

Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047
2012
Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 07-01-2012, 2012, and ending 06-30-2013

| | | |
|---|--|--|
| B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | C Name of organization DENVER EARLY CHILDHOOD COUNCIL Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 3532 FRANKLIN STREET ROOM/SUITE F City or town, state or country, and ZIP + 4 DENVER, CO 80205 | D Employer identification number 27-3083665 E Telephone number (303) 297-1800 G Gross receipts \$ 2,303,424 |
| F Name and address of principal officer EMILY BUSTOS MOOTZ 3532 FRANKLIN STREET NO F DENVER, CO 80205 | | H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number |
| I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 | | |
| J Website: WWW.DENVEREARLYCHILDHOOD.ORG | | |
| K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other | | L Year of formation 2010 M State of legal domicile CO |

Part I Summary

| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities THE VISION OF THE DENVER EARLY CHILDHOOD COUNCIL (DECC) IS THAT EVERY YOUNG CHILD IN DENVER ENTERS SCHOOL READY TO SUCCEED WE SERVE AS DENVER'S EARLY CHILDHOOD HUB BY LEVERAGING RESOURCES, OPPORTUNITIES, AND CONNECTIONS TO CREATE A QUALITY SYSTEM THAT IMPACTS THE LIVES OF CHILDREN AND THEIR FAMILIES | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|--|---------------------------|--|---|---|-----------|---|---------|--|--|--|---------|--|----|-----|--|-----------|-----------|--|-----------|-----------|---|--------|---------|
| | 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 3 Number of voting members of the governing body (Part VI, line 1a) | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:5%;">3</td> <td align="right">13</td> </tr> <tr> <td>4 Number of independent voting members of the governing body (Part VI, line 1b)</td> <td align="right">13</td> </tr> <tr> <td>5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)</td> <td align="right">10</td> </tr> <tr> <td>6 Total number of volunteers (estimate if necessary)</td> <td align="right">40</td> </tr> <tr> <td>7a Total unrelated business revenue from Part VIII, column (C), line 12</td> <td align="right">0</td> </tr> <tr> <td>7b Net unrelated business taxable income from Form 990-T, line 34</td> <td></td> </tr> </table> | 3 | 13 | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 13 | 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) | 10 | 6 Total number of volunteers (estimate if necessary) | 40 | 7a Total unrelated business revenue from Part VIII, column (C), line 12 | 0 | 7b Net unrelated business taxable income from Form 990-T, line 34 | | | | | | | | | | | | | |
| 3 | 13 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 Number of independent voting members of the governing body (Part VI, line 1b) | 13 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) | 10 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 Total number of volunteers (estimate if necessary) | 40 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7a Total unrelated business revenue from Part VIII, column (C), line 12 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7b Net unrelated business taxable income from Form 990-T, line 34 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Revenue | | <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Prior Year</th> <th style="text-align: center;">Current Year</th> </tr> </thead> <tbody> <tr> <td>8 Contributions and grants (Part VIII, line 1h)</td> <td align="right">1,211,553</td> <td align="right">2,276,939</td> </tr> <tr> <td>9 Program service revenue (Part VIII, line 2g)</td> <td align="right">9,431</td> <td align="right">25,760</td> </tr> <tr> <td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td align="right">0</td> <td align="right">0</td> </tr> <tr> <td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td> <td align="right">17</td> <td align="right">725</td> </tr> <tr> <td>12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td> <td align="right">1,221,001</td> <td align="right">2,303,424</td> </tr> </tbody> </table> | | Prior Year | Current Year | 8 Contributions and grants (Part VIII, line 1h) | 1,211,553 | 2,276,939 | 9 Program service revenue (Part VIII, line 2g) | 9,431 | 25,760 | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 0 | 0 | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 17 | 725 | 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 1,221,001 | 2,303,424 | | | | | | |
| | Prior Year | Current Year | | | | | | | | | | | | | | | | | | | | | | | | |
| 8 Contributions and grants (Part VIII, line 1h) | 1,211,553 | 2,276,939 | | | | | | | | | | | | | | | | | | | | | | | | |
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| 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | |
| 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 17 | 725 | | | | | | | | | | | | | | | | | | | | | | | | |
| 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 1,221,001 | 2,303,424 | | | | | | | | | | | | | | | | | | | | | | | | |
| Expenses | | <table border="1" style="width:100%; border-collapse: collapse;"> <tbody> <tr> <td>13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)</td> <td align="right">0</td> <td align="right">0</td> </tr> <tr> <td>14 Benefits paid to or for members (Part IX, column (A), line 4)</td> <td align="right">0</td> <td align="right">0</td> </tr> <tr> <td>15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)</td> <td align="right">331,829</td> <td align="right">563,351</td> </tr> <tr> <td>16a Professional fundraising fees (Part IX, column (A), line 11e)</td> <td align="right">0</td> <td align="right">0</td> </tr> <tr> <td>b Total fundraising expenses (Part IX, column (D), line 25) <u>11,194</u></td> <td></td> <td></td> </tr> <tr> <td>17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)</td> <td align="right">893,072</td> <td align="right">907,906</td> </tr> <tr> <td>18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)</td> <td align="right">1,224,901</td> <td align="right">1,471,257</td> </tr> <tr> <td>19 Revenue less expenses Subtract line 18 from line 12</td> <td align="right">-3,900</td> <td align="right">832,167</td> </tr> </tbody> </table> | 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) | 0 | 0 | 14 Benefits paid to or for members (Part IX, column (A), line 4) | 0 | 0 | 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 331,829 | 563,351 | 16a Professional fundraising fees (Part IX, column (A), line 11e) | 0 | 0 | b Total fundraising expenses (Part IX, column (D), line 25) <u>11,194</u> | | | 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) | 893,072 | 907,906 | 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) | 1,224,901 | 1,471,257 | 19 Revenue less expenses Subtract line 18 from line 12 | -3,900 | 832,167 |
| 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | |
| 14 Benefits paid to or for members (Part IX, column (A), line 4) | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | |
| 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 331,829 | 563,351 | | | | | | | | | | | | | | | | | | | | | | | | |
| 16a Professional fundraising fees (Part IX, column (A), line 11e) | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | |
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| Net Assets or Fund Balances | | <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Beginning of Current Year</th> <th style="text-align: center;">End of Year</th> </tr> </thead> <tbody> <tr> <td>20 Total assets (Part X, line 16)</td> <td align="right">283,794</td> <td align="right">1,054,142</td> </tr> <tr> <td>21 Total liabilities (Part X, line 26)</td> <td align="right">148,920</td> <td align="right">87,101</td> </tr> <tr> <td>22 Net assets or fund balances Subtract line 21 from line 20</td> <td align="right">134,874</td> <td align="right">967,041</td> </tr> </tbody> </table> | | Beginning of Current Year | End of Year | 20 Total assets (Part X, line 16) | 283,794 | 1,054,142 | 21 Total liabilities (Part X, line 26) | 148,920 | 87,101 | 22 Net assets or fund balances Subtract line 21 from line 20 | 134,874 | 967,041 | | | | | | | | | | | | |
| | Beginning of Current Year | End of Year | | | | | | | | | | | | | | | | | | | | | | | | |
| 20 Total assets (Part X, line 16) | 283,794 | 1,054,142 | | | | | | | | | | | | | | | | | | | | | | | | |
| 21 Total liabilities (Part X, line 26) | 148,920 | 87,101 | | | | | | | | | | | | | | | | | | | | | | | | |
| 22 Net assets or fund balances Subtract line 21 from line 20 | 134,874 | 967,041 | | | | | | | | | | | | | | | | | | | | | | | | |

