Forms 990 / 990-EZ Return Summary

For calendar year 2015, or tax year beginning

, and ending

84-0935240

Bicycle Racing Association of Colo

Net Asset / Fund Balance at Begir	nning of Year		_	229,010
Revenue Contributions	1;	28,191 51,342		
Program service revenue Investment income		171		
Capital gain / loss		<u> </u>		
Fundraising / Gaming:				
0				
Direct expenses				
Net income				
Other income		0		
Total revenue			279,704	
Expenses				
Program services	22	24 , 590		
Management and general		57,206		
Fundraising				
Total expenses			281,796	
Excess / (deficit)				-2,092
Changes			_	
Net Asset / Fund B	alance at End of Year		_	226,918
Reconciliation of R			Reconciliation of Ex	
Total revenue per financial statements			es per financial statements	
Less:		Less:		
Unrealized gains		Donated s		
Donated services			r adjustments	
Recoveries		Losses		
Other		Other Plus:		
			at evnences	
Investment expenses Other		Other	nt expenses	
Total revenue per return	279,704		expenses per return	281,796
		Balance Sheet		
	Beginning	Ending	Differences	
Assets	239,555	233,041		
- Liabilities	10,545	6,123	-	
Net assets	229,010	226,918	-2,09	2
:				=
	Miscellaneous Ir	nformation		
	Return / extended due date Failure to file penalty	05/16/16	-	

Form 8879-EC

IRS e-file Signature Authorization for an Exempt Organization

u Do not send to the IRS. Keep for your records. Department of the Treasury u Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo. Internal Revenue Service Name of exempt organization Employer identification number Bicycle Racing Association of Colo 84-0935240 Name and title of officer Susan Adamkovics Treasurer Type of Return and Return Information (Whole Dollars Only) Part I Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I. 1a Form 990 check here ▶ X b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1b 2a Form 990-EZ check here Total revenue, if any (Form 990-EZ, line 9) 2b 3a Form 1120-POL check here b Total tax (Form 1120-POL, line 22) 4a Form 990-PF check here ▶__ b Tax based on investment income (Form 990-PF, Part VI, line 5) 4b _____ 5a Form 8868 check here ▶ ☐ b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c) 5b _____ Part II **Declaration and Signature Authorization of Officer** Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2015 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only I authorize Specialized Accounting Inc to enter my PIN as my signature do not enter all zeros on the organization's tax year 2015 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2015 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. 05/16/16 Officer's signature **Certification and Authentication** Part III **ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 84547036121 do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2015 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

> Patricia B Berger _ Date }

ERO Must Retain This Form—See Instructions Do Not Submit This Form To the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2015)

OMB No. 1545-1878

ERO's signature }

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

u Do not enter social security numbers on this form as it may be made public.

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

2015
Open to Public Inspection

<u>A</u>	For the	e 2015 c	alendar year, or	tax year	beginning		, and ending				_			
В	Check if a	applicable:	C Name of organization	n							D Employe	r identificat	tion number	•
	Address c	change		B	icycle Ra	cing A	ssociation	of Col	0					
司	Name cha	anne	Doing business as		he ACA							93524	10	
=		Ŭ	Number and street (`	if mail is not deliver	ed to street add	dress)		Ro	om/suite	E Telephon			
_	Initial retur		PO Box 76		pountry and ZID or f	foreign poetal or	ndo.				303-	<u>458-5</u>	2230	
	terminated				•	0 1							0.74	
	Amended	return	Littleton			CO 8016	50				G Gross red	eipts\$	279	704
Ħ		n pending	F Name and address		officer:				١,	H(a) Is this a g	roup return for	subordinates	? Yes	X No
Ш	Application	n pending	Doug Go							., .	•		H	=
			PO Box						'	H(b) Are all su			☐ Yes	No
			Littlete	\underline{on}			80160			If "No	," attach a list.	(see instruc	xions)	
<u> </u>	Tax-exem	npt status:	X 501(c)(3)	501(c		(insert no.)	4947(a)(1) or	527						
J	Website:	u W	ww.colora	rgocy	cling.or	<u>:a</u>				H(c) Group exe				
_		organization:	: X Corporation	Trust	Association	Other u			L Year	of formation: $oldsymbol{1}$.976	M State of	of legal domic	ile: CO
F	Part I	Su	ımmary											
	1 E		escribe the organiz											
e		Orga	nize and su	uport	amateur l	oicycle	racing in	Colora	ido ar	nd Wyom	ing			
Jan														
ē			<u></u>											
Governance	2 (Check thi	is box $\mathbf{u} igsqcup$ if the	organiza	tion discontinue	ed its operat	tions or disposed of	of more tha	ın 25% d	of its net as	sets.			
જ		Number o	of voting members	of the go	verning body (Part VI, line	1a)				3	10		
es	4 1	Number o	of independent vot	ing memb	ers of the gove	erning body	(Part VI, line 1b)				4	10		
Ξ	5 7	Total nun	nber of individuals	employed	d in calendar ye	ear 2015 (Pa	art V, line 2a)				5	6		
Activities			nber of volunteers								^	0		
_	7a ⊺	Total unre	elated business re	venue fro	m Part VIII, col									0
			ated business taxa											0
										Prior Ye	ar	С	Current Year	
Ф	8 (Contributi	ions and grants (P	'art VIII, li	ne 1h)						5,608			,191
Revenue	9 F	Program	service revenue (F	Part VIII, I	ine 2g)					14	9,664		151,	,342
ě			nt income (Part VI								214			171
œ	11 (Other rev	enue (Part VIII, co	olumn (A),	lines 5, 6d, 8d	;, 9c, 10c, a	nd 11e)		L					0
	12 7	Total reve	enue – add lines 8	through	11 (must equal	Part VIII, co	olumn (A), line 12)			26	5,486		279	704
	13 (Grants ar	nd similar amounts	paid (Pa	rt IX, column (A), lines 1–3	3)		L	1	0,000		2	,650
	14 E	Benefits p	paid to or for mem	bers (Par	t IX, column (A), line 4)			L					0
ģ	15 8	Salaries,	other compensation	on, emplo	yee benefits (P	art IX, colur	mn (A), lines 5-10)	L	10	4,615		102	,940
xpenses	16a F		nal fundraising fee											0
ĝ	b⊺	Total fund	draising expenses	(Part IX,	column (D), lin	o 25)		Λ						
ш		Other exp	oenses (Part IX, co	olumn (A)	, lines 11a-11d	J, 11f–24e)				20	2,938		176	,206
	18 7	Total exp	enses. Add lines 1	13–17 (mı	ust equal Part I	X, column (A), line 25)			31	7,553		281	,796
	19 F		less expenses. Su								2,067		-2	,092
SOF	<u> </u>								Be	ginning of Cu		<u>F</u>	End of Year	
Net Assets or	20 T		ets (Part X, line 16								9,555			,041
TA A	21 7		ilities (Part X, line								0,545			<u>,123</u>
			ts or fund balance		ct line 21 from	ine 20				22	9,010		226,	,918
F	Part II	Si	gnature Block	<u> </u>										
			perjury, I declare that									owledge a	and belief, i	it is
tr	ue, corre	ect, and co	omplete. Declaration	or prepare	er (other than office	cer) is based	on all information of	wnich prepa	arer nas a	any knowied	ge.			
		-												
Siç		S	signature of officer		_						Date			
He	ere	_		lamkov	vics			Tre	<u>asur</u>	er				
		<u> </u>	ype or print name and ti	tle										
_		Print/Type	e preparer's name			Preparer's sig	gnature			Date	Check	if	PTIN	
Pai -		Patric	ia B Berger			Patricia	B Berger			05/10	/16 self-em		P0006983	
	parer	Firm's na		ecial		count	ing Inc			ı	Firm's EIN }	84-	-1442	149
Use	e Only		PO	Box	638									
_		Firm's ad	dress_} Tal	berna	sh, CO	<u>80</u> 478	8-0638				Phone no.	<u>97</u> 0-	-531-1	<u> 1721</u>
Ma	y the IR	S discus	s this return with t	the prepa	rer shown abov	/e? (see ins	structions)						X Yes	No

