990 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)

2011

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	For th	he 20	011 calend	ar year, or t	tax year begin	ning	•	, 2011, and e	nding		06-	30 , 20	0 12
			plicable:			ango Film Institu	ıte	, ,			-	· ·	r identification no.
	Addres				•	ango Independent						20-3395	
	Name		•			box if mail is not delivered			Room	n/suite		E Telepho	
	Initial ı		•	PO Box	,		,						
	Termin				vn, state or countr	v. and ZIP + 4							209,990
$\overline{\Box}$	Ameno		eturn		go, CO 81301						ı,	Gross re	-
$\overline{}$			pending			cipal officer:Bo Sandin	Δ					3 0100010	ocipio ¢
	прин	ation	ponumy		as C above	olpai olliooli. Do Daliatii			H(a	a) Is this a c	group re	turn for	Yes X No
$\overline{}$	Tav-av	/emnt	t status: X	501(c)(3)) 	947(a)(1) or 5	27	H(I			included?	Yes No
	Websit) (ilisert ilo.)	947(a)(1) 01 🔲 3	121	H(6	If "No," a	ttach a	list. (see in:	structions)
				Corporation		ociation Other		Vaca of formation.	2007	<u> </u>			<u></u>
	rt I		Summar		ITUST ASS	ociation	L	Year of formation:	2007	IVI State	e or rega	al domicile:	
Го	1				ization's missis	or most significant sati	vitioo: To a	a					
	'		-	-	iizalion s missioi	n or most significant acti	villes. 10 ed	ducation and	enter	tain wit	n ai	verse i	IIMS
A		<u>a</u>	nd works	nops.									
c G t o		_											
i v v e		_											
į r	-				•	discontinued its operation	•	nore than 25% of i	its net a	assets.	1 -	1	
t n i a				Ü	ū	ing body (Part VI, line 1	,		• • •		3		9
e n				'	0	of the governing body (F	,	• • • • • • •			4		9
s c						calendar year 2011 (Par	t V, line 2a)				5		1
&	6				rs (estimate if ne	• ,					6		
	7					art VIII, column (C), line					7a		0
		b N	let unrelated	d business ta	xable income fr	om Form 990-T, line 34					7b		0
R										Prior Year		Cu	rrent Year
e	8	С	contributions	and grants	(Part VIII, line 1	n)							123,153
v e	9	Ρ	rogram ser	vice revenue	(Part VIII, line 2	(g)							86,793
n u	10) Ir	nvestment in	ncome (Part '	VIII, column (A)	lines 3, 4, and 7d)							44
e	11	С	ther revenu	ie (Part VIII, d	column (A), line	s 5, 6d, 8c, 9c, 10c, and	11e)						0
	12	? T	otal revenue	e - add lines	8 through 11 (m	iust equal Part VIII, colu	mn (A), line 12)						209,990
	13	G	Grants and s	imilar amour	nts paid (Part IX	, column (A), lines 1-3)							0
Е	14	l B	enefits paid	I to or for me	mbers (Part IX,	column (A), line 4)							0
X	15	S	alaries, othe	er compensa	ation, employee	benefits (Part IX, colum	n (A), lines 5-10)						32,902
p e	16	a P	rofessional	fundraising f	ees (Part IX, co	lumn (A), line 11e)							0
n s		b T	otal fundrais	sing expense	es (Part IX, colui	mn (D), line 25)		0					
e	17	, c	ther expens	ses (Part IX,	column (A), line	s 11a-11d, 11f-24e)							189,621
s	18	Т	otal expens	es. Add line	s 13-17 (must e	qual Part IX, column (A)	, line 25)						222,523
	19	R	evenue less	s expenses.	Subtract line 18	3 from line 12							(12,533)
Net									Beginni	ing of Current	Year	Er	nd of Year
Asset	is 20	Т.	otal assets	(Part X, line	16)					25	,313		10,204
Fund	21	Т	otal liabilitie	s (Part X, line	e 26)					1	,657		1,657
Bal- ances	22	2 N	let assets or	r fund baland	es. Subtract lin	e 21 from line 20 .				23	,656		8,547
Pa	rt II		Signatu	re Block									
						return, including accompa				f my knowled	lge and	belief, it is	
true,	correc	t, and	d complete. D	eclaration of p	reparer (other tha	n officer) is based on all in	formation of which pre	eparer has any knowl	edge.				
			Joani	ie Fraugh	ton								
Sig	n		Signatu	re of officer							Date)	
Hei	re		Joani	ie Fraugh	ton, Execut	ive Director							
) —	r print name ar	-								
				reparer's name		Preparer's signature		Date		Check	if F	PTIN	
Pai	d			eet Neer		Erin Sweet Neer (PA.	01-28-2013		self-emplo	'	P0121	8580
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May	the IE	56 Y	iscuse this r	eturn with the		n above? (see instruction	nns)						Yes X No
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Form	1990(2011) Durango Film Institute 20-339580	8 Page 2
Par	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	<u> </u>
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	п.,
	prior Form 990 or 990-EZ?	s ∐ 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	. D N.
	services?	s ∐ No
4	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 measured 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.	
	grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 197,297 including grants of \$) (Revenue \$	
74	The 7th annual Festival was presented in 2012. Diverse programming and sessions with	/
	filmmakers brought many sold out performances with over 5,200 attendees.	
	The state of the s	
4b	(Code:) (Expenses \$18,831 including grants of \$) (Revenue \$)
	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 \$)
	, (a.e.e) / (a.e.e.e	
4d	Other program services. (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 216,128	

