Enclosure (12)

Financial Exhibits of the MLAA

- a. Financial Statements
 - (1) IRS Form 990 (2021)
- b. Meadow Lake Airport Capital Improvement Plan
 - (1) Current FAA/CDOT Capital Improvement Plan (CIP)
 - (2) Summary of FAA AIP and CDAG grants to Meadow Lake Airport
 - (3) Wish list of possible future infrastructure projects
- c. Application for Colorado Discretionary Aeronautics Grant
- d. Colorado GA Sustainability Program data overview

Federal Tax Return

MEADOW LAKE AIRPORT ASSOCIATION

2021

PEAK FINANCIAL SERVICES, LLC 5825 DELMONICO DR, STE 310 COLORADO SPRINGS, CO 80919 Phone: (719) 260-6475 Fax: (719) 260-0660 PEAKFSLLC@GMAIL.COM

Form 990

Return of Organization Exempt From Income Tax

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

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

	roi the 2021 c	alendar year, or tax year begin	ning	and	ending	The state of the s	inspection
В	Check if applicable:		ADOW LAKE AIRPORT ASSOCIA	TION			The second of
Ш,	Address change	Doing business as	THE BULL YIM ON THOUSEN	TION	D Emplo	yer identific	ation number
\Box	Name of a	Number and street (or P.O. box if	f mail is not delivered to street address)	Done to it			
Ц'	Vame change	13650 JUDGE ORR ROAD	the delivered to sheet address)	Room/suite	74-21063		
- LJ1	nitial return	City or town	State	700	E Teleph	one number	
П	Teal N	PEYTON	CO	ZIP code			el" v s s
<u></u>	inal return/terminated	Foreign country name	Foreign province/state/county	80831		-	
	mended return		r draight province/state/county	Foreign postal		Die.	
	application pending	E Name of the			G Gross r	eceipts S	662,36
Ц,	ppiication pending				H(a) Is this a group retu	m for subording	ates? Yes X N
***		JEFF MOORE 11665 Allend	ale Drive, PEYTON, CO 8083	1	H(b) Are all subordin		= =
1 7	ax-exempt status:	501(c)(3) X 501(c) (4) ◀ (insert no.) 4947(a)(If "No," allach a		
JV	Vebsite: ▶ http	os://meadowlakeairport.com/	7 4 (Incarries.) 4347 (a)(1) or 527	11 10 10		
	orm of organization	The state of the s			H(c) Group exemption	n number 🕨	2 8 8 7 PM
Service Co.			Association Other ▶	L Yea	r of formation 197	M Stat	te of legal domicile: Co
PE		mmary			10//		te of legal domicile: C
6	 Briefly d 	escribe the organization's mis	sion or most significant activitie	es ops	PATE & MAINTAI	NDELIE	(FD AIGDODTIL)
ě	SOUTH	ERN COLORADO	3		MIL & WAINTAI	IN KELIE	/ER AIRPORT IN
E I							
Activities & Governance	2 Check th	nis hov Diftho organia	#		7. J		
8	3 Number	of voting members of the	tion discontinued its operations	s or disposed of	of more than 25%	of its net	assets.
ංජ						3	
8	4 Number	of independent voting member	ers of the governing body (Part	VI, line 1b).		4	
=	- 10001110	moet of individuals employed	In Calendar year 2021 / Post \/	line 2a)		5	
5	· otal mai	moci of volunteers (estilliate il	necessary)	*		6	
4	7a Total uni	elated business revenue from	Part VIII, column (C), line 12.	•		7a	400
	b Net unre	lated business taxable income	from Form 990-T, Part I, line	11.		7b	400
					Prior Year	170	Current Year
e	8 Contribu	iions and grants (Part VIII, line	e 1h)			3,686	STATE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN C
en l		est ties to totice (1 ait vill, lill	EZUI A MA MA		50	0,000	613,007
00	mivosinio	THE INCOME (FAIL VIII, COlumn (A), lines 3 4 and 7d)	AND VINE UNIT U		075	
-	11 Other rev	renue (Part VIII, column (A), li	nes 5, 6d, 8c, 9c, 10c, and 11e	, · · · -		375	186
	12 Total reve	nue—add lines 8 through 11 /m	ust equal Part VIII, column (A), li	20 12)		4,368	13,564
	13 Grants ar	nd similar amounts paid (Part	IX, column (A), lines 1-3).	16 12)	598	8,429	626,757
	14 Benefits	naid to or for members (Port II	(, column (A), line 4)				
s l	15 Salaries	other componentian ampleuse	c, column (A), line 4)				
w	6a Professio	and fundaciona for A	enefits (Part IX, column (A), lines	5–10) <u> </u>			
je j	b Total fund	rial fundraising fees (Part IX, o	column (A), line 11e)				
Ä 1	7 Other exp	draising expenses (Part IX, co	umn (D), line 25) ▶				
1	8 Total exp	enses (Part IX, column (A), lir	nes 11a-11d, 11f-24e)		304	1,216	294,729
	9 Revenue	anses. Add lines 13-17 (must	equal Part IX, column (A), line	25)	304	1,216	294,729
	9 Revenue	less expenses. Subtract line 1	8 from line 12			1,213	332,028
ts o		M M A			Beginning of Current		End of Year
20 60	O Total asse	ets (Part X, line 16)			9,231	-	9,873,454
SAP 2	 Total liabi 	lities (Part X, line 26)	***********		5,234		
§ ₹ 2		s or fund balances. Subtract li	ne 21 from line 20	–			5,533,449
Part	Sign	ature Block			3,997		4,340,005
Under po	enalties of perjury,	declare that I have examined this retu	rn, including accompanying schedules a	and statements, ar	nd to the best of my kno	owledge	
and bell	ei, it is true, correct,	and complete. Declaration of preparer	(other than officer) is based on all infor	mation of which pr	eparer has any knowle	edge.	
Sign	-						
Here		ignature of officer	•		Date	***************************************	
	J	EFF MOORE		TREAS	URFR		
		ype or print name and title			======================================		
Table Market	Print/T	ype preparer's name	Preparer's signature		Date		PTIN
Paid						eck if	
Prepa	rer CHAR	RLES P MUELLER, CPA	CHARLES P MUELLER,	CPA	1	If-employed	xxxxxxxx
Use O		name ► PEAK FINANCIAL S	ERVICES, LLC		EMAN NAME OF THE PARTY OF THE P		
				DINGS SS	Firm's EIN ►		
May the	IPS discuss t	hie return with the	DR, STE 310, COLORADO SP	KINGS, CO 8	U91 Phone no. ((719) 260-	-6475
way un	ING UISCUSS T	riis return with the preparer sh	own above? See instructions .				X Yes No
ror Pap	erwork Reduc	tion Act Notice, see the separa	ate instructions.				Form 990 (2021)
HTA							1 OHH 330 (2021)

CONTRACT	m 990 (2021)	MEADOW LAKE	AIRPORT ASS	SOCIATION		N. HERNIGON W. TM.	74-2106395	Page 2
	Part II	Statement of Pro	gram Servic	e Accomplishments	,			1 bgc
	D	Gneck if Schedule	O contains a	a response or note to	any line in this	Part III		П
1	Briefly de	escribe the organization	n's mission:					
	OPERA	IE & MAIN I AIN RELIE	VER AIRPORT	IN SOUTHERN COLO	RADO			
	*********		********					
2	Did the o	organization undertake a	any significant	program services during	the year which w	vere not listed on		· ////
	uie prior	Form 990 or 990-EZ?.					T Yes	X No
,	It "Yes,"	describe these new ser	vices on Sched	dule O.		4		<u> </u>
3	Did the o	rganization cease cond	ucting, or mak	e significant changes in	how it conducts, a	any program 🌎 🏺		
	If "Yes "	describe these changes	on Cabadula				Yes	X No
4	Describe	the organization's prog	ram service ac	complishments for each	as ita tlavan Invita			
	evherises	s. Section Sur(c)(3) and	1001(c)(4) orga	anizations are required to	report the amou	st program services, i	as measured by	
	the total e	expenses, and revenue,	if any, for eac	h program service repor	ted.		audita to duleis,	1
4a	(Code:	\/=			į.			
4401		F AND MAINTAIN REI	Ses \$	294,729 including gran	nts of \$	(Revenue	\$ 597	,379)
			ILVENAINFO	KT IN SOUTHERN COL	ORADO			
						A		
						1		
			·			Ø		
	**********			~	A			

4b	(Code:) (Expens	2 202	Apoluding gray	ha of ¢) (7)		
		, (Experis		a including gran	IS 01 \$) (Revenue \$)

			-	<u> </u>				
	************			# 10				
				<i>j</i>				
			N. S. L.					