		ciation of Colo 8	4-0935240	Page 2
	of Program Service			
		esponse or note to any line in	this Part III	<u></u>
1 Briefly describe the organi				
Organize and s	upport amate	ur bicycle racing	in Colorado and W	yoming
2 Did the organization under	take any significant progra	am services during the year which we	re not listed on the	
prior Form 990 or 990-EZ?	,	, , , , , , , , , , , , , , , , , , ,		Yes X No
If "Yes," describe these ne				
		nificant changes in how it conducts, a	ny program	
com/icco?		•		Yes X No
If "Yes," describe these ch				
	-	olishments for each of its three larges	t program services as measured by	
		ions are required to report the amoun	· · · · · · · · · · · · · · · · · · ·	
			it of grants and anocations to others,	
the total expenses, and re-	venue, ii any, ior each pro	ogram service reported.		
	1	212	1 000 \ (2 \ 2	
4a (Code:) (Exper	ises \$ 15/,	212 including grants of \$	1,000) (Revenue \$	
		support track raci		
and racing sch	edule, and c	onduct racing prog	rams in Colorado a	and Wyoming.
*				
• • • • • • • • • • • • • • • • • • • •				
• • • • • • • • • • • • • • • • • • • •				
• • • • • • • • • • • • • • • • • • • •				
improve member		Mens Racing camps	and evenes to dev	verop and
•				
• • • • • • • • • • • • • • • • • • • •				
c (Code:) (Exper	ises \$	including grants of \$) (Revenue \$	
*				
*				
• • • • • • • • • • • • • • • • • • • •				
*				
• • • • • • • • • • • • • • • • • • • •				
• • • • • • • • • • • • • • • • • • • •				
• • • • • • • • • • • • • • • • • • • •				
ld Other program services (D	rescribe in Schedule O.)			
4d Other program services (D (Expenses \$	including	grants of \$) (Revenue \$	

			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		X
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		X
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		<u> </u>
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,"			37
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			v
10	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	10		х
11	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		^
••	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,"			
ч	accomplete Cohestule D. Dort VII	11a	х	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
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		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			<u></u>
	for any foreign organization? 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 other			77
4-	assistance to or for foreign individuals? 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			7.7
40	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	4.0		v
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	19		х
	If "Yes," complete Schedule G, Part III	1 19		

_			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			٠,
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
	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			١
	employees? If "Yes," complete Schedule J	23		X
а	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
;	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		
I	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
l	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
	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):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	200		
	Schedule L, Part IV	28b		x
		200		^
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		-
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			_
	complete Schedule N, Part II	32		X
	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
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		Х
ı	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	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
	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,			
	Dark VII	37		х
				
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			l

Did the organization receive any payments for indoor tanning services during the tax year?

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

Form 990 (2015) Bicycle Racing Association of Colo 84-0935240 Page 5 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V No Yes Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 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 **b** If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? X **b** If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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 X If "Yes," enter the name of the foreign country: **u** See instructions for filing requirements for FinCEN Form 114, 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? X 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? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? X b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 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 If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities b 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.) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 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. **b** 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 13b Enter the amount of reserves on hand X

Form 990 (2015) Bicycle Racing Association of Colo 84-0935240 Page 6 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 or note to any line in this Part VI Section 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 10 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 10 1b 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? X 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? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 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? X b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? X 8a Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X 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 10a Did the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 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. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 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 Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? X 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official Х 15a X Other officers or key employees of the organization 15b 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 X 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 **u** None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. | X | Own website | Another's website | Upon request | Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: ${f u}$

Shawn Farrell PO Box 763 Littleton CO 80160

719-393-5711

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-orm 990 (2015)	RICACTE	Racing	Association	OI	СОТО	84-093524	Łυ

Р	age	. 7

Part VII	Compensation	on of Officers,	Directors,	Trustees, I	ney t	=mpioyees,	Hignest	Compensated	∟mpioyees,	and
	Independent	Contractors								

Check if Schedule O contains a response or note to any line 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 organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any	(dd box off	o not o x, unle	Pos check ess pe	c) ition more rson i	than one s both ar or/trustee	e n	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-21099-WISC)	organization and related organizations
(1) Doug Gordon	10.00									
President	10.00	X		x				0	0	0
(2) Rib Mobus	0.00	┢		^		\vdash		U	0	0
(2) KID MODUS	5.00									
Vice President	0.00	\mathbf{x}		x				0	0	0
(3) Susan Adamkovic		1						•	<u> </u>	
(6) 2 4 2 4 1 1 4 4 1 1 4 1 1 4 1	10.00									
Treasurer	0.00	\mathbf{x}		x				0	0	0
(4) Lynn Taylor		† <u></u>								
`, -	5.00									
Secretary	0.00	X		x				0	0	0
(5) Jennifer Sharp										
	2.00									
Director	0.00	X						0	0	0
(6) Michael McGuinn										
	2.00									
Director	0.00	X						0	0	0
(7) Marco Vasquez										
	2.00								_	_
Director	0.00	X						0	0	0
(8)Kim Nordquist										
· <u>- · · · · · · · · · · · · · · · · · ·</u>	2.00								•	
Director	0.00	X				\vdash		0	0	0
(9) Melissa Link	0.00									
51	2.00							•	^	
Director	0.00	X				\vdash		0	0	0
(10) Michael Chamber										
Director	2.00 0.00	<u>.</u>						0	^	0
Director	0.00	X			\vdash	$\vdash \vdash$		U	0	<u> </u>
(11)										
				l						<u> </u>

Part VII

Form 990 (20 ⁻	5) Bic	ycle	Racing	Association	of	Colo	84-0935240
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Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	Average hours per week (list any hours for	x, unle	Pos check ess pe nd a	rson i	s both	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)					
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(1.2.1888.11888)		from torganization and relations organization	ition ated	
· · · · · · · · · · · · · · · · · · ·													
1b Sub-total c Total from continuation she d Total (add lines 1b and 1c)		Sect	tion	Α			u u u						
Total number of individuals (in reportable compensation from				thos	e list	ed a	bov	e) who received more than	\$100,000 of			Yes	No
 3 Did the organization list any for employee on line 1a? If "Yes," 4 For any individual listed on line organization and related organ 	complete Schede 1a, is the sum izations greater	dule of re than	J for eport \$15	suc able 60,00	h ind com 0? If	dividu pens "Ye	ual . satic s," c	on and other compensation complete Schedule J for su	from the		3		х
5 Did any person listed on line for services rendered to the or	la receive or acc ganization? If "Y	crue	com	pens	atior	n fror	m ar	ny unrelated organization or	r individual		5		X
Section B. Independent Contract Complete this table for your five compensation from the organic.	ve highest comp									ear.			
	(A) business address								(B) tion of services		Со	(C) mpensat	tion
2 Total number of independent or received more than \$100,000	contractors (inclu of compensation	ding fror	but n the	not l	imite janiz	ed to ation	tho u	se listed above) who	0			000) (2015)

