

**Application for Recognition of Exemption
 Under Section 501(c)(3) of the Internal Revenue Code**

OMB No. 1545-0056
 If exempt status is approved, this application will be open for public inspection.

Read the instructions for each Part carefully.
A User Fee must be attached to this application.

If the required information and appropriate documents are not submitted along with Form 8718 (with payment of the appropriate user fee), the application may be returned to you.

Part I Identification of Applicant

1a Full name of organization (as shown in organizing document) Biodiversity Associates		2 Employer identification number (If none, see instructions.) Applied For
1b c/o Name (if applicable) Sylvia J. Callaway	3 Name and telephone number of person to be contacted if additional information is needed Sylvia J. Callaway (303) 882-9806	
1c Address (number, street, and room or suite no.) 301 S. 4th Street (for mailing, P.O. Box 805)		
1d City or town, state, and ZIP code Dolores, Colorado 81323	4 Month the annual accounting period ends 12	
5 Date incorporated or formed 5/2/1994	6 Activity codes (See instructions.) 350 529	7 Check here if applying under section: a <input type="checkbox"/> 501(e) b <input type="checkbox"/> 501(f) c <input type="checkbox"/> 501(k)
8 Did the organization previously apply for recognition of exemption under this Code section or under any other section of the Code? If "Yes," attach an explanation.		
9 Has the organization filed Federal income tax returns or exempt organization information returns? If "Yes," state the form numbers, years filed, and Internal Revenue office where filed.		

- 10** Check the box for your type of organization. BE SURE TO ATTACH A COMPLETE COPY OF THE CORRESPONDING DOCUMENTS TO THE APPLICATION BEFORE MAILING.
- a Corporation— Attach a copy of your Articles of Incorporation, (including amendments and restatements) showing approval by the appropriate State official; also include a copy of your bylaws.
 - b Trust— Attach a copy of your Trust Indenture or Agreement, including all appropriate signatures and dates.
 - c Association— Attach a copy of your Articles of Association, Constitution, or other creating document, with a declaration (see instructions) or other evidence the organization was formed by adoption of the document by more than one person; also include a copy of your bylaws.

If you are a corporation or an unincorporated association that has not yet adopted bylaws, check here

I declare under the penalties of perjury that I am authorized to sign this application on behalf of the above organization and that I have examined this application, including the accompanying schedules and attachments, and to the best of my knowledge it is true, correct, and complete.

Please Sign Here _____ President, Board of Directors _____ 5-15-94 _____
 (Signature) (Title or authority of signer) (Date)

For Paperwork Reduction Act Notice, see page 1 of the Instructions.

Complete the Procedural Checklist (page 7 of the instructions) prior to filing.

Part II Activities and Operational Information

1 Provide a detailed narrative description of all the activities of the organization—past, present, and planned. Do not merely refer to or repeat the language in your organizational document. Describe each activity separately in the order of importance. Each description should include, as a minimum, the following: (a) a detailed description of the activity including its purpose; (b) when the activity was or will be initiated; and (c) where and by whom the activity will be conducted.

Impact and effect policy (national, regional, local) of agencies with authority to manage public lands, to encourage the preservation of remaining natural diversity and habitat of these lands.

- A. Introduce "preservation models" based on conservation biology into every Forest Plan Revision in Region 2, U.S.D.A. (and into additional selected forest regions).
- B. Continually monitor, review, and comment on actions of Forest Service, Bureau of Land Management (and other public lands agencies) at all levels in order to hold the agencies accountable for following the law regarding managing public lands for protection of biological diversity and species habitat.

These activities will begin upon the incorporation of Biodiversity Associates, 5-2-94.

Persons completing these activities will be Don Duerr, Technical Coordinator and Leila Stanfield, Education Coordinator. The location for the above activities is the Rocky Mountains and other western states, including Arizona, Utah, New Mexico, Idaho, Nebraska, and South and North Dakota.

