

**STATE OF COLORADO
SECRETARY OF STATE**



**ANNUAL FINANCIAL STATEMENT
FOR COLORADO CHARITABLE ORGANIZATIONS**

For record-keeping purposes only. This form cannot be filed with the Secretary of State.

Renewal

Registration Number: 20033006613

Renewal Id: 20053002465

This financial report covers the fiscal year beginning: 01/01/2004 **and ending:** 12/31/2004

Organization Information

1. Organization's name: SHERIDAN HISTORICAL SOCIETY, INC.

2. Federal Employer Identification Number (FEIN): 84-1181577

3. Organization's principal address:

Street address: 4101 S. FEDERAL BLVD.

City: SHERIDAN **State:** CO **Zip:** 80110

Telephone number: (303) 762-0083

Fiscal year ends: 12/31

If incorporated, date incorporated: 05/24/1991. **State of incorporation:** CO

If not incorporated:

Type of organization: _____

Date established: N/A **State established:** ____

4. Telephone number:

5. Has the organization applied for or been granted IRS tax exempt status? Yes

If 'Yes,' date of determination letter, or of application if determination is pending: 08/06/1992

If tax-exempt, IRS code: 501(C)(3)

Are contributions to the organization tax deductible? Yes

6. NTEE codes that describe your organization:

ARTS, CULTURE & HUMANITIES

Financial Summary as of most recent fiscal year end (line numbers are from Form 990)

7. Revenue (Amounts Received During the Year):

Contributions (Line 1a + Line 1b): \$1,480.00
 Government Grants (Line 1c): \$0.00
 Program Service Revenue (Line 2): \$0.00
 Investments (Line 4 + Line 5 + Line 6c + Line 7 + Line 8d): \$120.04
 Special Events and Activities (Line 9c): \$0.00
 Sales (Line 10c): \$0.00
 Other (Line 3 + Line 11): \$0.00
 Total Revenue (sum of all revenue items above): \$1,600.04

8. Expenses (Amounts Paid Out During the Year):

Program Services (Line 13): \$0.00
 Administration - Management and general (Line 14): \$25.88
 Fundraising (Line 15): \$0.00
 Payments to affiliates (Line 16): \$0.00
 Other Expenses: \$1,681.59
 (Describe): PRINTING OF "HISTORY OF THE SHERIDAN FIRE DEPARTMENT" BOOK.
 Total Expenses (sum of expense items listed above): \$1,707.47

9. Summary of Balance Sheet as of Fiscal Year End:

Total Assets, End of Year (Line 59B): \$15,990.83
 Total Liabilities, End of Year (Line 66B): \$0.00
 Fund Balance, End of Year (Total Assets - Total Liabilities): \$15,990.83

Professional Fundraisers

10. Paid Solicitor / Professional Fundraising Consultant Organization or Individual:

Other Information

11. Fundraising Professionals:

Outside Professional Fundraiser fees: \$0.00

12. Is your organization related (other than by association with a statewide or nationwide organization) through membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization (Line 89a)? No

If 'Yes,' the name of the related organization(s): _____

Is this related organization an exempt organization?: No

13. Did your organization solicit any contributions or gifts that were not tax deductible? (Line 84a): No

If 'Yes' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?: N/A

14. List the states with which you are registered to conduct solicitations from, or from which you have been granted an exemption:

COLORADO

This is estimated financial information for a newly established charitable organization: No

15. Name of Authorized Official who signed this Annual Financial Report:

ROWLAND, ROGER B

Date: 03/11/2005