EEA

Form 990 (2011) Durango Film Institute Checklist of Required Schedules 20-3395808 Page 3 Part IV

			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	Х	
2	complete Schedule A	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		Λ	
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	•		-21
•	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 for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; 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 temporarily restricted			
	endowments, permanent endowments, 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 Schedule D, Part VI	11a		X
t	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more			3.7
	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	44.		v
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
C	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	444		Х
,	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		21
'	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		Х
b				
_	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investmetnt, and program service activities outisde the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes,' complete Schedule F, Parts I and IV	14b		Χ
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			7,7
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return?	20b		

21	Did the arganization report more than \$5,000 of grants and other assistance to any government or organization		Yes	No
Z I	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States	- 21		Λ.
22	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			- 21
23	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	23		- 21
2 4a	\$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
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		21
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
C	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	24u		
2 50	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 disqualified person in a prior	ZJa		21
b	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	230		21
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,			21
21	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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			21
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	200		
	Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
Ŭ	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
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 Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
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		Х
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? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes Nο Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 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 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2h Χ Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) Χ 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 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 **4**a Χ 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. Χ Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Χ h Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes," to line 5a or 5b, did the organization file Form 8886-T? С Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a organization solicit any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions or Organizations that may receive deductible contributions under section 170(c). 7 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g g h 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? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 а b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Χ Did the organization receive any payments for indoor tanning services during the tax year? 14a

14b

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

20

Part 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 Section A. Governing Body and Management Yes Nο Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or If the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Χ any other officer, director, trustee, or key employee? 2 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? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 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? Χ Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Χ 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Χ Χ Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at 9 Χ the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes **10a** Did the organization have local chapters, branches, or affiliates? 10a Χ **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 Χ 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. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Χ 12a Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Χ c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe in Schedule O how this was done 12c Χ Χ 13 Did the organization have a written whistleblower policy? 13 Χ 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Χ The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 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 Χ with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CO 17 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 make these available. Check all that apply. X Upon request Own website Another's website 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 during the tax year.

PO Box 1587 Durango, CO 81301-1587

State the name, physical address, and telephone number of the person who possesses the books and records of the

organization: The Organization (970)375-7779

Form	990	(2011)	

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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.

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for	Position (do not check more than one box, unless person is both an officer and a director/trustee)					an	Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the
	related organizations in Schedule O)	I t d n r i d u r i s e v t c i e t d e o u r a o I r	l t n r s u t s i t	O f f i c e	K e y e m p l o y e e	H c e i o m g m p l h e e o s n y t s e e t e d	F	(W-2/1099-MISC)		organization and related organizations
(1) Barry Spear										
Director	1.00	X						0	0	0
(2) Julie Cooley		3,7							_	
Director	1.00	X						0	0	0
(3) Kristin Hopper	1 00	X								0
Director	1.00	Λ						0	0	0
(4) Bill Niblick Vice Chair	2.00			X				0	0	0
(5) Bo Sandine	2.00			Λ				0	0	0
Board Chair	5.00			X				0	0	0
(6) Judy Abercrombie	3.00							0	0	<u> </u>
Treasurer	2.00			X				0	0	0
(7) Lisa Schuba	2.00									
Secretary	2.00			X				0	0	0
(8) Joanie Fraughton										
Executive Director						Х		35,071	0	0
(9)								-		
(10)										
(11)										
(12)										
(13)										
(14)										