2. Educate public at large, local citizen groups, and government entities involved with public land management as to the importance of conservation biology, landscape ecology, and related disciplines, concerning the preservation and restoration of biodiversity on the North American continent.

- A. Organize, form, and train local citizen groups in geographic areas that lack citizen involvement.
 - 1. Educate the groups on biological diversity, conservation biology and public lands policy.
 - 2. Train the groups to act on behalf of public lands protection in their areas.
 - 3. Help the groups become knowledgeable and capable of teaching and training others.
- B. Provide technical assistance to citizen groups already working in their areas but who need help with preservation models.
- C. Work with Forest Service, Bureau of Land Management, and other agencies to educate their planners, managers, scientists, etc., on biodiversity issues related to the public lands under their management authority.
- D. Disseminate information to the general public on these issues.

These activities will begin upon the incorporation of Biodiversity Associates, 5-2-94.

Persons and locations for these activities are the same as in number I., above. In addition, when the budget allows, the above staff members will be joined in this activity by a Communication Specialist (to be hired in 1995).

- I. Develop long term capabilities for the public's use of computers and imaging technologies.
- V. Integrate and coordinate Biodiversity Associates' efforts with scientists, activists and other groups working on goals of North American and worldwide biodiversity preservation.

These activities will begin 5-2-94, and will be completed by the same persons as I. and II., above

2 What are or will be the organization's sources of financial support? List in order of size. V. Fundraising--same persons and dates as I.-IV., above. When budget allows, hire a resource

development staff position.

- A. Funds from granting foundations which support the types of goals our organization promotes
- B. Funds from members of the general public who support our organizational goals

3 Describe the organization's fundraising program, both actual and planned, and explain to what extent it has been put into effect. Include details of fundraising activities such as selective mailings, formation of fundraising committees, use of volunteers or professional fundraisers, etc. Attach representative copies of solicitations for financial support.

No fundraising done prior to this application. Anticipated fundraising activities are:

- A. Proposals to granting organizations (foundations, religious, governmental, or other appropriate funding entities); and B. Appeals to the general public (focusing primarily in the geographic region to be served), through selective mailings and/or local/regional events. Fundraising responsibilities will be handled by designated board and staff members of the organization, including volunteer assistance from time to time.

Part II Activities and Operational Information (Continued)

4 Give the following information about the organization's governing body:

a Names, addresses, and titles of officers, directors, trustees, etc.
 Sylvia J. Callaway, Pres., P.O. Box 805, Dolores, Co. 81323
 Sara Johnson, Vice Pres., KOA Kampground, Three Forks, Montana 59752
 Jasper Carlton, Sec/Treas., P.O. Box 18327, Boulder, Co. 80302
 Fred Cheever, Board Member, 1900 Olive Street, Denver, Co. 80220
 Edgar Boyle, Board Member, 266 Wildwood Lane, Aspen, Co. 81611

(Street addresses of the above:
 Callaway, 301 S. 4th, Dolores, Co. 81323
 Carlton, 2630 Juniper Ave., #8, Boulder, Co. 80304
 Johnson, Cheever and Boyle -- same as above.)

b Annual Compensation

None

c Do any of the above persons serve as members of the governing body by reason of being public officials or being appointed by public officials? Yes No
 If "Yes," name those persons and explain the basis of their selection or appointment.

d Are any members of the organization's governing body "disqualified persons" with respect to the organization (other than by reason of being a member of the governing body) or do any of the members have either a business or family relationship with "disqualified persons"? (See the specific instructions for line 4d.) Yes No
 If "Yes," explain.

5 Does the organization control or is it controlled by any other organization? Yes No
 Is the organization the outgrowth of (or successor to) another organization, or does it have a special relationship with another organization by reason of interlocking directorates or other factors? Yes No
 If either of these questions is answered "Yes," explain.