4c	(Code:	🔌) (Expens	s \$	including grant	s of \$) (Revenue \$		1
	**********							in and the

		***************************************		*				

1d		ram services (Describe	on Schedule C	0.)				
	(Expenses		including gra) (Revenue	\$)	
te	I otal progra	am service expenses	>	294,729		V		

Part IV Checklist of Required Schedules

	1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	_	Yes	N
			1	1.
	2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions.	1	_	+
	or garried of the ligage in unect of indirect political campaign activities on behalf of an in-	2	-	>
	The complete Schedule C Dad I			
1,00	4 Section 501(c)(3) organizations. Did the organization engage in labelian action	3	+-	X
	The starting allo tax year: If the complete Schedule C Dart II	4	1	
1	0.9dill.2dd0ii d 360([0]] 30 [[0](4], 3[][1(6)(5), or 5(1)(6)(6) organization that	-	+-	\vdash
	of difficulties as delified in Key Proc 98-102 if "Voc " complete 0-1 1 1 0 0 0 000	5	X	
	and or agricultural field ally dollor advised flinds or any similar funds are account of	1	+^	-
	The state of the s		1	
	, inplote contedute D, Falt I	6		X
	Did tile organization receive or hold a conservation except including	-	\vdash	^
8	"" AC " COMPLETE COMP	7		х
10.5	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Complete Schedule D, Part III.		\vdash	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	8		Х
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt			
	o			
10	bid the digarifization, directly or through a related organization hold assets in de-	9	X	
	" Jado ondownions: If Tes. Complete Schedule I) Day I			
11	if the organization's answer to any of the following questions is "Yes" then complete Sehedule D. D. 1.1.	10		X
1	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			Section 4.
		11-		
1	b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more	11a	X	
	Total account reported in Part A, line 10? If "Yes," complete Schedule D. Dart VIII	11 b		Х
	and an activity of the state of	110	-+	Λ
	The same description of the same services and the same services and same services are same services and same services and same services are same services and same services and same services are same services and same services and same services are same services are same services and same services ar	11c	- 1	X
-	reported in Part X, line 152 to 1975 an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
6	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		X
1	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			- 2000
12a	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		X
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.		T	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	12a		X
	" " Organization diswelled No to line 1/2 then completing Schedule D. Dorto VI and VII : I'-			
13	to the digalitzation a scripping the section 1/0/h/1/A/ii/2 If "Voc " as malete Cete 1.1.	12b		<u>X</u>
14a	The state of the United States of States of the United States of the Uni	13		X_
b	The trib of Saline allold light of dust consider the ventiles of Avnonces of more than \$10.000 f.	14a		<u>X</u>
	turiul alsing, business, investment and program service activities outside the United Chate-			
1141112011	or or of the standard at the standard of the s	115	Ι,	V
15	The are organization report on Fart IX. column (A) line 3 more than \$5,000 of grants as at a second	14b	-+-	<u>X</u>
10	I and IV	15	١,	X
16	Figure of garrication reposition raff (A. Column (A.) line 3 more than \$5,000 of occasionate and the second reposition raff (A.)			<u> </u>
17	assistance to or for foreign individuals? If "Yes." complete Schedule F. Parts III and IV	16)	X
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
18	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions. Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17	_ >	<
	I die viii, illies le dilu da! Il ves complete schedule C. Dort II			
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18	×	(
	If tes, complete Schedule G, Part III			
20a	Did the olderlike from the or more possible as it is a second to a little as the control of the	19	X	
b	If the LO line 20a, did the organization attach a copy of its sudited financial attachment in the	20a	×	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
	William (A) line 12 15 11/2 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	. templete estreado (, 1 anos tanon	21	X	_

Pa	rt IV Checklist of Required Schedules (continued)	-2 10000		Page .
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		\top	1
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	. 22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the		Т	T
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	. 23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			1
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines		1	
	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		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
54	to defease any tax-exempt bonds?	. 24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	. 24d		_
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
Ь	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part	. 25a	_	X
D	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		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from dispayables to any current	230	 	1
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			1
	controlled entity or family member of any of these persons? If "Yes," complete Schedule 1, Part II	. 26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	.		1
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	. 27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,		150116	
	Part IV, instructions for applicable filing thresholds, conditions and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If Yes," complete Schedule L, Part IV	. 28b		Х
¢	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-case contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	20		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part 1	. 31		X
32	Did the organization riquidate, terminate, or transfer more than 25% of its net assets? If "Yes,"	. 31		^
V.E.	complete Schedule N, Part II	32		х
33	Did the organization own 100% of arrentity disregarded as separate from the organization under Regulations	- J		
JJ	sections 301.7701-2 and 301.7701-3? If "Ves," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,	1		
	III, or IV, and Part V, line 1.	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
222	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	. 37		Х
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	- 31		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	. 38	х	
0		. 50		name plants
Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V		1	
	Check it schedule o contains a response of note to any line in this rate v		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	7	165	
1a	Critical dio richinosi reported in a single control of the control	-		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	. 1c	X	AND THE PARTY OF
	reportable garring (garrings) within 86 to buse with lets:	AND DESCRIPTION OF THE PARTY OF	000	2024

Form 990 (2021)

MEADOW LAKE AIRPORT ASSOCIATION

Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Schedule O. Schedule O contains a response or note to any line in this Part VI.	see in	struc	
Soc	tion A. Governing Body and Management			X
000	tion A. Governing body and management	- Contract	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or		21/12/20	Alberton Alberton
	if the governing body delegated broad authority to an executive committee or similar	201		1
	committee, explain on Schedule O.			P
b	Enter the number of voting members included on line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	18.08	Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 has filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
7a	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?		,	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a	X	-
	stockholders, or persons other than the governing body?	7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			v
C6	at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9	لـــا	X
Seci	ion B, Policies (This Section B requests information about policies not required by the Internal Revenue C	oae.	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Χ	
C		40-	v	
0.2020	describe on Schedule O how this was done	12c	X	~
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		
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.	15a		X
b	Other officers or key employees of the organization	15b		Х
E	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization investin contribute assets to, or participate in a joint venture or similar arrangement	16a		Χ
ĺn.	with a taxable entity during the year?	104	and the same	
b	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?	16b	And Manual And A	
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed CO			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 5	01(c)		
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
**	Own website Another's website X Upon request Other (explain on Schedule O)	CV		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy of the public during the try year.	y,		
20	and 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	>		
20	JEFF MOORE (719) 339-0928			
	13650 JUDGE ORR ROAD, PEYTON, CO 80831			

Form 990 (2021)	MEADOW LAKE AIRPORT ASS	OCIATION								7/0/0		04
Part VI	Compensation of Officers, Di		ees	Ke	v F	mn	love	OC.	Highort Com	74-2106	3395	Page
	Employees, and Independent Check if Schedule O contains a	Contractors										
Section A.	Officers, Directors Trustees	Key Employe	1010	o al	119 1	1110	ın ın	IS F	ant VII			Ш
the second name of the second na	his table for all persons required to be	listed. Report of	omp	ensa	tion	for	the c	om aler	pensated Em ndar year ending	ployees with or within the	e	
List all of compensation List all of List the who received in	of the organization's current officers, on. Enter -0- in columns (D), (E), and of the organization's current key emplorganization's five current highest coreportable compensation (box 5 of Fo the organization and any related organization and any related organization and any related organization.	loyees, if any. Sompensated emp	ee the	on wa e ins	as p	aid. tion	s for	defi	nition of "key em	nployee."		
List all o \$100,000 of re List all o organization, n See the instruc	of the organization's former officers, ke portable compensation from the organ of the organization's former directors oner than \$10,000 of reportable comp or the order in which to list the	ey employees, a nization and any or trustees that ensation from th persons above.	relat t rece ne org	ed o eived janiz	rgar I, in atio	niza the n ar	tions capa nd an	city y re	as a former dire lated organization	ctor or trustee of ons.	the	
A Check this	box if neither the organization nor an	y related organi	zatio	n cor	mpe	nsa	ted a	ny d	current officer, di	rector, or trustee	•	
	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box	, unle cer an	Pos heck ss pe	rson	e than o is both or/trust	an	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated of oth compens from t organizati related orga	amount ner sation he on and
(1) DAVID E	LUCTT	4		(i)	-		ated					i sali
PRESIDENT	LLIOIT	ļ	V	-	V							
(2) DAN JAC	QUOT		X	\vdash	Х	\dashv						
DIRECTOR			X									
(3) JEFF MC	OORE		-		Н	-		_				
TREASURER/S		TATE OF	X		x							
(4) HUNTER			1			\dashv						
DIRECTOR	<i>A</i>	707	X									
(5) JIM STEN	NARD					7					****	
(6) CARL BE	NDA		X	H	\dashv	-	-	\dashv				
VICE PRESIDE			Х		х		- 1					
(7) JEFF HU				H		\dashv	\dashv	\dashv				
DIRECTOR			х			1		- 1				
(8)					1	1						
(9)					7	7	\dashv	7				
(10)					\forall	1		1				-
(11)				\dashv	\dashv	1	+					
(12)			-	\dashv	\dashv	+	\dashv	+				
(13)				4	4	4	_					
7:2			- 1	- 1		- 1	- 1	- 1				