Part	90 (2011) Durango Film Institut VII Section A. Officers, Directors, Trustees,			and	Lic	haa	t Com	nor	soted Employees	20-339580			Page
rait			yees,	anu			COII	ipei				(F)	
	(A) Name and Title	(B) Average hours per week (describe	box,	unles	s pe	ition nore rson	than or is both trustee)	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	co	(F) Estimate Imount of other mpensa	of tion
		hours for related organizations in Schedule O)	v t c	I n s t i t u t i o n a l	O f f c e r	e y e	H c o m p l o y e e s t e d	F o r m e r	organization (W-2/1099-MISC)	(W-2/1099-MISC)	o: a	from the rganizat nd relat ganizati	ion ed
15)													
16)													
17)													
18)													
19)													
20)													
21)													
22)													
23)													
24)													
25)													
	ıb-total							>					
	otal from continuation sheets to Part VII, Section A	٠											
	otal (add lines 1b and 1c)							•	35,071	0			0
	otal number of individuals (including but not limited to the portable compensation from the organization	use listeu abt	ove) wi	10 16	CEIV	eu n	iore ur	an ţ	5100,000 111	0			
	ortusto componentiam into organization.									<u> </u>		Yes	No
Di	d the organization list any former officer, director or	trustee, key	emplo	yee	, or	nigh	est co	mpe	ensated				
en	nployee on line 1a? If "Yes," complete Schedule J for s	uch individua									3		Х
Fo	or any individual listed on line 1a, is the sum of reportab	le compensa	tion an	d oth	ner c	omp	ensati	on fr	om the				
	ganization and related organizations greater than \$150							suc	h				
	dividual							• •			4		X
	d any person listed on line 1a receive or accrue compe		-			-	nizatior	n or i	individual		_		X
	services rendered to the organization? If "Yes," compl on B. Independent Contractors	ete Schedule	J for s	ucn	pers	on		•			5		
Co	omplete this table for your five highest compensated incompensation from the organization. Report compensation									tax			
ye	ar.									Т			
	(A)								(B)			(C)	
	Name and business addres	S							Description of	services	Comp	ensatio	n

Total number of independent contractors (including but not limited to those listed above) who

received more than \$100,000 of compensation from the organization

Part \	/III	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 <u>1a</u>			revenue		512, 513, or 514
Contri-	b	Membership dues					
butions,	С	Fundraising events 1c	8,623				
Gifts, Grants	d	Related organizations 1d					
and	е	Government grants (contributions) 1e	114,530				
Other	f	All other contributions, gifts, grants,					
Similar Amounts		and similar amounts not included above 1f					
Amounto	g	Noncash contributions included in lines 1a-1f: \$	98,056				
	h	Total. Add lines 1a-1f		123,153			
			Business Code				
	2a	Festival Income	713990	86,793	86,793		
	b						
Program Service	С						
Revenue	d						
	е						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		86,793			
		Investment income (including dividends, interest,	•				
		and other similar amounts)	🕨	44	44		
		Income from investment of tax-exempt bond procee					
		Royalties					
		(i) Real	(ii) Personal				
	6a	Gross rents	(,				
		Less: rental expenses					
		Rental income or (loss)					
		Net rental income or (loss)	•				
		` ′	(ii) Other				
		Gross amount from sales of assets other than inventory	(ii) Other				
		Less: cost or other basis and sales expenses					
0 t	С	Gain or (loss)					
h l		Net gain or (loss)					
е		Gross income from fundraising					
r		events (not including \$ 8,623					
R		of contributions reported on line 1c).					
e v		See Part IV, line 18 a					
ė		Less: direct expenses b					
n		•					
u e		Gross income from gaming activities.					
		See Part IV, line 19 a					
		Less: direct expenses b					
		Gross sales of inventory, less returns and allowances					
		Less: cost of goods sold b					
		_					
		Miscellaneous Revenue	Business Code				
	11a		Duaniesa Coue				
	b						
	C						
		All other revenue					
		All other revenue	.				
		Total. Add lines 11a-11d		300,000	06 027	^	_