Pa	rt V				ntains a	response	or note to any line	in this Part VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns		1a						
Gra our	b	Manalaanalain alusa		1b		96,753				
s, o	С	Fundraising events		1c						
Sift ar	d	Related organizations		1d						
Program Service Revenue Contributions, Gifts, Grants Program Service Revenuts	е	Government grants (contributio		1e						
	f	All other contributions, gifts, gra								
		and similar amounts not include		1f		31,438				
ξō	g	Noncash contributions included	in lines 1:		\$,				
and	h	Total. Add lines 1a–1f				u	128,191			
ne		Totali / lad iii/oo la li				Busn, Code				
ven	2a	Race Registra	tion 1	Feeg		Buoin Gode	86,183	86,183		
Re	b	Camp Income					35,994	35,994		
ice	C	USAC Fee Reba	tod				33,871	33,871		
erv	d	Race Date Fee					1,125	1,125		
S	u o	Race Kit Fees					1,032	1,032		
grar	e						-6,863	-6,863		
)LO	1	All other program servi					151,342	-0,003		
<u> </u>	9	Total. Add lines 2a–2f					131,342			
	3	Investment income (income			•	,	171	171		
		and other similar amou					1/1	1/1		
	4	Income from investmen								
	5	Royalties								
			(i) Real		(11)	Personal				
	6a	Gross rents								
	b	Less: rental exps.								
	С	Rental inc. or (loss)								
	d 73	Net rental income or (le			<u></u>	u				
	1 a	sales of assets (i)	Securities	3	(ii)	Other				
		other than inventory								
	b	Less: cost or other								
		basis & sales exps.								
	С	Gain or (loss)								
	d	Net gain or (loss)				u				
<u>e</u>	8a	Gross income from fundra	iising eve	ents						
enc		(not including \$								
è		of contributions reported or								
Other Revenue		See Part IV, line 18		a						
the	b	Less: direct expenses		b						
0	С	Net income or (loss) fr	om fund	draising	g events .	u				
	9a	Gross income from gamin	g activitie	es.						
		See Part IV, line 19		а						
	b	Less: direct expenses		b						
	С	Net income or (loss) fr	om gan	ning ac	tivities	u				
	10a	Gross sales of invento	ry, less							
		returns and allowances	s 	а						
	b	Less: cost of goods so								
		Net income or (loss) from			ventory	u				
		Miscellaneous				Busn. Code				
	11a									
	b	• • • • • • • • • • • • • • • • • • • •								
	C	• • • • • • • • • • • • • • • • • • • •								
	d	All other revenue								
		Total. Add lines 11a–1								
	12	Total revenue. See in					279,704	151,513	0	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service expenses Do not include amounts reported on lines 6b, Total expenses Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2,650 2,650 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 55,000 27,500 27,500 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 2,300 39,967 37,667 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 Payroll taxes 7,973 5,469 2,504 10 Fees for services (non-employees): a Management **b** Legal 4,496 4,496 **c** Accounting e Professional fundraising services. See Part IV, line 17 Investment management fees **g** Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 2,709 2,618 91 2,750 1,375 12 Advertising and promotion 1,375 6,748 1,774 4,974 13 Office expenses 6,056 Information technology 8,188 2,132 14 15 Royalties 5,439 3,540 1,899 Occupancy 16 961 961 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 2,910 2,910 19 20 Payments to affiliates 21 13,969 Depreciation, depletion, and amortization 13,969 22 21,085 19,450 1,635 Insurance 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.) JUNIOR PROGRAM SUPPORT 50,407 50,407 RACING PROGRAM EXPENSES 35,553 35,553 15,321 AWARDS 15,321 4,590 4,590 Credit Card Processing d e All other expenses 505 1,080 575 281,796 0 224,590 57,206 25 Total functional expenses. Add lines 1 through 24e 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 u | if

following SOP 98-2 (ASC 958-720)

Pa	art)	K Balance Sheet					
		Check if Schedule O contains a response or no	te to any line i	n this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			20,664	1	20,872
	2	Savings and temporary cash investments			196,693	2	164,104
	3	Pledges and grants receivable, net			•	3	-
	4	Accounts receivable, net				4	9,550
	5	Loans and other receivables from current and former					
	`	trustees, key employees, and highest compensated e	*	,			
		Complete Part II of Cahadula I				5	
	6	Loans and other receivables from other disqualified p					
	`	4958(f)(1)), persons described in section 4958(c)(3)(B	`				
		sponsoring organizations of section 501(c)(9) volunta					
'n		organizations (see instructions). Complete Part II of S				6	
Assets	7	Notes and loans receivable, net				7	
As	8	lanca de de la ferma ella conserva				8	
	9	Dranaid avacage and deferred charges				9	1,371
	1	Land, buildings, and equipment: cost or					
		other basis. Complete Part VI of Schedule D	10a	141,046			
	Ь	Less: accumulated depreciation	10b	103,902	21,598	10c	37,144
	11	Investments—publicly traded securities	. [102]			11	<i>0.,</i>
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	late a cible accests				14	
	15	Other assets. See Part IV, line 11			600	15	
	16	Total assets. Add lines 1 through 15 (must equal line	. 34)		239,555		233,041
	17	Accounts payable and accrued expenses			5,660	17	2,228
	18	Grants payable		2,000	18		
	19	Deferred revenue			4,885	19	3,895
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV	of Schedule	D		21	
(n	22	Loans and other payables to current and former office					
Liabilities		trustees, key employees, highest compensated employees					
ig		disqualified persons. Complete Part II of Schedule L				22	
Ë	23	Secured mortgages and notes payable to unrelated the	aird nortice			23	
		Unsecured notes and loans payable to unrelated third				24	
	25	Other liabilities (including federal income tax, payable	s to related thi	rd			
		parties, and other liabilities not included on lines 17-2					
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			10,545	26	6,123
		Organizations that follow SFAS 117 (ASC 958), cl			•		
ces		complete lines 27 through 29, and lines 33 and 3		_			
lan	27	Unrestricted net assets			79,010	27	91,918
Ва	28				150,000	28	135,000
nd	29	Dormonantly rootriated not accets				29	
Ţ		Organizations that do not follow SFAS 117 (ASC	958), check h	ere u and			
ō		complete lines 30 through 34.		_			
sets	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or equipm				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income,				32	
~	33				229,010	33	226,918
	34	Total liabilities and net assets/fund balances			239,555	34	233,041

Form 990 (2015) Bicycle Racing Association of Colo 84-0935240 Page **12 Reconciliation of Net Assets** Check if Schedule O contains a response or note to any line in this Part XI Total revenue (must equal Part VIII, column (A), line 12) 279,704 1 Total expenses (must equal Part IX, column (A), line 25) 281,796 2 2 Revenue less expenses. Subtract line 2 from line 1 <u>-2,092</u> 3 3 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 229,010 4 Net unrealized gains (losses) on investments 5 5 Donated services and use of facilities 6 6 7 7 Investment expenses Prior period adjustments 8 8 Other changes in net assets or fund balances (explain in Schedule O) 9 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 226,918 33, column (B)) 10 Part XII **Financial Statements and Reporting** Check if Schedule O contains a response or note to any line in this Part XII Yes No X Accrual Accounting method used to prepare the Form 990: Cash 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? Х 2a If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Consolidated basis Separate basis Both consolidated and separate basis **b** Were the organization's financial statements audited by an independent accountant? Х 2b If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Consolidated basis Separate basis Both consolidated and separate basis 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 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

the Single Audit Act and OMB Circular A-133?

Form **990** (2015)

3a

SCHEDULE A

(Form 990 or 990-EZ)

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.

u Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number Bicycle Racing Association of Colo 84-0935240

