	Real estate-Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ► (Food, beve)	Х	20,000		
26	Other (Advertisin)	Х	27,075		
27	Other (Lodging)	Х	12,229		
28	Other (Other fest)	Х	40,761		
29	Number of Forms 8283 received by	1	during the tax year for contributio	uns for	
	which the organization completed Fo	•	• •		29
	S	,			Yes No
30a	During the year, did the organization	receive by contri	bution any property reported in F	Part I, lines 1-28 that	
	it must hold for at least three years fr	-			
	used for exempt purposes for the en				30a X
b	If "Yes," describe the arrangement in	• ·			
31	Does the organization have a gift ac		nat requires the review of any no	n-standard	
					31 X
32a	Does the organization hire or use thi			ss. or sell noncash	
				,	32a X
b	If "Yes," describe in Part II.				
33	If the organization did not report an a	amount in column	(c) for a type of property for whit	ch column (a) is checked.	
	describe in Part II.				

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

SCHE	DUL	E	0
(Form §	990 or	990)-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2010

Open to Public

Inspection

20-3395808

Employer identification number

Internal Revenue Service Name of the organization Durango Film Institute

Department of the Treasury

01. Form 990 governing body review (Part VI, line 11)

The Board was provided with a copy of the 990 return prior to submitting to the IRS.

02. Conflict of interest policy compliance (Part VI, line 12c)

The Board is required to disclose any conflict which is monitored by the Chair.

03. Governing documents, etc, available to public (Part VI, line 19)

Governing documents are made available upon request from the public.

04. Explanation of other changes in net assets or fund balances (Part XI, line 5)

On prior year returns, there were two Certificates of Deposits that were mistakenly not

reported as assets. These have correctly been added to the balance sheet in the current

year return.

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

Form 8879-EO	for a	le Signature Autho In Exempt Organiz	ation		OMB No. 1545-1878
Department of the Treasury Internal Revenue Service	For calendar year 2010, or fiscal year be Do not s	eginning, send to the IRS. Keep for you See instructions.		<u>0-2011</u>	2010
Name of exempt organization				Employer identificati	
Durango Film Name and title of officer	<u>Institute</u>		Į	20-33958	08
Julie Cooley,			·····		
Type of	Return and Return Informa	tion (Whole Dollars Only)			
return. If you check the both this form was blank, then he	for which you are using this Form 88 x on line 1a, 2a, 3a, 4a , or 5a , belov eave line 1b, 2b, 3b, 4b , or 5b , which er -0- on the applicable line below. E	w, and the amount on that line chever is applicable, blank (do	for the return being o not enter -0-). But,	filed with	
1a Form 990 check here		(Form 990, Part VIII, column			
2a Form 990-EZ check he	ere 🕨 📙 b Total revenue, if	any (Form 990-EZ, line 9) .		2	
3a Form 1120-POL check 4a Form 990-PF check he	∢here ▶ ∐ b Total tax (Foi ere ▶ ☐ b Tax based on in:	rm 1120-POL, line 22) vestment income (Form 990			·
5a Form 8868 check here		8868, Part I, line 3c or Part II, I			
	ion and Signature Authoriz declare that I am an officer of the abo		· · · · · · · · · · · · · · · · · · ·		
correct, and complete. I furth electronic return. I consent to organization's return to the transmission, (b) the reaso the U.S. Treasury and its de institution account indicated and the financial institution to Agent at 1-888-353-4537 no involved in the processing of resolve issues related to the	accompanying schedules and statement ner declare that the amount in Part I al o allow my intermediate service provide IRS and to receive from the IRS (a) on for any delay in processing the re- isignated Financial Agent to initiate and in the tax preparation software for pay o debit the entry to this account. To re- to later than 2 business days prior to the f the electronic payment of taxes to re- payment. I have selected a personal icable, the organization's consent to e	bove is the amount shown on the der, transmitter, or electronic relevant an acknowledgement of recevant etum or refund, and (c) the dat electronic funds withdrawal (di yment of the organization's fede woke a payment, I must contact the payment (settlement) date. I a ceive confidential information n identification number (PIN) as r	ne copy of the organize rum originator (ERO) eipt or reason for rej te of any refund. If a rect debit) entry to the eral taxes owed on thi t the U.S. Treasury Fi also authorize the fina eccessary to answer in	zation's to send the ection of the pplicable, I author financial s retum, nancial incial institutions inquiries and	ize
Officer's PIN: check one	box only				
X lauthorize Swe	etBooks LLC ERO firm name	to enter my PIN	95808 Enter five numbers, but do not enter all zeros	_ as my signature	
is being filed with a	's tax year 2010 electronically filed ret state agency(ies) regulating charities O to enter my PIN on the return's disc	as part of the IRS Fed/State pro			
filed return. If I have	organization, I will enter my PIN as my indicated within this return that a cop the IRS Fed/State program, I will enter	y of the return is being filed with	a state agency(ies) r		
Officer's signature			Date 🕨	10-28-2	011
	ation and Authentication				
number (EFIN) followed by y I certify that the above nume indicated above. I confirm	ur six-digit electronic filing identifica your five-digit self-selected PIN. eric entry is my PIN, which is my signa that I am submitting this return in ac	ture on the 2010 electronically is cordance with the requirement	filed return for the org		
	rized IRS e-file Providers for Business				
ERO's signature 🕨Eri	n Sweet Neer, CPA		Date 🕨	10-28-2	011
		tain This Form - See Ir			
For Panaguark Partnetian	Do Not Submit This Fo	THE TO THE IKS UTIESS	Requested 10		Form 8879-FO (2010)