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a response to any question				
Do n	ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21 .				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	29,694	27,939	1,755	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	3,208	3,208		
11	Fees for services (non-employees):	0,200	2,222		
a	Management				
b	Legal	1,640		1,640	
c	Accounting	3,000		3,000	
d	Lobbying	3,000		3,000	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other				
g 12	F	C4 F34	64 534		
12	Advertising and promotion	64,534	64,534		
13	Office expenses	6,915	6,915		
14	Information technology				
15	Royalties		5 01 5		
16	Occupancy	6,915	6,915		
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
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.)				
а	Filmmaker Lodging	8,819	8,819		
b	Parties and events	33,194	33,194		
С	Venues & tech set up	22,724	22,724		
d	Other School Program Costs	18,831	18,831		
е	All other expenses	23,049	23,049		
25	Total functional expenses. Add lines 1 through 24e .	222,523	216,128	6,395	0
26	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				
	following SOP 98-2 (ASC 958-720)				

Form 990 (2011) **Part X** B Page 11 Durango Film Institute 20-3395808 Balance Sheet

Part	X	Balance Sheet			
	·		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	22,243	1	8,704
	2	Savings and temporary cash investments	2,670	2	•
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	400	4	1,500
	5	Receivables from current and former officers, directors, trustees, key	100		1,500
	•	employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
	·	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
Α		employers and sponsoring organizations of section 501(c)(9) voluntary			
S S		employees' beneficiary organizations (see instructions)		6	
e	7	Notes and loans receivable, net		7	
t	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		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)	25,313	16	10,204
	17	Accounts payable and accrued expenses	1,657	17	1,657
	18	Grants payable		18	
.	19	Deferred revenue		19	
i	20	Tax-exempt bond liabilities		20	
a	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
b	22	Payables to current and former officers, directors, trustees, key			
i		employees, highest compensated employees, and disqualified persons.			
i		Complete Part II of Schedule L		22	
i	23	Secured mortgages and notes payable to unrelated third parties		23	
е	24	Unsecured notes and loans payable to unrelated third parties		24	
s	25	Other liabilities (including federal income tax, payables to related third			
	23	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	la de la companya de	1,657	26	1,657
	26	Total liabilities. Add lines 17 through 25	1,657	20	1,657
l F					
u		lines 27 through 29, and lines 33 and 34.			
n	27	Unrestricted net assets	23,656	27	8,547
d	28	Temporarily restricted net assets		28	
В	29	Permanently restricted net assets		29	
а		Organizations that do not follow SFAS 117, check here			
l a		complete lines 30 through 34.			
n	30	Capital stock or trust principal, or current funds		30	
c e	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
e s	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	23,656	33	8,547
	34	Total liabilities and net assets/fund balances	25,313	34	10,204

Form	n 990 (2011) Durango Film Institute	20-3395808		Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>	<u></u>	<u> </u>	<u>. X</u>
4	Total revenue (must equal Part VIII, column (A), line 12)	. 1		200 (200
1				209,9	
2	Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1			222,5	
3	'	` 		(12,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Other changes in not assets at find balances (avalain in Schodula O)			23,6	
5	Other changes in net assets or fund balances (explain in Schedule O)	. 3		(2,	576)
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
Da	column (B))	. 6		8,5	547
Pa	rt 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:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a			2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		ĺ		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	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 guidt or guidte, explain why in Schedule O and describe any stone taken to undergo such guidte		3b		

EEA

Form **990** (2011)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No. 1545-0047