Pa	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.							
The	orga			e it is: (For lines 1 through 11, o				
1	\sqcap	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).						
2	П			(A)(ii). (Attach Schedule E (Forr			, , , , , , , , , , , , , , , , , , ,	
3	Н			ce organization described in se			(iii).	
4	Н	•	·	in conjunction with a hospital of			` '	hospital's name
•	ш	city, and stat	•	in conjunction with a nospital of	acconbca	iii Scotic	in the control of the the	noopitaro riamo,
_		-		of a college or university owned	or operat		vovorpmontal unit described in	
5	Ш	•	•	of a college or university owned	or operac	eu by a g	overnmental unit described in	
_			(b)(1)(A)(iv). (Complete Pari	•		70 (1)(4)(
6	Н	•		overnmental unit described in s			,,	
7	Ш	•	•	substantial part of its support fro	om a gove	ernmental	unit or from the general public	;
	$\overline{}$		section 170(b)(1)(A)(vi). (C					
8	Ш	A community	trust described in section	170(b)(1)(A)(vi). (Complete Par	t II.)			
9	X	An organizati	on that normally receives: (1) more than 33 1/3% of its sup	port from	contributi	ons, membership fees, and gro	OSS
		receipts from	activities related to its exem	pt functions—subject to certain	exception	s, and (2) no more than 33 1/3% of its	
		support from	gross investment income ar	nd unrelated business taxable in	come (les	ss section	511 tax) from businesses	
	_	acquired by t	he organization after June 3	0, 1975. See section 509(a)(2)	. (Comple	ete Part II	l.)	
10	Ш	An organizati	on organized and operated	exclusively to test for public safe	ety. See s	section 5	09(a)(4).	
11	Ш	An organizati	on organized and operated e	exclusively for the benefit of, to p	perform th	ne function	ns of, or to carry out the purpo	ses of
		one or more	publicly supported organization	ions described in section 509(a	a)(1) or se	ection 50	9(a)(2). See section 509(a)(3). Check
		the box in line	es 11a through 11d that des	cribes the type of supporting org	ganization	and com	plete lines 11e, 11f, and 11g.	
а		Type I. A sup	oporting organization operate	ed, supervised, or controlled by	its suppo	rted orga	nization(s), typically by giving	
		the supported	d organization(s) the power to	o regularly appoint or elect a ma	ajority of t	he directo	ors or trustees of the supportin	g
		organization.	You must complete Part I	V, Sections A and B.				-
b	\Box	Type II. A su	pporting organization superv	rised or controlled in connection	with its s	supported	organization(s), by having	
	_			organization vested in the same				
			s). You must complete Par	•	•		ŭ 11	
С		•	•	porting organization operated in	connectio	n with a	nd functionally integrated with.	
•	ш			tions). You must complete Par			•	
d			• , , ,	supporting organization operate				1
u	ш		• •	ganization generally must satisfy				'/
				t complete Part IV, Sections A				
_		•	,	d a written determination from the				
е	Ш		· ·				ype i, Type ii, Type iii	
f	En	· · · · · · · · · · · · · · · · · · ·	r of supported organizations	nctionally integrated supporting	Organizat	OH.		
Ţ	_		ving information about the s	unported organization(s)				
		ne of supported		(iii) Type of organization	(iv) Is the	organization	(A) Amount of monotony	(vi) Amount of
(1		ganization	(ii) EIN	(described on lines 1–9		ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
	•			above (see instructions))	docur		instructions)	instructions)
					Yes	No		
<u></u>					162	NO		
(A)								
(B)								
(D)								
(C)								
(D)								
(E)								
Tota	.1							

Schedule A (Form 990 or 990-EZ) 2015 Bicycle Racing Association of Colo 84-0935240

Page 2

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

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in) u	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(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 line 4.						
	tion B. Total Support	1	-	,	,	,	_
Caler	ndar year (or fiscal year beginning in) u	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4						
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 VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	,				12	
13	First five years. If the Form 990 is for the	e organization's fire	st, second, third, fo	ourth, or fifth tax ye	ear as a section 50	1(c)(3)	
	organization, check this box and stop her						.
Sec	tion C. Computation of Public S						
14	Public support percentage for 2015 (line 6	, column (f) divided	d by line 11, colun	nn (f))		14	%
15	Public support percentage from 2014 Sche	edule A, Part II, lin	e 14				%
16a	33 1/3% support test—2015. If the organ				33 1/3% or more,	check this	. —
	box and stop here. The organization qual						▶ ∐
b	33 1/3% support test—2014. If the organ				15 is 33 1/3% or n	nore,	. \Box
	check this box and stop here. The organi	•		•			▶ ∟
17a	10%-facts-and-circumstances test—20	=					
	10% or more, and if the organization mee						
	Part VI how the organization meets the "fa	acts-and-circumsta	nces" test. The or	ganization qualifies	s as a publicly sup	ported	. \Box
b	organization 10%-facts-and-circumstances test—20	114. If the organiza	tion did not check	a box on line 13,	 16a, 16b, or 17a, a	ınd line	▶ ∐
	15 is 10% or more, and if the organization	meets the "facts-	and-circumstances	" test, check this b	oox and stop here) <u>.</u>	
	Explain in Part VI how the organization m	eets the "facts-and	d-circumstances" te	est. The organization	on qualifies as a p	ublicly	
	supported organization						▶ □
18	Private foundation. If the organization di						
	instructions						▶ □

(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	tion A. Public Support	quality dilidor to	no tooto notou	bolow, ploace	complete r are	,	
	ndar year (or fiscal year beginning in) u	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership		` ,	,	` ,		
	fees received. (Do not include any "unusual grants.")	175,067	140,883	145,380	120,608	128,191	710,129
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	219,442	178,569	184,645	149,664	151,513	883,833
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	394,509	319,452	330,025	270,272	279,704	1,593,962
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						
800	line 6.)						1,593,962
	tion B. Total Support ndar year (or fiscal year beginning in) u	(a) 2011	(b) 2012	(a) 2012	(d) 2014	(e) 2015	(f) Total
9		394,509	319,452	(c) 2013 330,025	270,272	279,704	1,593,962
		394,309	319,432	330,023	2/0,2/2	2/3,/04	1,393,902
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	467	321	349	214	171	1,522
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	467	321	349	214	171	1,522
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 VI.)	1,309	2,285	539			4,133
13	Total support. (Add lines 9, 10c, 11,	396,285	322,058	330,913	270,486	279,875	1,599,617
14	First five years. If the Form 990 is for the						
	organization, check this box and stop her						▶
Sec	tion C. Computation of Public S						
15	Public support percentage for 2015 (line 8						99.65%
16	Public support percentage from 2014 Sche					16	99.52 %
	tion D. Computation of Investme						
17	Investment income percentage for 2015 (I		II II:aa 47			40	%
18 19a	Investment income percentage from 2014 33 1/3% support tests—2015. If the organization						%
	17 is not more than 33 1/3%, check this bo	ox and stop here.	The organization of	qualifies as a public	cly supported orga	nization	> <u>X</u>
b	33 1/3% support tests—2014. If the organized the 18 is not more than 33 1/3% should the						. ┌
20	line 18 is not more than 33 1/3%, check the Private foundation. If the organization die	•	•				······ [-
	ato roundation, ii the diganization di	a not oncor a box t	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	TOD, OHOUR HIS DU	and Joo mondel	<u> </u>	·····

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	4		
	1		
	2		
	3a		
	3b		
	30		
	3с		
	4a		
	4b		
	4c		
	5a		
	Ja		
	5b		
	5с		
	_		
	6		
	7		
	8		
	9a		
	эа		
	9b		
	9с		
	10-		
	10a		
	10b		
orm		or 990-F	Z) 2015

Section E.	Type III	Functionally	/-Integrated	Supporting	Organizations

2 Activities Test. Answer (a) and (b) below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	Yes	No
2a		
2b		
3a		
3b		

Schedule A (Form 990 or 990-EZ) 2015 Bicycle Racing Association of Colo 84-0935240 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 2 2 Recoveries of prior-year distributions 3 **3** Other gross income (see instructions) 4 Add lines 1 through 3 4 **5** Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 **Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4) (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a **a** Average monthly value of securities **b** Average monthly cash balances 1b 1c **c** Fair market value of other non-exempt-use assets **d Total** (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets Subtract line 2 from line 1d 3 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 4 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 6 Multiply line 5 by .035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year 1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 4 Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

instructions).

Schedule A (Form 990 or 990-EZ) 2015

Par	t V Type III Non-Functionally Integrated 509(a)(3			ZIO rage I
	ion D - Distributions	y capporting organiz	dione (continuou)	Current Year
1	Amounts paid to supported organizations to accomplish exempt purp	oses		- Currons rous
2	Amounts paid to perform activity that directly furthers exempt purpose			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of sup	ported organizations		
4	Amounts paid to acquire exempt-use assets	·		
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organizations	zation is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
_10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
			Pre-2015	Amount for 2015
1_	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3_	Excess distributions carryover, if any, to 2015:			
a				
b				
c				
	From 2013			
е	From 2014			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
i	, , , , , , , , , , , , , , , , , , , ,			
<u></u> j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section			
	D, line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a				
b	Excess from 2013			
	Tuesday (1994)			
	Excess from 2014 Excess from 2015			
	ENGOGO HOIH EUTO			

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (F	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Part I	II, Line 12 - Other Income Detail
Miscel	laneous \$ 4,133
• • • • • • • • • • • • • • • • • • • •	
•	
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
u Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
u Attach to Form 990.
u Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