6 Does or will the organization directly or indirectly engage in any of the following transactions with any political organization or other exempt organization (other than 501(c)(3) organizations): (a) grants; (b) purchases or sales of assets; (c) rental of facilities or equipment; (d) loans or loan guarantees; (e) reimbursement arrangements; (f) performance of services, membership, or fundraising solicitations; or (g) sharing of facilities, equipment, mailing lists or other assets, or paid employees? Yes No
 If "Yes," explain fully and identify the other organizations involved.

7 Is the organization financially accountable to any other organization? Yes No
 If "Yes," explain and identify the other organization. Include details concerning accountability or attach copies of reports if any have been submitted.

Part II Activities and Operational Information (Continued)

8 What assets does the organization have that are used in the performance of its exempt function? (Do not include property producing investment income.) If any assets are not fully operational, explain their status, what additional steps remain to be completed, and when such final steps will be taken. If "None," indicate "N/A."

N/A

9a Will any of the organization's facilities or operations be managed by another organization or individual under a contractual agreement? Yes No
b Is the organization a party to any leases? Yes No
If either of these questions is answered "Yes," attach a copy of the contracts and explain the relationship between the applicant and the other parties.

10 Is the organization a membership organization? Yes No
If "Yes," complete the following:
a Describe the organization's membership requirements, and attach a schedule of membership fees and dues.
b Describe your present and proposed efforts to attract members, and attach a copy of any descriptive literature or promotional material used for this purpose.
c What benefits do (or will) your members receive in exchange for their payment of dues?

11a If the organization provides benefits, services or products, are the recipients required, or will they be required, to pay for them? N/A Yes No
If "Yes," explain how the charges are determined, and attach a copy of your current fee schedule.
b Does or will the organization limit its benefits, services or products to specific individuals or classes of individuals? N/A Yes No
If "Yes," explain how the recipients or beneficiaries are or will be selected.

12 Does or will the organization attempt to influence legislation? Yes No
If "Yes," explain. Also, give an estimate of the percentage of the organization's time and funds which it devotes or plans to devote to this activity.

13 Does or will the organization intervene in any way in political campaigns, including the publication or distribution of statements? Yes No
If "Yes," explain fully.

Part III Technical Requirements

1 Are you filing Form 1023 within 15 months from the end of the month in which you were created or formed? Yes No
If you answer "Yes," do not answer questions 2 through 6.

2 If one of the exceptions to the 15-month filing requirement shown below applies, check the appropriate box and proceed to question 7. N/A

Exceptions—You are not required to file an exemption application within 15 months if the organization:

- (a) Is a church, interchurch organization, local unit of a church, a convention or association of churches, or an integrated auxiliary of a church;
- (b) Is not a private foundation and normally has gross receipts of not more than \$5,000 in each tax year; or,
- (c) Is a subordinate organization covered by a group exemption letter, but only if the parent or supervisory organization timely submitted a notice covering the subordinate.

3 If you do not meet any of the exceptions in question 2, do you wish to request relief from the 15-month filing requirement? Yes No

4 If you answer "Yes" to question 3, please give your reasons for not filing this application within 15 months from the end of the month in which your organization was created or formed. **(See the Instructions before completing this item.)**

N/A

5 If you answer "No" to both questions 1 and 3 and do not meet any of the exceptions in question 2, your qualification as a section 501(c)(3) organization can be recognized only from the date this application is filed with your key District Director. Therefore, do you want us to consider your application as a request for recognition of exemption as a section 501(c)(3) organization from the date the application is received and not retroactively to the date you were formed? Yes No N/A

6 If you answer "Yes" to question 5 above and wish to request recognition of section 501(c)(4) status for the period beginning with the date you were formed and ending with the date your Form 1023 application was received (the effective date of your section 501(c)(3) status), check here and attach a completed page 1 of Form 1024 to this application. N/A

Part III Technical Requirements (Continued)

- 7 Is the organization a private foundation?
 Yes (Answer question 8.)
 No (Answer question 9 and proceed as instructed.)

- 8 If you answer "Yes" to question 7, do you claim to be a private operating foundation?
 Yes (Complete Schedule E)
 No N/A

After answering this question, go to Part IV.