Employer identification number

2011

Open to Public Inspection

Dur	ango	Film Institute							20-33	395808			
Pa	rt I	Reason for	Public Charity	y Status (All organiza	tions must	complete th	nis part.) Se	e instructi	ons.				
The	orgar	nization is not a private	foundation because	e it is: (For lines 1 through	11, check	only one bo	x.)						
1		A church, conventio	n of churches, or a	ssociation of churches d	escribed in	section 1	70(b)(1)(A	A)(i).					
2		A school described i	n section 170(b)(1)(A)(ii). (Attach Schedu	le E.)								
3		A hospital or a coop	erative hospital se	rvice organization descril	bed in sec t	tion 170(b)(1)(A)(iii)						
4		A medical research	organization opera	ted in conjunction with a	hospital de	escribed in	section 1	170(b)(1)(A)(iii). Ente	er the hosp	oital's na	me,	
		city, and state:											
5		An organization opera	ated for the benefit of	of a college or university of	wned or op	erated by a	governme	ental unit de	escribed in				
		section 170(b)(1)(A)(iv). (Complete P	art II.)		•							
6				r governmental unit desc	ribed in se	ction 170	(b)(1)(A)(v	·).					
7			•	substantial part of its supp				•	neral public	:			
		described in section	170(b)(1)(A)(vi).	(Complete Part II.)	Ì			· ·	•				
8				n 170(b)(1)(A)(vi). (Com	plete Part	II.)							
9	X			1) more than 33 1/3% of its			utions, men	nbership fe	es, and gro	oss			
		=		npt functions - subject to ce					_				
				nd unrelated business taxa									
				e 30, 1975. See section									
10		An organization orga	anized and operate	ed exclusively to test for p	oublic safe	ty. See se	ction 509(a)(4).					
11		An organization organ	nized and operated	exclusively for the benefit	of, to perfo	rm the fund	tions of, or	to carry ou	ut the				
		purposes of one or r	nore publicly supp	orted organizations desc	ribed in se	ction 509(a	a)(1) or se	ction 509(a)(2). See	section			
		509(a)(3). Check the	box that describe	s the type of supporting	organizatio	n and com	plete lines	s 11e throi	ugh 11h.				
		a 🗌 Type I	b 🗌 Typ	e II	Type III-I	Functionally	y integrated	t	d	Type I	II-Other		
е		By checking this box,	I certify that the org	anization is not controlled	directly or i	ndirectly by	one or mo	ore disqual	ified				
		persons other than fo	undation managers	and other than one or mo	re publicly	supported o	organizatio	ns describ	ed in sectio	n			
		509(a)(1) or section 5	609(a)(2).										
f		If the organization red	ceived a written dete	ermination from the IRS that	at it is a Typ	oe I, Type II	l, or Type II	II supportin	ng				
		organization, check the	nis box										🗌
g		Since August 17, 200	6, has the organiza	tion accepted any gift or c	ontribution	from any of	the						
		following persons?											
		(i) A person who d	irectly or indirectly o	ontrols, either alone or tog	jether with j	persons de	scribed in ((ii)				Yes	No
		and (iii) below, t	he governing body	of the supported organizat	ion?						11g(i)		
		(ii) A family member	er of a person descr	ibed in (i) above?							11g(ii)		
		(iii) A 35% controlle	d entity of a person	described in (i) or (ii) above	re? .						11g(iii)		
h		Provide the following	information about th	ne supported organization	(s).				,				
	(i) N	lame of supported organization	(ii) EIN	(iii) Type of organization	` '	organization	(v) Did yo			s the		Amount	of
		organization		(described on lines 1-9 above or IRC section	in col. (i) lis		the organ col. (i)		(i) organizat	ion in col. zed in the	S	upport	
				(see instructions))			sup	port?	U.	S.?			
					Yes	No	Yes	No	Yes	No			
(A)													
(B)													
(C)													
(C)													
(C)													

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 or if the organization failed to qualify under

5			
Part III. If the orga	anization fails to qualify under the tests	listed below, please comp	olete Part III.)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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							
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
7	Amounts from line 4	<u> </u>						
8	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 organization, check this box and stop here						▶□	
Sec	tion C. Computation of Public Su	pport Percen	itage					
14	Public support percentage for 2011 (line 6, co	lumn (f) divided by	/ line 11, column (f))			14	%	
15	Public support percentage from 2010 Schedu	le A, Part II, line 1	4			15	%	
16a	33 1/3% support test - 2011. If the organize	ation did not che	ck the box on line 1	3, and line 14 is 3	33 1/3% or more, cl	neck this box	_	
	and stop here. The organization qualifies a	as a publicly supp	orted organization		. .		▶ 🗌	
b	33 1/3% support test - 2010. If the organization	ation did not che	ck a box on line 13	or 16a, and line 1	5 is 33 1/3% or mo	re, check this		
	box and stop here. The organization qualif	ies as a publicly	supported organiza	tion			▶□	
17a 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 1						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							▶ 🗌	
b	10%-facts-and-circumstances test - 2010	_			-	d line 15 is 10% or		
	more, and if the organization meets the "fac	-						
	organization meets the "facts-and-circumstan			-	•		▶□	
18	Private foundation. If the organization did	_			-	e instructions		