0	5. 110 5. gam		
В	icycle Racing Association of Colo		84-0935240
	rt I Organizations Maintaining Donor Advised F		
	Complete if the organization answered "Yes" or	on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing the	hat the assets held in donor advised	
	funds are the organization's property, subject to the organization's ex	xclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors		
	only for charitable purposes and not for the benefit of the donor or do	onor advisor, or for any other purpose	
	conferring impermissible private benefit?		Yes No
Pa	rt II Conservation Easements.		
	Complete if the organization answered "Yes" or	on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (chee	ck all that apply).	
	Preservation of land for public use (e.g., recreation or education)	Preservation of a historically im	portant land area
	Protection of natural habitat	Preservation of a certified histo	oric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified con-	servation contribution in the form of a con	servation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structure in	ncluded in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/1	7/06, and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, e	extinguished, or terminated by the organiz	zation during the
	tax year u		
4	Number of states where property subject to conservation easement i	is located u	
5	Does the organization have a written policy regarding the periodic m		
	violations, and enforcement of the conservation easements it holds?		
6	Staff and volunteer hours devoted to monitoring, inspecting, handling	g of violations, and enforcing conservation	easements during the year
	u		
7	Amount of expenses incurred in monitoring, inspecting, handling of v	violations, and enforcing conservation ease	ements during the year
	u \$		
8	Does each conservation easement reported on line 2(d) above satisf	fy the requirements of section 170(h)(4)(B)	
			
9	In Part XIII, describe how the organization reports conservation ease	•	
	balance sheet, and include, if applicable, the text of the footnote to the	he organization's financial statements that	describes the
Da	organization's accounting for conservation easements.	wt Historical Transvers or Oth	or Cimilar Acasta
Pä	organizations Maintaining Collections of A Complete if the organization answered "Yes" of A	nt, Historical Treasures, or Oth on Form 990 Part IV line 8	er Similar Assets.
10			d balance about
ıa	If the organization elected, as permitted under SFAS 116 (ASC 958), works of art, historical treasures, or other similar assets held for publications.		
	public service, provide, in Part XIII, the text of the footnote to its final	·	
h	•		
Ŋ	If the organization elected, as permitted under SFAS 116 (ASC 958), works of art, historical treasures, or other similar assets held for publications.		
			ulciance Ul
	public service, provide the following amounts relating to these items:		¢
	(i) Revenue included on Form 990, Part VIII, line 1		u \$
•		or other similar expets for financial gain r	
2	If the organization received or held works of art, historical treasures,		provide the
_	following amounts required to be reported under SFAS 116 (ASC 95)		¢
a h	Revenue included on Form 990, Part VIII, line 1		u \$

Schedule D (Form 990) 2015 Bicycle Racing Association of Colo 84-0935240 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition Loan or exchange programs а Scholarly research Other b C Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part 4 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Part IV **Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No **b** If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1c d Additions during the year 1d e Distributions during the year 1e Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII **Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance **b** Contributions c Net investment earnings, gains, and losses **d** Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: ${f a}$ Board designated or quasi-endowment ${f u}$ $\textbf{b} \ \, \text{Permanent endowment} \, \, \textbf{u} \, \, \dots \, \, \, \%$ ${f c}$ Temporarily restricted endowment ${f u}$ The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the Yes No organization by: (i) unrelated organizations 3a(i) (ii) related organizations **b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds. Land, Buildings, and Equipment. Part VI Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value (other) (investment) depreciation **1a** Land **b** Buildings

109,124

31,922

Schedule D (Form 990) 2015

27,609

37,144

99,589

4,313

e Other

c Leasehold improvements

d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Part VII	Investments—Other Securities.			Page 3
	Complete if the organization answered "Yes" on	Form 990, Part IV, I	ine 11b. See Form 990	, Part X, line 12.
	 (a) Description of security or category (including name of security) 	(b) Book value	(c) Method o Cost or end-of-ye	
(1) Financial of	lerivatives			
	d equity interests			
(E)				
/山\				
	(b) must equal Form 990, Part X, col. (B) line 12.) u			
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes" on	Form 990 Part IV I	ine 11c See Form 990	Part X line 13
	(a) Description of investment	(b) Book value	(c) Method o	
		(,,	Cost or end-of-ye	
(1)			·	
(2)				
(3)				
(3)				
(5)				
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, col. (B) line 13.) u			
Part IX	Other Assets.			
I alt IX	Complete if the organization answered "Yes" on	Form 990 Part IV I	ine 11d See Form 990	Part X line 15
	(a) Description	1 01111 000, 1 411 17, 1	ino 11a. 000 1 01111 000	(b) Book value
(1)	(-)			(4, = 11.11.11.11.11.11.11.11.11.11.11.11.11.
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, col. (B) line 15.)		11	
Part X	Other Liabilities.		u	
I alt X	Complete if the organization answered "Yes" on	Form 990 Part IV I	ine 11e or 11f See For	m 990 Part X
	line 25.	1 01111 000, 1 art 10, 1	inc the of thi. Occitor	111 550, 1 art 7,
1.	(a) Description of liability	(b) Book value		
	ncome taxes	(b) Book value	_	
	ncome taxes		_	
(2)				
(3)				
(4)			_	
(5)				
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, col. (B) line 25.) u			
	uncertain tax positions. In Part XIII, provide the text of the foot	=		
organization's li	ability for uncertain tax positions under FIN 48 (ASC 740). Ch	eck here if the text of the	footnote has been provided in	Part XIII

cne	dule D (Form 990) 2015 BICYCLE RACING ASSOCIACION OF	L COIO 64-093324	±U 1	age 4
Pa	Reconciliation of Revenue per Audited Financial Statemers Complete if the organization answered "Yes" on Form 990, F		Return.	
1	Total revenue, gains, and other support per audited financial statements	art iv, iiie iza.	1	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	Net unrealized gains (losses) on investments	2a		
	Donated services and use of facilities			
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	·,····.	3	
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b		-	
	Other (Describe in Part XIII.) Add lines 4a and 4b		10	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		4c 5	
	rt XII Reconciliation of Expenses per Audited Financial Staten		-	
	Complete if the organization answered "Yes" on Form 990, F			
1			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
	Other (Describe in Part XIII.)			
	Add lines 2a through 2d		2e	
	Subtract line 2e from line 1	·,····.	3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b		-	
b	Other (Describe in Part XIII.)	4b		
			□ .	
С	Add lines 4a and 4b		4c	
с 5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		4c 5	
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information.		5	
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV,	lines 1b and 2b; Part V, line 4;	5	
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	lines 1b and 2b; Part V, line 4; any additional information.	5 Part X, line	
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV,	lines 1b and 2b; Part V, line 4; any additional information.	5 Part X, line	
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Int XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, Int XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	lines 1b and 2b; Part V, line 4; any additional information.	Part X, line	
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Schedule D (Fo	orm 990) 2015	Bicycle	Racing	Association	of	Colo	84-0935240	Page 5
Part XIII	Supplemen	tal Informati	on (continue	Association ed)				
	•		•					
• • • • • • • • • • • • • • • • • • • •								
_								
•								
• • • • • • • • • • • • • • • • • • • •								

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047
2015

Department of the Treasury Internal Revenue Service u Attach to Form 990 or 990-EZ. u Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Employer identification number Bicycle Racing Association of Colo 84-0935240 Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 An electronic copy of the draft form 990 is circulated via e-mail to all board members. The board is asked to review the document and send all questions or concerns to the executive director. Once all questions are answered and any changes recorded, the form 8879EO is signed by the Board Treasurer and the return is electronically filed iwth the IRS. Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation The organization maintains a website at www.coloradocycling.org. All organizational documents, bylaws, board meeting minutes, monthly financial reports and the annual form 990 are posted to this public website.