	Part VI Section A. Officers, Directors, Ti	rustees, Key Em	ploye	es,	an	d H	ighes	t C	ompensated Er	nployees (contin	ued)
					(C)		-1.7453			
	(A)	(B)	(do r	not ch		sition	e than o	ne	(D)	(E)	/E)
	Name and title	Average	box,	unles	ss pe	erson	is both	an	Reportable	Reportable	(F) Estimated amount
	•	hours per week			dad	lirect	or/trust	ee)	compensation from the	compensation from related	of other compensation
		(list any	Individual trustee or director	Institutional trustee	Officer	êy	digh	Former	organization (W-2/	organizations (W-2/	from the
		hours for related	rec	utlo	er	em	est	Jer	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
		organizations	9 17	nal t		doye	eom		1033-1120)	1099-1450)	reialed or dailizations
		below dotted line)	stee	ruste		8	pens				
				9			Highest compensated employee			6	
(15)				-	-		\vdash	-	A 4		
									The state of the s		
(16)										4	
(17)				-				_		9	war a di anno a superano a
Tritt											
(18)				+	\dashv			\dashv			
			1								
(19)				\neg	\neg	\neg	-				***************************************
_								1			
(20)	~~~~~				1						
(24)			\dashv		4	# I	-	4			
1411					0						
(22)			-	-	6	100	7	+			
		4		-	1	P					
(23)		4			F						2
10.4			48	_	-	4	-	4			
(24)			ľ	2	1			1			
(25)		A (+	\dashv	\dashv	\dashv	\dashv	\dashv			
1221.			7		-						
1b	Subtotal	. 6.6					'				
C	Total from continuation sheets to Part VII, Se	ection A	6 (W) (W)			. w		▶			
d	Total (add lines 1b and 1c)		_				<u>.</u> . !	>			
2	Total number of individuals (including but not lin		ed ab	ove) W	ho r	receiv	ed i	more than \$100,	,000 of	
	reportable compensation from the organization			-	-	-					Yes No
3	Did the organization list any former officer, dire	ctor trustee key	empl	ove	e. o	or hi	ahest	col	mpensated		
	employee on line 1a? If "Yes," complete Sched	ule J for such ind	ividua	al.							3 X
4	For any individual listed on line 1a, is the sum of	f reportable com	pensa	ation	an	d of	ther c	om	pensation from		
	the organization and related organizations great										
	individual					*					4 X
5	Did any person listed on line 1a receive or accre										
	for services rendered to the organization? If "Ye tion B. Independent Contractors	es," complete Scl	reduie	e J f	or s	such	pers	on .		<u> </u>	5 X
1	Complete this table for your five highest compe	nsated independ	ent co	ntra	acto	rs t	hat re	cei	ved more than \$	100,000 of	<u> </u>
•	compensation from the organization. Report cor	mpensation for th	e cal	enda	ar y	ear	endir	ng v	vith or within the	organization's ta	x year.
	(A)								(B)		(C)
	Name and business addr	ess					-		Description of servi	Ges Co	mpensation
Rhite G COMMISSION							\dashv				
						-	\dashv				
-		· · · · · · · · · · · · · · · · · · ·			-		\dashv				***************************************
College	to and the state of the state o		-	and the same of			+				
2	Total number of independent contractors (include	ding but not limite	d to t	hos	e lis	sted	abov	e) v	who received		
5000	more than \$100,000 of compensation from the							86			

COMPANIES OF	art V	ME BOTT BATE AIRT ORT ASSOCIA	ATION				74-2106	395 Page
	ait v				1+1501			11= 1-21-2
		Check if Schedule O contains a respons	e or no	te to any line	in this Part VIII			[]
. Annabas					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue exclude from tax under
\$	g 1	a Federated campaigns	1a					sections 512-514
Contributions, Gifts, Grants		L. Ularan Inno and P. C. Carriero	1b	137,232				
	일 ·	c Fundraising events	1c	101,202		The state of		Contract
ifts	۱ ا	d Related organizations	1d				4-50	1000000
s'	Ĕl '	e Government grants (contributions)	1e	470,813				
0	0	f All other contributions, gifts, grants, and						
pnq		similar amounts not included above	1f	4,962		4	* A 10.0 Miles	
THE C	5 5	Noncash contributions included in						
ပိ ခ	Ē ,	lines 1a-1f	1g \$		120		* *	
-	+-	Total. Add lines 1a-1f			613,007		V	
Se	22	1	-	Busiliess Code				Constant
Z g	b							
S	0							
Program Service	d				4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
90	е	· ·						
ā	1	All other program service revenue						
	g			▶				
	3	Investment income (including dividends, inter	rest, an	ıd 🤻				
	4	other similar amounts)		🔊	186			186
	5	Income from investment of tax-exempt bond p	procee					
	"	(i) Real		(ii) Personal				
	6a		na	(II) Personar				
	b		_	- 1				
	C		00		Arion State			
	d	Net rental income or (loss)		>	400		400	State of the state
	7a	ty decorned	1	(ii) Other			400	
		sales of assets		200	44.0		L	
41		other than inventory 7a	A	-				
Other Revenue	b	2000: 000t 01 04101 basis						
Ve	VIII	and sales expenses 7b				i cara e e		
S.	C	Gain or (loss) 7c						
her	d 8a	Net gain or (loss)		>				
ŏ	- ou	events (not including \$						
		of contributions reported on line 16).						
		See Part IV, line 18 8a	a					
	b	Less: direct expenses	_					
	C	Net income or (loss) from fundraising events .		1 200				
- 1	9a	Gross income from gaming activities.	T		5.61 3 3 3 2 -			
		See Part IV, line 19 9a	a		A State of the Sta		1000	
		Less: direct expenses 9t	0					
- 1		Net income or (loss) from gaming activities	<u> </u>				LINEYS WAS	Marie III
	iva	Gross sales of inventory, less returns and allowances						
- 1	b	The state of the s	_					
		Net income or (loss) from sales of inventory .		P				10000
s l		Tom sales of hiveritory.		siness Code				
@ e	11a	SALES TAX SERVICE REFUND	9000		3,601			3,601
Revenue		AWOS CDOT	9000	-	3,285			3,285
6		FUEL ASSESSMENT/LEASING	9000	The state of the s	6,278	201010		6,278
Revenue		All other revenue						0,210
A		Total. Add lines 11a-11d		>	13,164			Control of the second
	12	Total revenue. See instructions			626,757		400	13,350
			-			AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	700	10,000

13,350

400

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)

Do 8h	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
			expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
2	domestic governments. See Part IV, line 21			(* de la constant de	
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign		 		
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	***************************************			palestra de la companione de la companio
	trustees, and key employees		•		
6	Compensation not included above to disqualified			- CO	
•	persons (as defined under section 4958(f)(1)) and			À	2.
	persons described in section 4958(c)(3)(B)			F	
7	Other salaries and wages				
8	Pension plan accruals and contributions (include		<u> </u>		
	section 401(k) and 403(b) employer contributions)	n n			
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
a	Management	# #	*		-
þ	Legal	9 5,560	AND DESCRIPTION OF THE PERSON	***	
C	Accounting	2,390	2,390		
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	W	SELECTION OF THE OWNER.	contain the first terms	
f	Investment management fees	- All			
g	Other. (If line 11g amount exceeds 10% of line 25, column	D		-	
	(A), amount, list line 11g expenses on Schedule O.)	9			Name of the last o
12	Advertising and promotion	4 202	4 202		
13 14	Office expenses	1,282	1,282		
5	Royalties				
16	Occupancy				
17	Travel				**************************************
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	216,495	216,495		
23	Insurance	11,575	11,575		
4	Other expenses, Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column			The second secon	
	(A), amount, list line 24e expenses on Schedule O.)				
	PROPERTY TAXES	325	325		
	UTILITIES EFFAURCE	11,863	11,863		
C	REPAIRS & MAINTENANCE	42,961	42,961		
d	DUES, FEES, & LICENSES	28	2,250		
	All other expenses LAND SURVEY & APPRAISAL Total functional expenses. Add lines 1 through 24e	2,250 294,729	2,250		
5 6	Joint costs. Complete this line only if the	234,129	234,123		
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here				
			1		

	Part .				74-2106395 Page
-		Check if Schedule O contains a response or note to any line in this Part X			
			(A)	1	(B)
	1	Cash—non-interest-bearing	Beginning of year		End of year
	2	Savings and temporary cash investments .	8,87	_	31,0
	3	Pledges and grants reasonable	130,993	3 2	31,1
	4	Pledges and grants receivable, net .		3	
	5	Accounts receivable, net .		4	
		Loans and other receivables from any current or former officer, director,			
	1	trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		4	
	6	Loans and other receivables from other disqualified persons (as defined		5	
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			
Assets	7	Notes and loans receivable, net .		6	
SSE	8	Inventories for sale or use		7	
4	9	Prepaid expenses and deferred charges		8	
	10a	Prepaid expenses and deferred charges		9	
		Other basis Complete Double 50 1 11 -			
	b	lace: accumulated description			
	11	Less: accumulated depreciation	9,091,103	10c	9,810,77
	12	Investments—other securities. See Part IV, line 11		11	
	13	Investments—program-related Coc Do-t IV III		12	
	14	Intangible assets . Other assets See Part IV line 11		13	
	15	and the second distremental to the second district distri	101	14	
	16	Total assets. Add lines 1 through 15 (must equal line 33) .	464	15	46
	17	Total assets. Add lines 1 through 15 (must equal line 33) . Accounts payable and accrued expenses . Grants payable . Deferred reviews	9,231,432	16	9,873,45
	18	Grants payable		17	
	19	Deferred revenue		18	
	20	Tax-exempt bond liabilities	5,234,368	19	4,873,537
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		20	
68	22	Loans and other payables to any current or former officer, director,		21	
		trustee, key employee, creator or founder, substantial contributor, or 35%			
rabilities	4.556.5	controlled entity or family member of any of these persons			
-	23	Secured mortgages and notes payable to unrelated third parties		22	
-	24	Unsecured notes and loans payable to unrelated third parties		23	659,912
- 1	25	Other liabilities (including federal income tax payables to related third		24	
- 1		parties, and other liabilities not included on lines 17–24) Complete		- 1	
- 1		Part X of Schedule D		25	
_	26	Total liabilities. Add lines 17 through 25.	5,234,368		
B		Organizations that follow FASB ASC 958, check here ▶	3,234,308	26	5,533,449
2		and complete lines 27, 28, 32, and 33.			
2	27	Net assets without donor restrictions			
	28	Net assets with donor restrictions		27	- Kraman Washington
		Organizations that do not follow FASB ASC 958, check here		28	
		and complete lines 29 through 33.	5-10-10-10-10-10-10-10-10-10-10-10-10-10-		
	29	Capital stock or trust principal or current funds			
		The same of the sa		29 30	
	31	Retained earnings, endowment, accumulated income or other funds		31	4,340,005
	32	lotal net assets or fund balances		32	4,340,005
1	33	Total liabilities and net assets/fund balances .		33	9,873,454