- 9 If you answer "No" to question 7, indicate the public charity classification you are requesting by checking the box below that most appropriately applies:

THE ORGANIZATION IS NOT A PRIVATE FOUNDATION BECAUSE IT QUALIFIES:

- | | | |
|---|---|--|
| (a) <input type="checkbox"/> | As a church or a convention or association of churches (CHURCHES MUST COMPLETE SCHEDULE A). | Sections 509(a)(1) and 170(b)(1)(A)(i) |
| (b) <input type="checkbox"/> | As a school (MUST COMPLETE SCHEDULE B). | Sections 509(a)(1) and 170(b)(1)(A)(ii) |
| (c) <input type="checkbox"/> | As a hospital or a cooperative hospital service organization, or a medical research organization operated in conjunction with a hospital (MUST COMPLETE SCHEDULE C). | Sections 509(a)(1) and 170(b)(1)(A)(iii) |
| (d) <input type="checkbox"/> | As a governmental unit described in section 170(c)(1). | Sections 509(a)(1) and 170(b)(1)(A)(v) |
| (e) <input type="checkbox"/> | As being operated solely for the benefit of, or in connection with, one or more of the organizations described in (a) through (d), (g), (h), or (i) (MUST COMPLETE SCHEDULE D). | Section 509(a)(3) |
| (f) <input type="checkbox"/> | As being organized and operated exclusively for testing for public safety. | Section 509(a)(4) |
| (g) <input type="checkbox"/> | As being operated for the benefit of a college or university that is owned or operated by a governmental unit. | Sections 509(a)(1) and 170(b)(1)(A)(iv) |
| (h) <input checked="" type="checkbox"/> | As receiving a substantial part of its support in the form of contributions from publicly supported organizations, from a governmental unit, or from the general public. | Sections 509(a)(1) and 170(b)(1)(A)(vi) |
| (i) <input type="checkbox"/> | As normally receiving not more than one-third of its support from gross investment income and more than one-third of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions (subject to certain exceptions). | Section 509(a)(2) |
| (j) <input type="checkbox"/> | We are a publicly supported organization but are not sure whether we meet the public support test of block (h) or block (i). We would like the Internal Revenue Service to decide the proper classification. | Sections 509(a)(1) and 170(b)(1)(A)(vi) or Section 509(a)(2) |

If you checked one of the boxes (a) through (f) in question 9, go to question 14.
 If you checked box (g) in question 9, go to questions 11 and 12.
 If you checked box (h), (i), or (j), go to question 10.

Part III Technical Requirements (Continued)

- 10** If you checked box (h), (i), or (j) in question 9, have you completed a tax year of at least 8 months?
 Yes—Indicate whether you are requesting:
 A definitive ruling (Answer questions 11 through 14.)
 An advance ruling (Answer questions 11 and 14 and attach 2 Forms 872-C completed and signed.)
 No—You must request an advance ruling by completing and signing 2 Forms 872-C and attaching them to your application.
- 11** If the organization received any unusual grants during any of the tax years shown in Part IV-A, attach a list for each year showing the name of the contributor; the date and the amount of the grant; and a brief description of the nature of the grant.

None Received

- 12** If you are requesting a definitive ruling under section 170(b)(1)(A)(iv) or (vi), check here and: N/A
- a** Enter 2% of line 8, column (e) of Part IV-A _____
- b** Attach a list showing the name and amount contributed by each person (other than a governmental unit or "publicly supported" organization) whose total gifts, grants, contributions, etc., were more than the amount you entered on line 12a above.
- 13** If you are requesting a definitive ruling under section 509(a)(2), check here and: N/A
- a** For each of the years included on lines 1, 2, and 9 of Part IV-A, attach a list showing the name of and amount received from each "disqualified person."
- b** For each of the years included on line 9 of Part IV-A, attach a list showing the name of and amount received from each payer (other than a "disqualified person") whose payments to the organization were more than \$5,000. For this purpose, "payer" includes, but is not limited to, any organization described in sections 170(b)(1)(A)(i) through (vi) and any governmental agency or bureau.