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

u Attach to your tax return.

u Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172

2015

Attachment

Internal Revenue Service
Name(s) shown on return

Department of the Treasury

Bicycle Racing Association of Colo

Identifying number 84-0935240

	ess or activity to which this form relates ndirect Depreciat	tion							
			perty Under Section	n 179					
			ty, complete Part V b		com	nlete Pa	art I		
1	Maximum amount (see instruction							1	500,000
2	Total cost of section 179 property	<i>'</i>	e instructions)					2	200,000
3	Threshold cost of section 179 pro			tions)				3	2,000,000
4	Reduction in limitation. Subtract li							4	
5	Dollar limitation for tax year. Subtract I							5	
6		on of property	· · · · · · · · · · · · · · · · · · ·	st (business use			Elected cost		
7	Listed property. Enter the amoun	t from line 29			7				
8	Total elected cost of section 179							8	
9	Tentative deduction. Enter the si							9	
10	Carryover of disallowed deduction	n from line 13 of your	2014 Form 4562					10	
11	Business income limitation. Enter	r the smaller of busine	ss income (not less than	zero) or line	5 (see	instructio	ns)	11	
12	Section 179 expense deduction.	Add lines 9 and 10, bu	it do not enter more than	line 11	<u></u>			12	
13	Carryover of disallowed deduction	n to 2016. Add lines 9	and 10, less line 12	<u></u>	13				
Note	: Do not use Part II or Part III belo	ow for listed property. I	nstead, use Part V.						
Pa	art II Special Deprecia	tion Allowance a	and Other Deprecia	tion (Do ı	not ir	<u>nclude li</u>	sted pro	perty.) (See instructions.)
14	Special depreciation allowance for	or qualified property (or	ther than listed property)	placed in ser	vice				
	during the tax year (see instruction							14	
15	Property subject to section 168(f	(1) election						15	
16	Other depreciation (including AC	RS)			<u> </u>	<u></u>		16	
_Pa	art III MACRS Deprecia	ation (Do not incl	ude listed property.)	(See inst	ructio	ns.)			
			Section A						11 560
17	MACRS deductions for assets pla							17	11,568
18	If you are electing to group any assets place							·	_
	Section B—A		vice During 2015 Tax Yo	T	le Ger	іегаі Бер	Teclation	system	1
	(a) Classification of property	(b) Month and year placed in	(c) Basis for depreciation (business/investment use	(d) Recovery period	(e) C	Convention	(f) Metho	od	(g) Depreciation deduction
40-	2	service	only-see instructions) 27,760	<u> </u>		MO	200	DB	2 212
<u>19a</u>	3-year property		1,755			MQ MQ	200		2,313 88
_ <u>b</u>	5-year property		1,755	3.0		ΙΊQ	200.	ДВ	00
<u>c</u> d	7-year property 10-year property								
_ <u>u</u>	15-year property								
_	20-year property								
_ <u>'</u> _	25-year property			25 yrs.			S/L		
<u>у</u> h	Residential rental			27.5 yrs.		MM	S/L		
	property			27.5 yrs.		MM	S/L		
	Nonresidential real			39 yrs.		MM	S/L		
-	property			1 , , , , ,		MM	S/L		
	Section C—As	sets Placed in Servi	ce During 2015 Tax Yea	ar Using the				Syste	m
 20a				T -					
	Class life				l		1 5/L		
b	Class life 12-year			12 yrs.			S/L S/L		
				12 yrs. 40 yrs.		MM			
С	12-year	nstructions.)		<u> </u>		MM	S/L		
С	12-year 40-year			<u> </u>		MM	S/L	21	
c Pa	12-year 40-year art IV Summary (See in	om line 28	ines 19 and 20 in column	40 yrs.			S/L	21	
<u>с</u> Ра	12-year 40-year art IV Summary (See in Listed property. Enter amount from	om line 28, lines 14 through 17, I		40 yrs. (g), and line	 21. Er	nter	S/L	21	13,969
<u>с</u> Ра	12-year 40-year art IV Summary (See in Listed property. Enter amount from Total. Add amounts from line 12.	om line 28 , lines 14 through 17, I s of your return. Partne	erships and S corporation	40 yrs. (g), and line s—see instru	 21. Er	nter	S/L		13,969

05/10/2016 8:17 AM

SOBIC35240 Bicycle Racing Association of Colo

84-0935240

Federal Asset Report Form 990, Page 1

FYE: 12/31/2015

Mac Air Computer

Projector & Screen

Tent Frame & Flag Poles

Grand Totals

Net Grand Totals

Less: Dispositions and Transfers

Less: Start-up/Org Expense

Date Bus Sec Basis Prior Description In Service Cost % 179 Bonus for Depr PerConv Meth Current Asset 3-year GDS Property: 35 Website Redesign 12/31/15 27,760 27,760 3 MQ200DB 2,313 27,760 27,760 0 2,313 5-year GDS Property: 10/02/15 799 5 MQ200DB O 40 33 Podium Backdrop 799 34 CX Start/Finish Flags 10/19/15 956 956 MQ200DB 0 48 1,755 0 88 1,755 **Prior MACRS: RACE BARRIERS & SIGNAGE** 5/28/06 8,808 8,808 HY 200DB 8,808 0 . 7 7 TENT & CANOPY 3/23/07 1,721 HY 200DB 0 1,721 1,721 500HD BLACK STEP IN 10/01/08 1,345 672 HY 200DB 1,345 0 150 18" TRAFFIC CONES 7 HY 200DB 5/28/08 839 419 839 0 7 730 0 8 DYNALITE SIGN STANDS 7/12/08 730 365 HY 200DB 100 18" TRAFFIC CONES 7/12/08 634 317 HY 200DB 634 0 SPECTRUM DIGITAL SIGN 1,691 5 HY 200DB 1,691 845 0 8/10/09 LAP COUNTER 4/26/10 1,100 550 HY 200DB 1,100 0 DELL LAPTOP 12/31/11 872 151 5 HY 200DB 721 101 5 10 **DELL LAPTOP 2** 12/31/11 926 160 HY 200DB 766 107 A FRAME BIKE HOLDER 600 300 HY 200DB 11 5/05/12 438 65 8/29/12 972 5 1,350 238 LAPTOP RACE KIT 3 1.945 HY 200DB 12 232 2 ACA POPUP TENTS ELECTRONIC TIMING SYSTEM 9/25/12 1,897 948 5 HY 200DB 1,317 3/01/11 62,913 10,871 HY 200DB 52,042 7,247 14 15 TIMING SYSTEM EQUIPMENT 3/20/12 914 457 HY 200DB 700 86 TRANSPONDERS X X 5 HY 200DB 5,067 16 12/31/12 7,700 3,850 1,053 WEBSITE REBUILD 3 8/01/09 41,260 20,630 HY 200DB 17 41,260 0 Mass Sale: 12/31/15 WEBSITE REBUILD 6/21/10 12,975 X 6,487 3 HY 200DB 12,975 0 18 Mass Sale: 12/31/15 Manager Laptop 4/03/13 1.074 X 537 HY 200DB 206 X 709 5 GoPro Camera Setup 354 HY 200DB 369 20 3/12/13 136 3 Bike A Frame Racks 5/01/13 510 255 HY 200DB 265 98 **BRAC Podium Blocks** 750 459 HY 200DB 291 7/02/13 131 7 296 Red Green Course Preview Flags 8/20/13 765 469 HY 200DB 134 Walls for BRAC Tent 979 7 7 621 8/27/13 1.600 HY 200DB 280 4 Rolls Course Fencing 1,942 1,189 HY 200DB 340 8/27/13 753 Timing Chips 6/15/13 665 332 HY 200DB 346 127 3,191 27 Race Registration Website Upgrade 2.051 3 4.103 HY 200DB 608 10/03/13 5 Mac Computer-Membership 6/23/09 1,744 872 HY 200DB 1,744 0 Slide Projector 1/20/09 320 160 HY 200DB 320 0