Check if Schedule O contains a response or note to any line in this Part XI. 1 Total revenue (must equal Part VIII, column (A), line 12). 1 Total revenue (must equal Part VIII, column (A), line 25). 2 Total expenses (must equal Part IX, column (A), line 25). 3 Revenue less expenses. Subtract line 2 from line 1. 3 332,028 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)). 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)). 5 Net unrealized gains (losses) on investments. 6 Donated services and use of facilities. 7 Investment expenses. 8 Prior period adjustments. 9 Other changes in net assets or fund balances (explain on Schedule O). 9 Other changes in net assets or fund balances (explain on Schedule O). 9 Other changes in net assets or fund balances (explain on Schedule O). 9 Other changes in net assets or fund balances (explain on Schedule O). 9 Other changes in net assets or fund balances (explain on Schedule O). 9 Other changes in net assets or fund balances (explain on Schedule O). 9 Other changes in net assets or fund balances (explain on Schedule O). 9 Other changes in net assets or fund balances (explain on Schedule O). 9 Other changes in net assets or fund balances (explain on Schedule O). 9 Other changes in net assets or fund balances (explain on Schedule O). 9 Other changes in net assets or fund balances (explain on Schedule O). 9 Other changes in net assets or fund balances (explain on Schedule O). 9 Other changes in net assets or fund balances (explain on Schedule O). 9 Other changes in net assets or fund balances (explain on Schedule O). 10 Net assets or fund balances are not of the schedule O other lift the organization changed it method of accounting from a prior year or checked "Other, explain on Schedule O. 2 Other Changes are not of the schedule O other lift the organization changed ithe method of accounting from a prior year or checked "Other, explain on Schedule O. 2 Other changes in the schedule of the sched	Form	990 (2021) MEADOW LAKE AIRPORT ASSOCIATION	74-2106395	Page 12
Total revenue (must equal Part VIII, column (A), line 12).	Par	t XI Reconciliation of Net Assets		
2 2 294,729 3 Revenue less expenses. Subtract line 2 from line 1 3 3 332,028 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)). 4 3,937,064 5 Net unrealized gains (lossee) on investments. 5 6 Donated services and use of facilities. 6 7 Investment expenses. 7 7 Prior period adjustments. 8 10,913 9 Other changes in net assets or fund balances (explain on Schedule O). 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)). 9 11 Accounting method used to prepare the Form 990:		Check if Schedule O contains a response or note to any line in this Part XI		
Revenue less expenses. Subtract line 2 from line 1	1	Total revenue (must equal Part VIII, column (A), line 12)		626,757
Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)). Net unrealized gains (losses) on investments. Donated services and use of facilities. Donated services and use of facilities. Prior period adjustments. Prior period adjustments. Other changes in net assets or fund balances (explain on Schedule O). Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)). Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII. Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII. If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? Za	2	Total expenses (must equal Part IX, column (A), line 25)		294,729
Net unrealized gains (losses) on investments. Donated services and use of facilities. Prior period adjustments. Prior period adjustments. Other changes in net assets or fund balances (explain on Schedule O). Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)). Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII. Accounting method used to prepare the Form 990: X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? 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: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b X 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: Separate basis Consolidated basis, or both: If the organization changed either its oversight process or selection of an independent accountant? 2c 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? If the organization changed either its oversight process or selection of an independent accountant? 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? By It the organizati	3			332,028
Net unrealized gains (losses) on investments. Donated services and use of facilities. To Investment expenses. Prior period adjustments. Prior period adjustments. Other changes in net assets or fund balances (explain on Schedule O). Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)). Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII. The organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. Accounting method used to prepare the Form 990: X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? Period on a separate basis, consolidated basis. In Both consolidated and separate basis. Were the organization's financial statements audited by an independent accountant? Period on a separate basis on the consolidated basis or both: Separate basis. Consolidated basis. Both consolidated and separate basis. If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. Consolidated basis. Both consolidated and separate basis. 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? If the organization changed either its oversight process of selection process during the tax year, explain on Schedule O. As a result of a federal award, was the organization required to undergo an audit or eudits as set forth in the Single Audit Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits, explain why on Schedule, O and describe any steps taken to undergo such audits. Separate basis or selection of an audit o	4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	3	,997,064
7 Investment expenses . 7 8 Prior period adjustments . 8 10,913 9 Other changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) . 4,340,005 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	5			
8 Prior period adjustments. 8 10,913 9 Other changes in net assets or fund balances (explain on Schedule O). 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)). 4,340,005 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990: X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 1	6			-
9 Other changes in net assets or fund balances (explain on Schedule O). 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)). 10 Veral XIII Financial Statements and Reporting 11 Check if Schedule O contains a response or note to any line in this Part XIII Yes No 12 Net organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X If "Yes," check a box below to indicate whether the financial statements for the year were campiled or reviewed on a separate basis, consolidated basis Both consolidated and separate basis 2b Were the organization's financial statements audited by an independent accountant? 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Both consolidated and separate basis c 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: Separate basis Consolidated 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? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits, explain why on Schedule O on and describe any steps taken to undergo such audits. 3b		involution experies e	THE RESIDENCE OF THE PERSON NAMED IN COLUMN	
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)). 4,340,005 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990:		Thorportogrammation		10,913
Column (B))				
Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? . 2a X 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: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? . 2b X 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: Separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 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 of selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain on such audits or sudits. 3b	10			340.005
Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: X Cash	1		7	,040,000
Accounting method used to prepare the Form 990: X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b X 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: Separate basis Consolidated basis, or both: Separate basis Consolidated basis fieth 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? If the organization changed either its oversight process of selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 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 on Schedule O and describe any steps taken to undergo such audits. 3b	Pan			П
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the audit, review, or compilation of its financial statements and selection of an independent accountant?	c			
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the Single Audit Act and OMB Circular A-133?		Schedule O.		
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 on Schedule O and describe any steps taken to undergo such audits.	3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		
required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		the Single Audit Act and OMB Circular A-133?	<u>3a</u>	^
required audit or audits, explain why on Schedule O and describe any steps taken to undergo such addits 30	b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	26	
		required audit or audits, explain why on Schedule Cand describe any steps taken to undergo such addits	THE RESERVE OF THE PARTY OF THE	190 (2021)

Form 4562

Department of the Treasury Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information

OMB No. 1545-0172

2021

Sequence No. 179

Name(s) shown on return Business or activity to which this form relates Identifying number MEADOW LAKE AIRPORT ASSOCIATION 990 XX-XXX6395 Part Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 2 Total cost of section 179 property placed in service (see instructions). . 2 Threshold cost of section 179 property before reduction in limitation (see instructions). 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 10 Carryover of disallowed deduction from line 13 of your 2020 Form 4562. 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 13 Carryover of disallowed deduction to 2022. Add lines 9 and 10, less line 12 ▶ 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 Property subject to section 168(f)(1) election . . . 15 16 Other depreciation (including ACRS) MACRS Depreciation (Don't include listed property. See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2021 17 216,495 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2021 Tax Year Using the General Depreciation System bns rtinoM (d) (c) Basis for depreciation (d) Recovery (a) Classification of property year placed (business/investment use (e) Convention (f) Method (g) Depreciation deduction period only—see instructions) in service 19 a 3-year property b 5-year property 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs. MM S/L h Residential rental 27.5 yrs. MM property 27.5 yrs. SIL 560,000 MM 8.988 5/18/2021 S/L i Nonresidential real 39 yrs. SA property Section C - Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System 20 a Class life S/L b 12-year 12 yrs. 30 yrs. MM S/L c 30-year MM S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 225,483 here and on the appropriate lines of your return. Partnerships and S corporations—see instructions. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