	Yes	No	If "Yes," complete Schedule:
Is the organization a church?		X	A
Is the organization, or any part of it, a school?		X	B
Is the organization, or any part of it, a hospital or medical research organization?		X	C
Is the organization a section 509(a)(3) supporting organization?		X	D
Is the organization an operating foundation?		X	E
Is the organization, or any part of it, a home for the aged or handicapped?		X	F
Is the organization, or any part of it, a child care organization?		X	G
Does the organization provide or administer any scholarship benefits, student aid, etc.?		X	H
Has the organization taken over, or will it take over, the facilities of a "for profit" institution?		X	I

Part IV Financial Data

Complete the financial statements for the current year and for each of the 3 years immediately before it. If in existence less than 4 years, complete the statements for each year in existence. If in existence less than 1 year, also provide proposed budgets for the 2 years following the current year. As a new organization, we have not had a previous operating budget.

A.—Statement of Revenue and Expenses Please see attached projected budgets.

	Current tax year	3 prior tax years or proposed budget for 2 years			(e) TOTAL
	(a) From 5/2/94 to 12/31/94	(b) 19	(c) 19	(d) 19	
Revenue	1 Gifts, grants, and contributions received (not including unusual grants—see instructions)	0			
	2 Membership fees received	0			
	3 Gross investment income (see instructions for definition)	0			
	4 Net income from organization's unrelated business activities not included on line 3	0			
	5 Tax revenues levied for and either paid to or spent on behalf of the organization	0			
	6 Value of services or facilities furnished by a governmental unit to the organization without charge (not including the value of services or facilities generally furnished the public without charge)	0			
	7 Other income (not including gain or loss from sale of capital assets) (attach schedule)	0			
	8 Total (add lines 1 through 7)	0			
	9 Gross receipts from admissions, sales of merchandise or services, or furnishing of facilities in any activity that is not an unrelated business within the meaning of section 513	0			
	10 Total (add lines 8 and 9)	0			
	11 Gain or loss from sale of capital assets (attach schedule)	0			
	12 Unusual grants	0			
	13 Total revenue (add lines 10 through 12)	0			
Expenses	14 Fundraising expenses	0			
	15 Contributions, gifts, grants, and similar amounts paid (attach schedule)	0			
	16 Disbursements to or for benefit of members (attach schedule)	0			
	17 Compensation of officers, directors, and trustees (attach schedule)	0			
	18 Other salaries and wages	0			
	19 Interest	0			
	20 Occupancy (rent, utilities, etc.)	0			
	21 Depreciation and depletion	0			
	22 Other (attach schedule)	0			
	23 Total expenses (add lines 14 through 22)	0			
	24 Excess of revenue over expenses (line 13 minus line 23)	0			

Part IV **Financial Data (Continued)** As a new nonprofit corporation, we have no expenditures.

B.—Balance Sheet (at the end of the period shown)		Current tax year Date <u>5-2-94</u>
Assets		
1	Cash	0
2	Accounts receivable, net	0
3	Inventories	0
4	Bonds and notes receivable (attach schedule)	0
5	Corporate stocks (attach schedule)	0
6	Mortgage loans (attach schedule)	0
7	Other investments (attach schedule)	0
8	Depreciable and depletable assets (attach schedule)	0
9	Land	0
10	Other assets (attach schedule)	0
11	Total assets (add lines 1 through 10)	0
Liabilities		
12	Accounts payable	0
13	Contributions, gifts, grants, etc., payable	0
14	Mortgages and notes payable (attach schedule)	0
15	Other liabilities (attach schedule)	0
16	Total liabilities (add lines 12 through 15)	0
Fund Balances or Net Assets		
17	Total fund balances or net assets	0
18	Total liabilities and fund balances or net assets (add line 16 and line 17)	0

If there has been any substantial change in any aspect of your financial activities since the end of the period shown above, check the box and attach a detailed explanation N/A