12/31/11

3/20/14

9/09/14

1.235

165,766

195,281

54,235

141,046

0

801

678

5

214

400

339

67,133

96,648

27,117

69,531

0

HY 200DB

HY 200DB

HY 200DB

1,021

144,168

144,168

54,235

89,933

0

481

407

143

128

108

11,568

13,969

13,969

n

0

05/10/2016 8:17 AM

SOBIC35240 Bicycle Racing Association of Colo 84-0935240 AMT Asset Report

Form 990, Page 1

FYE: 12/31/2015

		Date		Bus Sec	Basis			
Asset	Description	In Service	Cost	<u>%</u> <u>179</u> B <u>onu</u> s	for Depr	PerConv Meth	Prior	Current
3-year	GDS Property:							
	Website Redesign	12/31/15	27,760		27,760	3 MQ150DB	0	1,735
			27,760		27,760		0	1,735
		=						
_	CDC D							
<u>5-year</u> 33	GDS Property: Podium Backdrop	10/02/15	799		799	5 MQ150DB	0	30
34	CX Start/Finish Flags	10/19/15	956		956	5 MQ150DB	ő	36
	C	_	1,755		1,755			66
		=	1,733	:	1,733			
Prior	MACRS:	5/29/0 <i>C</i>	0 000		0.000	7 HV 150DD	0.000	0
2	RACE BARRIERS & SIGNAGE TENT & CANOPY	5/28/06 3/23/07	8,808 1,721		8,808 1,721	7 HY 150DB 7 HY 150DB	8,808 1,721	$\begin{array}{c} 0 \\ 0 \end{array}$
3	500HD BLACK STEP IN	10/01/08	1,345	X	672	7 HY 200DB	1,345	0
4	150 18" TRAFFIC CONES	5/28/08	839	X	419	7 HY 200DB	839	0
5	8 DYNALITE SIGN STANDS	7/12/08	730	X	365	7 HY 200DB	730	0
6 7	100 18" TRAFFIC CONES SPECTRUM DIGITAL SIGN	7/12/08 8/10/09	634 1,691	X X	317 845	7 HY 200DB 5 HY 200DB	634 1,691	$\begin{array}{c} 0 \\ 0 \end{array}$
8	LAP COUNTER	4/26/10	1,100	X	550	5 HY 200DB	1,100	0
9	DELL LAPTOP	12/31/11	872	X	151	5 HY 200DB	721	101
10	DELL LAPTOP 2	12/31/11	926	X	0	5 HY 200DB	926	0
11	A FRAME BIKE HOLDER	5/05/12	600	X	300	5 HY 200DB	514	34
12 13	LAPTOP RACE KIT 3 2 ACA POPUP TENTS	8/29/12 9/25/12	1,945 1,897	X X	972 948	5 HY 200DB 5 HY 200DB	1,665 1,624	112 109
	ELECTRONIC TIMING SYSTEM	3/01/11	62,913	X	10,871	5 HY 200DB	52,042	7,247
15	TIMING SYSTEM EQUIPMENT	3/20/12	914		914	5 HY 150DB	760	62
16	TRANSPONDERS	12/31/12	7,700	X	3,850	5 HY 200DB	6,591	444
17	WEBSITE REBUILD Mass Sale: 12/31/15	8/01/09	41,260	X	20,630	3 HY 200DB	41,260	0
18	WEBSITE REBUILD	6/21/10	12,975	X	6,487	3 HY 200DB	12,975	0
	Mass Sale: 12/31/15		,- , -		-,		,,	-
19	Manager Laptop	4/03/13	1,074	X	537	5 HY 200DB	816	103
20 21	GoPro Camera Setup	3/12/13 5/01/13	709 510	X X	354 255	5 HY 200DB 5 HY 200DB	539 388	68 40
22	3 Bike A Frame Racks BRAC Podium Blocks	7/02/13	750	X	459	5 HY 200DB 7 HY 200DB	291	49 131
23	Red Green Course Preview Flags	8/20/13	765	X	469	7 HY 200DB	296	134
24	Walls for BRAC Tent	8/27/13	1,600	X	979	7 HY 200DB	621	280
25	4 Rolls Course Fencing	8/27/13	1,942	X	1,189	7 HY 200DB	753	340
26 27	Timing Chips Race Registration Website Upgrade	6/15/13 10/03/13	665 4,103	X X	332 2,051	5 HY 200DB 3 HY 200DB	346 3,191	127 608
28	Mac Computer-Membership	6/23/09	1,744	X	872	5 HY 200DB	1,744	0
29	Slide Projector	1/20/09	320	X	160	5 HY 200DB	320	0
30	Mac Air Computer	12/31/11	1,235	X	214	5 HY 200DB	1,021	143
31 32	Projector & Screen Tent Frame & Flag Poles	3/20/14 9/09/14	801 678	X X	400 339	5 HY 200DB 5 HY 200DB	481 407	128
34	Tent France & Frag Poles	^{2/U2/14} –	678	Λ		J 111 200DD		108
		=	165,766		67,430		147,160	10,328
	Grand Totals		195,281		96,945		147,160	12,129
	Less: Dispositions and Transfe	ers	54,235		27,117		54,235	12,129
	Net Grand Totals	_	141,046		69,828		92,925	12,129
	Net Grand Totals	=	1-1,0-0	:	07,020			12,127

SOBIC35240 Bicycle Racing Association of Colo 84-0935240 Bonus Depreciation Report

05/10/2016 8:17 AM

FYE: 12/31/2015

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
<u>Activi</u>	ty: Form 990, Page 1							
3 4 5 6 7 8 9	150 18" TRAFFIC CONES 8 DYNALITE SIGN STANDS 100 18" TRAFFIC CONES SPECTRUM DIGITAL SIGN LAP COUNTER DELL LAPTOP	10/01/08 5/28/08 7/12/08 7/12/08 8/10/09 4/26/10 12/31/11 12/31/11 5/05/12	1,345 839 730 634 1,691 1,100 872 926 600		0 0 0 0 0 0 0	0 0 0 0 0 0 0	673 420 365 317 846 550 721 766 300	672 419 365 317 845 550 151 160 300
13 14 15 16	LAPTOP RACE KIT 3 2 ACA POPUP TENTS ELECTRONIC TIMING SYSTEM TIMING SYSTEM EQUIPMENT TRANSPONDERS	8/29/12 9/25/12 3/01/11 3/20/12 12/31/12	1,945 1,897 62,913 914 7,700		0 0 0 0 0	0 0 0 0	973 949 52,042 457 3,850	972 948 10,871 457 3,850
17 18 19 20 21 22	GoPro Camera Setup	8/01/09 6/21/10 4/03/13 3/12/13 5/01/13 7/02/13	41,260 12,975 1,074 709 510 750		0 0 0 0 0	0 0 0 0 0	20,630 6,488 537 355 255 291	20,630 6,487 537 354 255 459
22 23 24 25 26 27	Red Green Course Preview Flags Walls for BRAC Tent 4 Rolls Course Fencing	8/20/13 8/27/13 8/27/13 6/15/13 10/03/13	765 1,600 1,942 665 4,103		0 0 0 0 0	0 0 0 0 0	296 621 753 333 2,052	439 469 979 1,189 332 2,051
28 29 30 31	Mac Computer-Membership Slide Projector	6/23/09 1/20/09 12/31/11 3/20/14 9/09/14	1,744 320 1,235 801 678		0 0 0 0 0	0 0 0 0 0	872 160 1,021 401 339	872 160 214 400 339
	*Less: Dispositions ar	990, Page 1 nd Transfers _ 1990, Page 1 _	155,237 54,235 101,002		0 0	0 0	98,633 27,118 71,515	56,604 27,117 29,487
	Less: Dispositions ar	Grand Total nd Transfers _ Grand Total	155,237 54,235 101,002		$\begin{bmatrix} 0 \\ 0 \\ 0 \end{bmatrix}$	0 0 0	98,633 27,118 71,515	56,604 27,117 29,487

FYE: 12/31/2015

SOBIC35240 Bicycle Racing Association of Colo 84-0935240 Depreciation Adjustment Report All Business Activities

05/10/2016 8:17 AM

<u>Form</u>	<u>Unit</u>	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences
MACR	S Adj	ustments:				
Page 1		1 2 3 4 5 6 7 8 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	RACE BARRIERS & SIGNAGE TENT & CANOPY 500HD BLACK STEP IN 150 18" TRAFFIC CONES 8 DYNALITE SIGN STANDS 100 18" TRAFFIC CONES SPECTRUM DIGITAL SIGN LAP COUNTER DELL LAPTOP DELL LAPTOP DELL LAPTOP 2 A FRAME BIKE HOLDER LAPTOP RACE KIT 3 2 ACA POPUP TENTS ELECTRONIC TIMING SYSTEM TIMING SYSTEM EQUIPMENT TRANSPONDERS WEBSITE REBUILD WEBSITE REBUILD Manager Laptop GoPro Camera Setup 3 Bike A Frame Racks BRAC Podium Blocks Red Green Course Preview Flags Walls for BRAC Tent 4 Rolls Course Fencing Timing Chips Race Registration Website Upgrade Mac Computer-Membership Slide Projector Mac Air Computer	0 0 0 0 0 0 0 0 101 107 65 238 232 7,247 86 1,053 0 0 206 136 98 131 134 280 340 127 608 0	0 0 0 0 0 0 0 0 101 0 34 112 109 7,247 62 444 0 0 103 68 49 131 134 280 340 127 608 0 0	0 0 0 0 0 0 0 0 0 0 107 31 126 123 0 0 24 609 0 0 0 103 68 49 0 0
Page 1 Page 1 Page 1 Page 1	1 1 1 1	32 33 34	Projector & Screen Tent Frame & Flag Poles Podium Backdrop CX Start/Finish Flags	108 40 48 11,656	108 108 30 36 10,394	0 10 12 1,262