POH	4562 (2021)			MEAD	OW LAKE A	AIRPOP	RT ASS	CIATION	J		XX-XX	X6305	D
Pai	tV Lis	sted Property (I	nclude automo	biles, certain	other veh	icles, c	certain	aircraft,	and pro	perty	used f	or	Page .
	ent	tertainment, recr	eation, or amu	isement.)					A				
	No	te: For any vehicle	for which you a	re using the sta	ndard milea	ge rate	or ded	ucting leas	se expe	nse. co	mplete	only 24a	2.
		o, columns (a) throi										•	
		on A-Depreciatio							or passe	enger at	ıtomob	iles.)	
248	Do you have ev	idence to support the l	business/investmer	nt use claimed?	Yes	No	24b	If "Yes," is	the evid	lence wr	itten?	Yes	No
	(a)	(b)	(c)	(d)	(e)		(1)		(g)	T	(h)	T	(i)
	Type of property	Date placed	Business/ investment use	Cost or other basis	Basis for depr (business/ inv	estment	Recove	ery M	ethod/	Depri	eciation	Elected	section 179
	(list vehicles first)	in service	percentage	l	use on		period	Con	vention	ded	uction		cost
25		eciation allowance		2 2 3 3		1.5							
20		and used more than			se. See inst	ructions	<u> </u>	• • •	25				
26	Property used	d more than 50% in	n a qualmed bus	7								T	
-			%						À	Allegado		 	
			%				-			 	chickens (except	+	
27	Property used	d 50% or less in a		is use:					7			٠	
		T	%	T				SIL		T		- 12	
			%	30		Δ		S/L-	*				
			%				7	S/L -					editoria e v
28		in column (h), line						400000	28				
29	Add amounts	in column (i), line :	26. Enter here a	nd on line 7, pa	ge 1			<i>All.</i> .			29		English Committee
				ion B—Inform	500	0 - 0 - 3							
		for vehicles used by										es	
to yo	ur employees, firs	st answer the question	ons in Section C to		100	n to com	Access		N. A.			Т	10
30	Total business	linera abuna mbunaila a shaf	on maderation as	(a) Vehicle 1	(b) Vehicle 2		(c) Vehicle 3	1	(d) nicle 4	The second of the	e) icle 5	5 11	(f) nicle 6
30		'investment miles dri include commuting		A	*								
31	upper tribling 1991	ng miles driven during	10			+				1		-	
32		sonal (noncommuting	2 3	A)T		\neg		\neg			**		
	The state of the s										AND THE RESERVE TO THE TANKS		
33		en during the year.	Add		4								
		h 32											
34	Was the vehicle	e available for person	nal 🤚	Yes No	Yes N	o Y	es N	Yes	No	Yes	No	Yes	No
	use during off-	duty hours?	🉈										
35	Was the vehicle	e used primarily by a	more than				1						
		lated person?	2990000C ANTONIO			-						-	
36	Is another vehic	cle available for pers	onal use?					- her Thesi	- Fml				
		Section C-	Questions for I	mployers Who	o Provide v	enicles	for us	e by inei	r Emple	yees	ho aro	n4	
Ansv	ver these quest	ions to determine it	r you meet an e	cepuon to com	pletting Sec	טו פ ווטנ	o vernor	es useu d	y empic	yccs w	ilo ai e		
37		n a written policy sta			ise of vehicle	s includ	ling com	muting, by				Yes	No
W 1	your employees		A.	ons an personal e									
38		n a written policy sta	tement that prohi	oits personal use	of vehicles.	except o	ommutin	g, by your					
-	employees? Se	e the instructions fo	r vehicles used by	corporate office	rs, directors,	or 1% o	r more o	wners .			,		
39	Do you treat all	use of vehicles by a	mployees as pers	sonal use?									
40	Do you provide	more than five vehic	les to your emplo	yees, obtain info	rmation from	your en	nployees	about the					
	use of the vehic	cles, and retain the li	nformation receive	ed?									
41	Do you meet th	ne requirements cond nswer to 37, 38, 39,	erning qualified a	utomobile demo	nstration use	? See in	struction	s des	300 SE 10		5 5		
Don	Market Market Contraction	ortization	40, 07 41 IS TES,	don't complete s	Section D for	the cove	ored veri	0.00.					
Pari	VI AIII			(b)	T	(c)	T	(d)	T	(e)		T	(f)
	г	(a) Description of costs		Date amortization		ble amou	nt Co	de section	1 '	Amortizatio period or		1	n for this year
		rescription or costs		begins	, ,,,,,,,,,,,	210 411104				percentage			
42	Amortization of	of costs that begins	during your 20	21 tax year (see	instruction	s):							A STATE OF THE STA
	CLOSING COS		Y.A.	5/18/2021		8,7	704			20.0			290
			Security Sec										
43	Amortization of	of costs that began	before your 202	21 tax year .							43		425,282
44	Total. Add arr	nounts in column (f). See the instru	ctions for where	e to report			<u></u>			44	<u></u>	425,572

SCHEDULE C (Form 990)

Department of the Treasury

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Internal Revenue Service If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If th	e organization answered ' oxy Tax) (See separate ins	"Yes," on Form 990, Part IV, line 5 (Protructions), then	oxy Tax) (See sepa	rate instructions) or Form 9	90-EZ, Part V, line 35c		
					> 4		
Nan	ne of organization	organizations: Complete Part III.					
	ADOW LAKE AIRPORT A	MAITAIOOSA		Employ	er identification number		
Do.	rt I A Complete if	the examination is asset to	J	,	74-2106395		
1	Provide a description of	the organization is exempt un	der section 501	(c) or is a section 527	organization.		
	definition of "political car	the organization's direct and indirect	political campaign	activities in Part IV. See ins	structions for		
2				A			
3	Voluntaer haura for maliki	ty expenditures. See instructions		▶ \$			
Charles with	rt I-B Complete if	ical campaign activities. See instruction	ons	<u> </u>			
1	Enter the employed from	the organization is exempt und	der section 501	(8)(3).			
2	Cate the amount of any	excise tax incurred by the organization	on under section 4	955 ▶ \$			
	Enter the amount of any	excise tax incurred by organization n	nanagers under se	ction 4955 > \$			
3	if the organization incurr	ed a section 4955 tax, did it file Form	4720 for this year	?	. Yes No		
4a	VVas a correction made?				Yes No		
110000	If "Yes," describe in Part				200		
Pa	rt I-C Complete if	the organization is exempt und	der section 501	(c), except section 501	(c)(3).		
1	Enter the amount directly	y expended by the filing organization	for section 527 exe	empt function			
				▶ \$			
2	Enter the amount of the filing organization's funds contributed to other organizations for section						
	527 exempt function activities						
3	Total exempt function ex	penditures. Add lines 1 and 2. Enter I	here and on Form	1120-POL.			
	line 17b						
4	Did the filing organization	n file Form 1120-POL for this year? .			. Yes No		
5		ses and employer identification numb					
	organization made paym	ents. For each organization listed, en	ter the amount pai	d from the filing organization	n's funds. Also enter		
	the amount of political co	intributions received that were prompt	tly and directly deli	vered to a separate politica	organization, such		
	as a separate segregated	d fund or a political action committee	(PAC). If additiona	I space is needed, provide i	nformation in Part IV.		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political		
	1.	Social State of the Control of the C		filing organization's	contributions received and		
		MA		funds. If none, enter -0	promptly and directly delivered to a separate		
					political organization. If		
					none, enter -0		
(1)							
(2)							
-/							
(3)							
4)							
5)							
6)							

MEADOW LAKE AIRPORT ASSOCIATION 74-2106395 Schedule C (Form 990) 2021						
CONTRACT			41 1/01 1811-	1 F F700 /-l	Page	
P		n is exempt under section 50	1(c)(3) and filed	a Form 5/68 (elec	tion	
	under section 501(h)).					
A	Check ▶ if the filing organization be	longs to an affiliated group (an	d list in Part IV	each affiliated grou	ıp member's	
	name, address, EIN, expenses, and share of excess lobbying expenditures).					
В	B Check ▶ if the filing organization checked box A and "limited control" provisions apply.					
	Limits on Lobby (The term "expenditures" me	ying Expenditures eans amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals	
1a	Total lobbying expenditures to influence publ	lic opinion (grassroots lobbying).				
b	Total lobbying expenditures to influence a leg	gislative body (direct lobbying)				
C	Total lobbying expenditures (add lines 1a and	d 1b)		Bas A		
d	Other exempt purpose expenditures			A TOP TO SERVICE AND A SERVICE		
е	Total exempt purpose expenditures (add line					
f	Lobbying nontaxable amount. Enter the amount					
	columns.					
I	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amoun	nt is:			
	Not over \$500,000 20% of the amount on line 1e.					
- 1	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000					
1	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.					
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$4,500,000.					
	Over \$17,000,000	\$1,000,000.			Marie Committee	
g	Grassroots nontaxable amount (enter 25% of	f line 1f)				
h	Subtract line 1g from line 1a. If zero or less, e	enter -0				
i	Subtract line 1f from line 1c. If zero or less, e					
1	If there is an amount other than zero on eithe	er line 1h or line 1i, did the organiza	tion file Form 472	7 reporting		
-	section 4911 tax for this year?				Yes No	
		ear Averaging Period Under Sect	ion 501(h)			
	(Some organizations that made a sec			f the five columns I	pelow.	
		separate instructions for lines 2				
	002 070	. Jupanate menuene	<u>-</u>			
	Lobbying	g Expenditures During 4-Year Av	eraging Period			
		4 4 1				
	Calendar year (or fiscal year	(a) 2018 (b) 2019	(c) 2020	(d) 2021	(e) Total	
	beginning in)					
-					A STATE OF THE PARTY OF THE PAR	
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					