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 or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support			,					
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	91,201	87,987	60,522	181,306	123,153	544,169		
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	34,341	40,757	32,318	33,769	86,793	227,978		
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	209,946	772,147		
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.)						772,147		
	ction B. Total Support								
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total		
9	Amounts from line 6	125,542	128,744	92,840	215,075	209,946	772,147		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	13	61	17	182	44	317		
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	44	317		
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.)	125,555	128,805	92,857	215,257	209,990	772,464		
14	First five years. If the Form 990 is for the organization, check this box and stop here	<u> </u>		h, or fifth tax year	as a section 501(c))(3)	▶ □		
Sec	ction C. Computation of Public Su	• •							
15	Public support percentage for 2011 (line 8, col	``	ne 13, column (f))			15	99.96 %		
16	Public support percentage from 2010 Schedul			· · · · · · · · · · · · · · · · · · ·		16	9/		
	ction D. Computation of Investme					Г. _ Т			
17	Investment income percentage for 2011 (lin	, ,	•			17	0.04 %		
18	Investment income percentage from 2010 S	cnedule A, Part III,	, line 17			18	9/		
	17 is not more than 33 1/3%, check this box	/3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							
	line 18 is not more than 33 1/3%, check this	box and stop here	e. The organization	n qualifies as a pub	olicly supported org	ganization	▶ □		
20	Private foundation. If the organization did	not check a box on	line 14, 19a, or 19	b, check this box	and see instruction	s	🕨 🔲		

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No. 1545-0047

2011

Open to Public Inspection

Employer identification number

Durango Film Institute 20-3395808 Part I **Types of Property** (a) (b) (c) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on 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 Other ▶(PR& Market 25 х 52,856 Market Value Other (Food & bev 26 Х 32,150 Market value 27 Other (Lodging х 8,700 Market Value Other | Other fest 28 Х 4,350 Market Value 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be Χ used for exempt purposes for the entire holding period? 30a If "Yes," describe the arrangement in Part II. b Does the organization have a gift acceptance policy that requires the review of any non-standard Χ 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Χ contributions? **b** If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service
Name of the organization

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

2011

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Durango Film Institute 20-3395808 01. Form 990 governing body review (Part VI, line 11) The Board was provided with a copy of 990 before submitting to IRS. 02. Conflict of interest policy compliance (Part VI, line 12c) Board members are required to disclose conflicts of interest which are monitored by the Board chair. 03. Governing documents, etc, available to public (Part VI, line 19) Governing documents are made available to the public upon request. 04. Explanation of other changes in net assets or fund balances (Part XI, line 5) To excluded payroll liabilities from net assets calculation.

Form	8868 (Re	ev. 1-2012)						Page 2
		iling for an Additional (Not Automatic) 3-Mo	nth Extension	n, complete only Part II and	check this box			▶ 🗵
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File by			Social security					
		Number, street, and room or suite no. If a P.O. box, see instructions. PO Box 1587				TIUITID	ei (SSIV)	
filing y	our							
return.		City, town or post office, state, and ZIP code. For a foreign address, see instructions.						
		Durango, CO 81301-158						
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For	m 990-Pl	F	04	Form 5227				10
For	m 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069				11
For	m 990-T	(trust other than above)	06	Form 8870				12
STOF	P! Do no	t complete Part II if you were not already gra	nted an autor	matic 3-month extension on	a previously filed	l Form	8868.	
• Th	e books	are in the care of The Organization		7 Durango, CO 81301				
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5	For cale	endar year 2011, or other tax year beginning		, 20 and er	nding		, 2	.0
6	If the tax	x year entered in line 5 is for less than 12 months	, check reason	: Initial return	Final return			
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7		detail why you need the extension						
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oa		application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any efundable credits. See instructions.				8a	\$	
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		ed tax payments made. Include any prior year over	rpayment allowed as a credit and any				_	
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С		e due. Subtract line 8b from line 8a. Include yo		vith this form, if required, by ι	ising EFTPS			
	(Electronic Federal Tax Payment System). See instructions.					8c	\$	
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