SOBIC35240 Bicycle Racing Association of Colo
84-0935240 Future Depreciation Report FYE: 12/31/16 05/10/2016 8:17 AM

Form 990, Page 1 FYE: 12/31/2015

Asset	Description	Date In Service	Cost	Tax	AMT
Prior M	IACRS:				
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 19 20 21 22 23 24 25 26 27 28 29 30 31 31 32 33 34 34 34 36 37 38 37 38 37 38 37 38 38 38 38 38 38 38 38 38 38 38 38 38	RACE BARRIERS & SIGNAGE TENT & CANOPY 500HD BLACK STEP IN 150 18" TRAFFIC CONES 8 DYNALITE SIGN STANDS 100 18" TRAFFIC CONES SPECTRUM DIGITAL SIGN LAP COUNTER DELL LAPTOP DELL LAPTOP 2 A FRAME BIKE HOLDER LAPTOP RACE KIT 3 2 ACA POPUP TENTS ELECTRONIC TIMING SYSTEM TIMING SYSTEM EQUIPMENT TRANSPONDERS Manager Laptop GoPro Camera Setup 3 Bike A Frame Racks BRAC Podium Blocks Red Green Course Preview Flags Walls for BRAC Tent 4 Rolls Course Fencing Timing Chips Race Registration Website Upgrade Mac Computer-Membership Slide Projector Mac Air Computer Projector & Screen Tent Frame & Flag Poles Podium Backdrop CX Start/Finish Flags	5/28/06 3/23/07 10/01/08 5/28/08 7/12/08 7/12/08 8/10/09 4/26/10 12/31/11 12/31/11 5/05/12 8/29/12 9/25/12 3/01/11 3/20/12 12/31/12 4/03/13 3/12/13 5/01/13 7/02/13 8/27/13 8/27/13 6/15/13 10/03/13 6/23/09 1/20/09 12/31/11 3/20/14 9/09/14 10/02/15 10/19/15	8,808 1,721 1,345 839 730 634 1,691 1,100 872 926 600 1,945 1,897 62,913 914 7,700 1,074 709 510 750 765 1,600 1,942 665 4,103 1,744 320 1,235 801 678 799 956	0 0 0 0 0 0 0 0 50 53 65 238 232 3,624 85 1,053 123 82 59 94 96 199 243 77 304 0 0	0 0 0 0 0 0 0 0 0 50 0 35 112 109 3,624 61 443 62 41 29 94 96 199 243 77 304 0 0
35	Website Redesign	12/31/15	27,760 141,046	16,965 24,522	13,013 19,312
	Grand Totals		141,046	24,522	19,312
	Jiana Ivans		141,040		17,512

Form 990 Two Year Comparison Report

For calendar year 2015, or tax year beginning

2014 & 2015

Name Taxpayer Identification Number

ending

I	Bicycle Racing Association of Col	Lo		84-0	935240
			2014	2015	Differences
	1. Contributions, gifts, grants	1.	33,012	31,438	-1,574
	2. Membership dues and assessments	2.	82,596	96 , 753	14,157
	3. Government contributions and grants	3.			
n e	4. Program service revenue	4.	149,664	151,342	1,678
_	5. Investment income	5.	214	171	-43
>	6. Proceeds from tax exempt bonds	6.			
Re	7. Net gain or (loss) from sale of assets other than inventory	7.			
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming	. 9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	. 11.			
	12. Total revenue. Add lines 1 through 11	12.	265,486	279 , 704	
	13. Grants and similar amounts paid	13.	10,000	2,650	-7,350
	14. Benefits paid to or for members	14.			
s S	15. Compensation of officers, directors, trustees, etc.	15.	43,334	55,000	
n S	16. Salaries, other compensation, and employee benefits	16.	61,281	47,940	-13,341
Φ	17. Professional fundraising fees	17.			
α×	18. Other professional fees	18.	9,048	7,205	
Ш	19. Occupancy, rent, utilities, and maintenance	. 19.	6,670	5,439	
	20. Depreciation and Depletion	. 20.	16,568	13,969	
	21. Other expenses		170,652	149,593	
	22. Total expenses. Add lines 13 through 21	. 22.	317,553	281,796	
_	23. Excess or (Deficit). Subtract line 22 from line 12	23.	-52,067	-2,092	
	24. Total exempt revenue	24.	265,486	279,704	14,218
_	25. Total unrelated revenue	25.			
ţi	26. Total excludable revenue	26.	149,878	151,513	1,635
ma	27. Total assets	27.	239,555	233,041	-6,514
Information	28. Total liabilities	28.	10,545	6,123	
	29. Retained earnings	. 29.	229,010	226,918	-2,092
the	30. Number of voting members of governing body 31. Number of independent voting members of governing body	30.	10	10	
Ö	31. Number of independent voting members of governing body \dots	31.	10	10	
	32. Number of employees	32.	6	6	
	33. Number of volunteers	33.			

Form 990	Tax Return History		2015
Name	Bicycle Racing Association of Colo	Employer Id 84-09	lentification Number 35240

	2011	2012	2013	2014	2015	2016
Contributions, gifts, grants				33,012	31,438	
Membership dues				82,596	96,753	
Program service revenue				149,664	151,342	
Capital gain or loss						
Investment income				214	171	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue						
Total revenue				265,486	279,704	
Grants and similar amounts paid				10,000	2,650	
Benefits paid to or for members						
Compensation of officers, etc.				43,334	55,000	
Other compensation				61,281	47,940	
Professional fees				9,048	7,205	
Occupancy costs				6,670	5,439	
Depreciation and depletion				16,568	13,969	
Other expenses				170,652	149,593	
Total expenses				317,553	281,796	
Excess or (Deficit)				-52,067	-2,092	
<u> </u>				·		
Total exempt revenue				265,486	279,704	
Total unrelated revenue						
Total excludable revenue				149,878	151,513	
Total Assets				239,555	233,041	
Total Liabilities				10,545	6,123	
Net Fund Balances				229,010	226,918	

SOBIC35240 Bicycle Racing Association of Colo 84-0935240

Federal Statements

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FYE: 12/31/2015

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	E:	Total xpenses	Program Service	_ `	gement & eneral	und aising
Graphic Design Background Screening	\$	2,618 91	\$ 2,618	\$	91	\$
Total	\$	2,709	\$ 2,618	\$	91	\$ 0

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses		Program Service		Management & General		F	Fund Raising
PreJ Permits	\$	575	\$	575	\$		\$	
DUES AND SUBSCRIPTIONS		160				160		
LICENSES		134				134		
MISC		121				121		
BANK SERVICE CHARGES		90				90		
Total	\$	1,080	\$	575	\$	505	\$	0

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Federal Statements

FYE: 12/31/2015

Schedule A, Part III, Line 1(e)

Description	An	Amount	
Individuals	\$	74,495	
Juniors		5,145	
Club Dues		10,806	
One Day Memberships		6,307	
COBRAS Bike Team		12,000	
DONORS < \$5000		19,438	
Total	\$	128,191	

Schedule A, Part III, Line 2(e)

Description	 Amount
Race Registration Fees	\$ 86,183
Camp Income	35,994
USAC Fee Rebates	33,871
Race Date Fees	1,125
Race Kit Fees	1,032
Misc Revenue	452
Fee Refunds and Waivers	-7,315
Taxable Interest on Savings and Temporary Cash Investments	 171
Total	\$ 151,513