Schedule C (Form 990) 2021

d Grassroots nontaxable amount

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990) 2021

	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(8	a)	Γ	(b)	
des	cription of the lobbying activity.	Yes	No		Amou	-
1	During the year, did the filing organization attempt to influence foreign, national, state, or local					
	legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of:		100			
a					-	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	- %	_			
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications or published or broadent statement of		100 W			
f	Grants to other organizations for lobbying purposes?	1			******	
g	and delivery and delivery government officials, of a leutstative ponty				***************************************	
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
a	Total. Add lines 1c through 1i. Did the activities in line 1 cause the agreement to the second of t					
b	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
C	If "Yes," enter the amount of any tax incurred under section 4912					
d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.					
15000	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(a) 4) section 501(a) 4)					
	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	:)(5),	or se	ection		
					Yes	N
	Were substantially all (90% or more) dues received nondeductible by members?			1	X	\vdash
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	X	
	The description of the second			2	1	
NAC ASSESSED.	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year	2		2		X
irt	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior yea	r?		3		-
NAME OF TAXABLE PARTY.	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Of	r?		3		3, is
rt	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Olanswered "Yes."	r?		3		-
ırt	Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Of answered "Yes." Dues, assessments and similar amounts from members	r?		3		-
rt	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Of answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of	r? e)(5), c R (b)	or se Part	3		-
	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Of answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	r? e)(5), « R (b)	or se Part	3		-
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	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Of answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. Carryover from last year. Total. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of pondeductible.	r? (5), (5), (6)	or se Part 1 2a 2b 2c	3		
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MEADOW LAKE AIRPORT ASSOCIATION 74-2106395 Schedule C (Form 990) 2021 Page 4 Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name	e of the organization	Employer identification number
MEA	ADOW LAKE AIRPORT ASSOCIATION	74-2106395
Par		
- 41	Complete if the organization answered "Yes" on Form 990, Part IV	liar Funds of Accounts.
-	(a) Donor advised funds	
1	Total number at end of year	(b) Funds and other accounts
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 that the asse	s held in donor artificed
	funds are the organization's property, subject to the organization's exclusive legal	control? Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that	at grant frings can be used
	only for charitable purposes and not for the benefit of the donor or donor advisor,	or for any other nurnose
	conferring impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·
Par	Conservation Easements.	· · · · · · · · · · · · · · · · · · ·
	Complete if the organization answered "Yes" on Form 990, Part IV,	lina 7
1	Purpose(s) of conservation easements held by the organization (check all that approximately the conservation conservation)	1.0
	Preservation of land for public use (for example, recreation or education)	ply).
		servation of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation cor	tribution in the form of a conservation
	easement on the last day of the tax year.	Held at the End of the Tax Year
a		2a
b		2b
C	The second of th	2c
d	the state of the s	RECORDS
3	historic structure listed in the National Register	<u> 2d </u>
9	Number of conservation easements modified, transferred, released, extinguished the tax year	or terminated by the organization during
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, ins	pootion handling of
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and en	
1.00	handling of violations, and en	forcing conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforci	an consorvation encoments during the year
8	S	ig conservation easements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the required	ments of section 170/b\/d\/R\/i\
	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its r	
	balance sheet, and include, if applicable, the text of the footnote to the organization	
	organization's accounting for conservation easements.	
Part	t III Organizations Maintaining Collections of Art, Historical Treasu	res, or Other Similar Assets
	Complete if the organization answered "Yes" on Form 990, Part IV,	line 8.
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition,	
	public service, provide in Part XIII the text of the footnote to its financial statement	
b	If the organization elected, as permitted under FASB ASC 958, to report in its reve	
	works of art, historical treasures, or other similar assets held for public exhibition,	education, or research in furtherance of
	public service, provide the following amounts relating to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1	▶ \$
	(ii) Assets included in Form 990, Part X	> \$
2	If the organization received or held works of art, historical treasures, or other simil	ar assets for financial gain, provide the
	following amounts required to be reported under FASB ASC 958 relating to these	items:
a	Revenue included on Form 990, Part VIII, line 1	, > \$
h	Assets included in Form 990, Part Y	

Sched	dule D (Form 990) 2021 MEADOW LAKE AI	RPORT ASSOCIA	NOITA				74-210	3395		Page 2
Par	t III Organizations Maintaining C	ollections of A	rt, Histo	orical Tre	easures, or	Other S	Similar Asset	s (cont	inued)
3	Using the organization's acquisition, ac									
	collection items (check all that apply):			_			5/			
a	Public exhibition		d	Loan o	r exchange p	rogram				
b	Scholarly research		eГ	Other						
			- L	7 00.00	4 1 1 m m 4 4 1 m m m 4 1 1 1 1 1	~ 0 0 % ^ 0 0 0 0	~~~~~~~~~~			
C	Preservation for future generations							140 TIES		
4	Provide a description of the organization XIII.	n's collections and	explain h	now they f	urther the org	anization	i's exempt purpo	se in P	art	
5	During the year, did the organization so assets to be sold to raise funds rather the							□ Y	es	No
Part	IV Escrow and Custodial Arrang					4	Les A			
7	Complete if the organization ar 990, Part X, line 21.	nswered "Yes" o	n Form	990, Par	t IV, line 9,	or report	ted an amount	on Fo	rm	
1a	Is the organization an agent, trustee, cu	stodian or other in	termedia	ry for cont	ributions or o	ther asse	its not			
	included on Form 990, Part X?							□ Y	es X	No
b	If "Yes," explain the arrangement in Par	t XIII and complete	e the follo	wing table	:					
							P	mount		
C	Beginning balance					1c				
d	Additions during the year					1d	-			
e	Distributions during the year					1e	 			
1020	Ending balance					8	-t E-L'ELO	Пу	es X	No
2a	Did the organization include an amount			-	100				25	ן ועט ו
b	If "Yes," explain the arrangement in Part	AIII. Check here	ir tine exp	isusaeti u	as peen provi	ded on P	artviii			
Part		1107 0		4	*					
	Complete if the organization ar							1		
	 -	(a) Current year	(b) Pr	or year	(c) Two years	back (d) Three years back	(e) Fo	our years	back
1a	Beginning of year balance			h.		-+		+		
b	Contributions			<u> </u>	<u> </u>	-+				-
C	Net investment earnings, gains,	M	4							
d	and losses	A						 		
e	Other expenditures for facilities					$\neg \neg$		 		
	and programs		als.						-1974 - Vince - 10	
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the	current year end	balance (line 1g, co	olumn (a)) hel	d as:				
a	Board designated or quasi-endowment	\	%							
b	Permanent endowment	%								
C										
	The percentages on lines 2a, 2b, and 2c	should equal 100	1%.							
3a	Are there endowment funds not in the po	ossession of the o	rganizatio	on that are	held and adr	ninistere	d for the		Yes	No
	organization by:							20/3	165	No
	(i) Unrelated organizations		940 360 960 0					3a(i) 3a(ii)		
	(ii) Related organizations	onizatione lieted a	e require	d on Sche	dule R?			3b		
ь 4	Describe in Part XIII the intended uses of	of the organization	's endow	ment fund	S					
Part	VI Land, Buildings, and Equipm	ent.								
Labora Policiano	Complete if the organization ar	swered "Yes" o	n Form 9	990, Part	IV, line 11a	. See F	orm 990, Part	X, line	10.	
	Description of property	(a) Cost or ot		57/55	or other basis	St. Property of	ocumulated	(d) B	ook valu	é
	94.	(investm	ent)	(other)	dep	preciation			
1a	Land				5,599,604	Magamir			-	99,604
b	Buildings				563,168		12,156		55	51,012
C	Leasehold improvements	•							***************************************	0.500
d	Equipment			-	271,387		261,864		366	9,523 50,639
е	Other	<u>. </u>	O Dody	column /	6,233,045		2,002,400			10,778
lotal	. Add lines 1a through 1e. (Column (d) me	ust equal FORM 99	u, ran A,	Joinin (e/, mile 100./			_		

Part VII Investments—Other Securities.		74-2106395 Page
Complete if the organization answere	d "Yes" on Form 990	Part IV, line 11b. See Form 990, Part X, line 12.
(including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) (B)	-	
(C)	-	
(D)		
(E)		
(F)		
(G)	-	
(H)	*	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) . I	>	
Part VIII Investments—Program Related.		
Complete if the organization answered	l "Yes" on Form 990,	Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		and of year marker value
(2)		
(3)		
(4)	•	
(5)		
(6)	\$ N	
(7)		
(8)		
(9)		
otal. (Column (b) must equal Form 990, Part X, col. (B) line 13.). Part IX Other Assets.		
	"Vee" on Form 990 I	Part IV, line 11d. See Form 990, Part X, line 15.
(a) Desci	riotion Transfer of the Sale, I	
(1)		(b) Book value
(2)		
(3)	N	
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(5)		
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(8)		
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otal. (Column (b) must equal Form 990, Part X, col. (B) li	ine 15.)	· · · · · · · · · · · · •
Part X Other Liabilities. Complete if the organization answered '	"Yes" on Form 990. F	Part IV, line 11e or 11f. See Form 990, Part X,
line 25.	* 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1	, , , , , , , , , , , , , , , , , , , ,
	tion of liability	(b) Book value
1) Federal income taxes		
(2)		
3)		
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77)		
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vtal. (Column (b) must equal Form 990, Part X, col. (B) lii	ne 25)	
Liability for uncertain tax positions. In Part XIII, provide the tex		rapiration's financial statements that some 4.46
ganization's liability for uncertain tax positions under FASB AS	C 740. Check here if the to	ext of the footnote has been provided in Part XIII .

Schedule D (Fo	orm 990) 2021 MEADOW LAKE AIRPORT ASSOCIATION	74-2106395 Page 5
Part XIII	Supplemental Information (continued)	

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# SCHEDULE O

Department of the Treasury

Name of the organization

#### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Employer identification number

74-2106395 MEADOW LAKE AIRPORT ASSOCIATION Form 990, Part IV, Section A, Line 6: THE CORPORATION HAS 2 CLASSES OF MEMBERSHIPS - REGULAR MEMBERS AND RECREATIONAL MEMBERS. REGULAR MEMBERS SHALL BE INDIVIDUALS, COMPANIES, OR ASSOCIATIONS OF ANY KIND WHO OWN REAL ESTATE AT THE AIRPORT. THERE SHALL BE ONE MEMBERSHIP PER REAL ESTATE PARCEL. MEMBERSHIP BECOMES EFFECTIVE ON THE DATE OF PURCHASE PECREATIONAL MEMBERS SHALL BE THOSE PERSONS, COMPANIES, OR ORGANIZATIONS WHICH PURCHASE FUEL OR PURCHASE GOODS OR SERVICES FROM ANY MEMBER OF THE MEADOW LAKE AIRPORT ASSOCIATION ON THE MEADOW LAKE AIRPORT. RECREATIONAL MEMBERS SHALL HAVE NO VOTE BUT SHALL HAVE ALL RIGHTS IN REGARDS TO THE ASSOCIATION AFFORDED TO THE GENERAL PUBLIC. Form 990, Part VI, Section A, Line 7A: ALL REGULAR MEMBERS SHALE BE ENTITLED TO VOTE AND EVERY REGULAR MEMBER SHALL BE ENTITLED TO 1 VOTE FOR EACH FULL \$100 OF TAXABLE VALUATION OF PROPERTY WITHIN THE PROPERTY BOUNDARY OF THE MEADOW LAKE AIRPORT. THERE IS CUMULATIVE VOTING FOR DIRECTORS. THERE SHALL BE NO OTHER CUMULATIVE VOTING. Form 990, Part VI, Section A, Line 7B: THE MEMBERS WILL APPROVE A PROPOSAL OF DISSOLUTION MADE BY THE BOARD OF DIRECTORS. MEMBERS HOLDING NOT LESS THAN 1/10TH OF THE TOTAL NUMBER OF VOTES OF THE ASSOCIATION MAY CALL A SPECIAL MEETING OF THE MEMBERS. Form 990, Part VI, Section B, Line 11B: THE FORM 990 IS PROVIDED TO THE BOARD OF DIRECTORS AND MEMBERS PRIOR TO ITS FILING. A CORY OF THE FINAL VERSION IS PROVIDED TO THE APPOINTED OFFICER FROM THE RETURN PREPARER WHO THEN DISTRIBUTES THE COPY TO THE DIRECTORS. Form 990, Part VI, Section B, Line 12C: ANNUAL REVIEW OF BOARD MEMBERS DISCLOSURE IS REQUIRED. Form 990, Part VI, Section B, Line 15: NO COMPENSATION PAID TO OFFICERS. ALL ARE VOLUNTEERS Form 990, Part VI, Section C, Line 19: THE COMPANY'S BYLAWS RULES AND REGULATIONS AND ARTICLES OF INCORPORATION ARE AVAILABLE ON THE WEBSITE. THE MINUTES OF THE DIRECTORS' MEETINGS ARE POSTED ON THE WEBSITE AFTER THE MEETINGS. THE FINANCIAL STATEMENTS AND OTHER GOVERNING DOCUMENTS ARE AVAILABLE AT THE MEETINGS OF THE MEMBERS AND/OR DIRECTORS. THEY ARE ALSO

AVAILABLE BY REQUEST

Schedule O (Form 990) 2021	Page
Name of the organization	Employer identification number
MEADOW LAKE AIRPORT ASSOCIATION	74-2106395
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Summary of Unadjusted Basis of Qualified Property (4562)

12/31/2021

Summary of Qualified Property by Activity

	A - 45 - 74	Unadjusted
1	Activity 990	ost or Basis 4,480,593

Detail of Qualified Property

	Activity	Asset Description	Date In Service	Recovery Period	Years in Service	Total Cost or Basis	Business/Time Use Percent	Unadjusted Cost or Basis
2	990	V 10-80 SWEEPER/MOWER/S	7/16/2015	7.0	7	3,500	100.00%	3,500
3	990	V 10-81 1997 TRACTOR CSE	8/22/2016	7.0	6	20,000	100.00%	20,000
4	990	V 10-82 2004 CHV 2500	8/22/2016	7.0	6	8,000	100.00%	8,000
5	990	V 10-74 MOWER	4/13/2012	7.0	10	6,000	100.00%	6,000
6	990	V 10-75 CRACK SEAL MACH	4/13/2012	5.0	10	8,000	100.00%	8,000
7	990	V 10-83 2005 RHO MOWER	8/22/2016	5.0	6	5,000	100.00%	5,000
8	990	R 75-51 RUNWAY UPGRADE	8/15/2006	25.0	16	154,456	100.00%	154,456
9	990	R 75-71 ENGINEERING FOR	12/31/2012	15.0	10	66,038	100.00%	66,038
10	990	R 75-72 PAVING	9/30/2013	15.0	9	657,969	100.00%	657,969
11	990	R 75-73 FENCING	3/31/2013	15.0	/9	65,504	100.00%	65,504
12	990	R 75-77 FENCING	12/10/2012	15.0	/ 10	139,787	100.00%	139,787
13	990	R 87-79 BRAVO LOOP RUNV	4/1/2014	15.0	8	87,266	100.00%	87,266
14	990	R RUNWAY REHAB DESIGN	5/27/2019	15.0	\ 3	289,564	100.00%	289,564
15	990	R RUNWAY REHAB MGMT 2	8/2/2019	15.0	3	298,737	100.00%	298,737
16	990	R RUNWAY REHAB 2019	9/4/2019	25.0	_ 3	2,033,764	100.00%	2,033,764
17	990	V 2020 STATE AUCTION VEH	9/9/2020	7.0	12	3,200	100.00%	3,200
18	990	R RUNWAY REHAB MGMT 2	1/21/2020	15.0	2	73,808	100.00%	73,808
19	990	UBI RE - AM AV BLDG	5/18/2021	39.0	41	560,000	100.00%	560,000



Form 4562 Statement - 990

12/31/2021

		Date		Business	Cost or								Ç	Prior Accum.	2021	2021
me	Description of	Placed	Asset	osn	Other	Sec. 179		Special	Salvage	Recovery	Recovery		vention	Deprec.,		Accum.
9	Property	In Service	Code	%	Basis	Deduction	Credit	Allowance	Value	Basis	Period	Method	Code	179, Bonus	Deprec.	Deprec.
	Z 2335-2 CDOT GRANT #3	2/1/2008	Z-16	100.00%	130,621					130,621	25.0	S	FM	67,490	5,225	72,715
	Z 2335-1 CDOT GRANT #3	2/1/2008	2.16	100.00%	6,579					6,579	25.0	S	E	3,397	263	3,660
	Z 2352 CDOT GRANT #4	7/22/2008	2.16	100.001	18, 157					18,157	25.0	S	FM	8,532	726	9,258
	Z 2350 FAA GRANT #15	8/31/2008	2:16	100.001	200,000					200,000	25.0	SI	FM	246,667	20,000	266,667
	Z 2351 FAA GRANT #16	10/20/2008	2.16	100.001	126,360					126,360	25.0	SL	E	61,490	5,054	66,544
	Z 2360 FAA GRANT #17	4/30/2009	Z·16	100.001	48,693					48,693	25.0	ର	EN	21,604	1,948	23,552
	Z 2370 CDOT GRANT #5	7/27/2009	2.16	100.00%	117,781					117,781	25.0	SL	FM	53,457	4,711	58,168
	Z 2420 CDOT GRANT #6	12/1/2012	2.16	100.00%	189,771					189,771	15.0	ත්	EM	101,847	12,651	114,498
	Z 2525 FAA GRANT #19	9/15/2013	2.16	100.001	330,743					330,743	15.0	정	FM	161,357	22,050	183,407
	Z 2421 CDOT GRANT #7	9/27/2013	2.16	100.00%	49,774					49,774	15.0	જ	Z	23,424	3,318	26,742
	Z 2430 CDOT GRANT #8	9/27/2013	Z-16	100.00%	362,566				1	882,568	15.0	정	Ā	175,020	24,171	199, 191
	Z 2460 CDOT GRANT #10	8/22/2016	2.16	100.00%	22,500					22,500	7.0	정	¥	13,927	3,214	17,141
	Z2480 CDOT GRANT #11	12/31/2018	2.16	100.00%	161,531				1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	164,531	280	덩	¥	16,153	6,461	22,614
	Z 2490 CDOT GRANT #12	2/5/2019	2.16	100.00%	2,060,486					2,060,486	25.0	ග්	숲	123,629	82,419	206,048
	Z3190 FAA GRANT #20	9/3/2019	2.16	100,00%	144,670			1		144,670	25.0	ର୍ଚ୍ଚ	¥	8,680	5,787	14,467
	Z 2500 CDOT GRANT #13	1/21/2020	2.16	100.00%	564,674				g .	564,674	25.0	정	¥	11,293	22,587	33,880
	Z3200 FAA GRANT #21	8/4/2020	2-16	100.00%	000'69					000'69	25.0	ଅ	눞	1,380	2,760	4,140
	UBI CLOSING COSTS - AM A'	V 5/18/2021	2.16	100,00%	8,704		*			8,704	20.0	ଅ	FW		290	290
	Total Amortization (Line 44)			1	9,983,352					9,983,352				4,740,281	425,572	5.165.853
	Total Depreciation and Amortization	Amortiza	tion	L	14 453 781			,		14.453.781				5557.634	851 055	G 208 GRO
				11		COMP.							u			0,500,000

Form 4662 Reconciliation

Annual depreciation and amortization (including Sec 168(f) elected amounts) Special allowance except listed property (Line 14) - current year assets Special allowance - listed property (Line 25) - current year assets. Section 179 amount claimed (includes prior year disallowed)

Section 179 amount carried forward to future year Section 179 deduction (Line 12)

225,483 425,572

651,055

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2021 Accum. Deprec.		95,244	39,627	38,211	361,886	45,090	16.975	6,790	4,215	66,745	68,859	186,434	10,702	1,241	1,030,012	8,988	8,988		1,039,000		2,590	1,246	3,836		3,836	42,642			152,000					215,833
2021 Deprec.		6,178	4,403	4,367	43,865	5,818	1787	714	288	24,758	25,542	81,350	7,012	784	216,495	8,988	8,988		225,483					-		813	18,467	000'9	8,000	36,976	6,000	28,067	5,000	14,000
Prior Accum. Deprec., 179, Bonus		89,086	35,224	33,844	318,021	39,272	3,031	6.076	3,927	41,987	43,317	105,084	3,690	457	813,517				813,517		2,590	1,246	3,836		3,836	41,829	438,470	111,000	144,000	104,000	102,000	458,428	80,833	1,189,668
Con- Code	ν	≥	E E	E	W.	Z.	ŕ	ìì	Ĭ	Ì	: ≩	MM	¥	¥	1 1	WW					È	È	D 6			2	F	Ħ	Ή	ΣΣ	₹	M	E I	ŭ ŭ
Method	,	SIJO/IS	SI/GDS	SUNTS	SL/GDS	SUGDS	20008	20008	ROOM	150DB	150DB	SU9/JS	150DB	200DB		SL/GDS					200DB	200DB				ਯ	छ	ಠ	ග් :	ದ ಪ	片 더	성	ਲ	ದ ೮
Recovery			15.0	7	150		4	0.0	200	720	5.0	25.0	15.0	7.0		39.0					0.5	2.0				25.0	25.0	25.0	25.0	25.0	25.0	25.0	25.0	25.0
Recovery Re Basis P		154,456	139,787	65,504	696,759	87,266	3,800	20,000	0000	289,684	208777	7.033.764	73,808	3,200	3,906,593	260,000	560,000		4,466,593		2,590	1,246	3,836	Control of	3,836	47 647	461,668	150,000	200,000	150,000	150,000	701,669	125,000	1,565,360
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Ost or Other Basis	Cicon	154,456	139,787	65,038	657,969	87,266	3,500	20,000	8,000	000'8	289,564	101,882	73.808	3,200	3,906,593	260,000	560,000		4,466,593	A	og c	1,246	3,836		3,836	Ç	42,042	150,000	200,000	150,000	924,403	701,669	125,000	1,565,360
Business Use	R	100.00%	100.00%	100.00%	100.00%	100.00%	100,00%	400.001	100,00%	%00.001	100.00%	200.007	400.00%	100.00%	1 1	100.00%	1 . (1		*	and 26)	100.00%					300.001	100.00%	100.00%	100.00%	100.00%	300.000	100.00%	100.00%
# 4	200	23	R-1	2.5	2.5	, &	>-4	V-4	V-4	7-4	R-2	χ. (1)	× 6	F-10	(7)	ę,	(19)	Ī			(Line 25	T-T-			7		0 7	7-16	2-16	2-16	2-16	2 46	2-18	2-16
Date Ass	III Service	le 17)	12/10/2012	12/31/2012	9/3/1/2013	4/1/2014	7/16/2015	8/22/2016	8/22/2016	8/22/2016	5/27/2019	8/2/2019	9/4/2019		ior years (Line	e 19i) 5/18/2021	property (Line		0.5		onsiness use	6/15/1981	esu eseulei	7	ty		11/1996	7/41/2002	12/31/2002	9/11/2003	11/1/2003	12/31/2003	11/3/2004	9/1/2005
of of	Depreciation Detail	MACRS deductions for prior years (Line 17)	R 75-77 FENOING 12	RING FOR	N 19-13 PENCING	LOOP RUNA			10-82 2004 CHV 2500			17	R RUNWAY REHAB 2019		Total MACRS deductions for prior years (Line 17)	GDS nonresidential real property (Line 191) UBI RE - AM AV BLDG 5/16)	Total GDS nonresidential real property (Line 19!)		Subtotal Depreciation	Listed Property	Listed property with more than 50% business use (Line 25 and 26)	E&F 30-7 EQUIPMENT	Total listed and with > 50% bisiness use		Subtotal Listed Property	Total Amortization (Line 44)	Z 2240 FAA GRANT #4	7 2250 FAA GRAN #5	7 2270 FAA GRANT #7	Z 2280 FAA GRANT #8	Z 2290 FAA GRANT#9	Z 2281 CDOT GRANT #1	Z 2300 FAA GRANT #10	Z 2310 FAA GRANT #11

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	MEADOW EDITE OF THE PROPERTY O	Date			Prior Accum.	2021	2021
Hom .	Property	Placed in	Asset	Recovery	Deprec.,	Current	Accum.
No.	"**" indicates DISPOSED	Service	Code	Basis	179, Bonus	Deprec.	Deprec.
	V 10-38 OSHKOSH SNOW PL	11/3/2004	V-4	5,000	10,000		10,000
	V 10-4 TRACTOR & BLADE	9/20/1996	V-4	2,605	2,605		2,605
	V 10-49 VEHICLES - 4	8/3/2005	V-4	16,250	16,250		16,250
	V 10-74 MOWER	4/13/2012	V-4	000'9	5,553		5,553
	V 10-75 CRACK SEAL MACHI	4/13/2012	V-4	4,000	7,347	V	7,347
	V 10-80 SWEEPER/MOWER/S	7/16/2015	V-4	3,500	3,031	313	3,344
	V 10-81 1997 TRACTOR CSE	8/22/2016	V-4	20,000	15,192	1,784	16,976
	V 10-82 2004 CHV 2500	8/22/2016	V-4	8,000	6,076	744	6,790
	V 10-83 2005 RHO MOWER	8/22/2016	V-4	5,000	3,927	288	4,215
	V 2020 STATE AUCTION VEH	9/9/2020	F-10	3,200	457	784	1,241
	Z 2240 FAA GRANT #4	7/1/1996	Z-16	42,642	41,829	813	42,642
	Z 2250 FAA GRANT #5	4/1/1997	Z-16	461,668	438,470	18,467	456,937
	Z 2260 FAA GRANT #6	7/11/2002	Z-16	150,000	111,000	6,000	117,000
	Z 2270 FAA GRANT #7	12/31/2002	Z-16	200,000	144,000	8,000	152,000
	7 2280 FAA GRANT #8	9/11/2003	Z-16	150,000	104,000	000'9	110,000
	2281	12/31/2003	Z-16	150,000	102,000	000'9	108,000
	7 2290 FAA GRANT #9	11/1/2003	Z-16	924,403	634,706	36,976	671,682
		9/8/2004	2-16	701,669	458,428	28,067	486,495
	7 2301 CHOT GRANT #2	11/3/2004	2-16	125,000	80,833	5,000	85,833
	Z 2310 FAA GRANT #11	9/1/2005	Z-16	1,565,360	1,189,668	62,614	1,252,282
	Z 2320 FAA GRANT #12	7/26/2006	2-16	350,000	201,833	14,000	215,833
	Z 2335-1 CDOT GRANT #3	2/1/2008	Z-16	6,579	3,397	263	3,660
	7 2335-2 CDOT GRANT #3	2/1/2008	2-16	130,621	67,490	5,225	72,715
	Z 2340 FAA GRANT #14	8/9/2007	Z-16	250,000	134,167	10,000	144,167
	Z 2350 FAA GRANT #15	8/31/2008	Z-16	200,000	246,667	20,000	266,667
	7 2351 FAA GRANT#16	10/20/2008	Z-16	126,360	61,490	5,054	66,544
	Z 2352 CDOT GRANT #4	7/22/2008	2-16	18,157	8,532	726	9,258
	Z 2360 FAA GRANT #17	4/30/2009	Z-16	48,693	21,604	1,948	23,552
	Z 2370 CDOT GRANT #5	7/27/2009	2-16	117,781	53,457	4,711	58,168
	Z 2420 CDOT GRANT #6	12/1/2012	Z-16	189,771	101,847	12,651	114,498
	Z 2421 CDOT GRANT #7	9/27/2013	Z-16	49,774	23,424	3,318	26,742
	7 2430 CDOT GRANT #8	9/27/2013	Z-16	362,566	175,020	24,171	199,191
	2 2460 CDOT GRANT #10	8/22/2016	Z-16	22,500	13,927	3,214	17,141
58	7 2480 CDOT GRANT #11	12/31/2018	Z-16	161,531	16,153	6,461	22,614
À	7 2490 CDOT GRANT #12	2/5/2019	2-16	2,060,486	123,629	82,419	206,048
-	7 2500 COOT GRANT #13	1/21/2020	2-16	564,674	11,293	22,587	33,880
	7 2525 FAA GRANT #19	9/15/2013	Z-16	330,743	161,357	22,050	183,407
	2 3190 FAA GRANT #20	9/3/2019	Z-16	144,670		5,787	14,467
	Z 3200 FAA GRANT #21	8/4/2020	Z-16	000'69	1,380	2,760	4,140
				21 RO7 660	7 370 749	651 055	8 021 804
	SubTotals			000, 150, 12	738	2001.00	20117010
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