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

| | | |
|-------------------------------|---|---|
| Sign Here | ***** Signature of officer | 2013-12-01 Date |
| | EMILY BUSTOS MOOTZ EXECUTIVE DIRECTOR Type or print name and title | |
| Paid Preparer Use Only | Prnt/Type preparer's name ROBERT E FABRY CPA | Preparer's signature Date 2013-11-26 |
| | Firm's name BAUERLE AND COMPANY PC | Check <input type="checkbox"/> if self-employed PTIN |
| | Firm's address 7887 E BELLEVUE AVE STE 700 DENVER, CO 801116021 | Firm's EIN Phone no (303) 759-0089 |

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission
 THE VISION OF THE DENVER EARLY CHILDHOOD COUNCIL (DECC) IS THAT EVERY YOUNG CHILD IN DENVER ENTERS SCHOOL READY TO SUCCEED WE SERVE AS DENVER'S EARLY CHILDHOOD HUB BY LEVERAGING RESOURCES, OPPORTUNITIES, AND CONNECTIONS TO CREATE A QUALITY SYSTEM THAT IMPACTS THE LIVES OF CHILDREN AND THEIR FAMILIES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
 If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
 If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 865,664 including grants of \$) (Revenue \$ 11,663)
 THE SCHOOL READINESS QUALITY IMPROVEMENT PROGRAM (SRQIP), DENVER PRESCHOOL PROGRAM (DPP), SOCIAL EMOTIONAL EARLY DEVELOPMENT INITIATIVE (SEED), AND EXPANDING QUALITY FOR INFANTS & TODDLERS (EQIT) STRIVE TO ENHANCE QUALITY IN EARLY CHILDHOOD EDUCATION TO IMPROVE THE SCHOOL READINESS OF DENVER CHILDREN BIRTH TO FIVE YEARS OLD THROUGH THESE PROGRAMS, CHILDCARE PROVIDERS RECEIVE TARGETING COACHING, TRAINING, QUALIFIED CLASSROOM LEARNING MATERIALS, AND TECHNOLOGY RESOURCES IN FY12-13, WE PROVIDED 2,810 HOURS OF COACHING, OVER 187,000 IN TUITION ASSISTANCE FOR COLLEGE COURSEWORK AND PROFESSIONAL DEVELOPMENT, AND OVER 215,000 OF QUALIFIED LEARNING MATERIALS AND TECHNOLOGY TO APPROXIMATELY 580 CLASSROOMS IN 235 CHILDCARE PROVIDER SITES IN DENVER ALL SITES PARTICIPATING IN SRQIP AND DPP ARE REQUIRED TO BE QUALITY RATED BY AN INDEPENDENT THIRD-PARTY PARTICIPATING CHILDCARE PROVIDERS HAVE RECOGNIZED CONSISTENT AND STATISTICALLY SIGNIFICANT GAINS IN QUALITY YEAR OVER YEAR AS A RESULT OF THE ADDITIONAL QUALITY IMPROVEMENT SUPPORTS AND RESOURCES PROVIDED THIS IS THE FIRST YEAR OF THE SEED INITIATIVE OUR GOALS ARE TO IMPLEMENT THE PYRAMID PLUS APPROACH (PPA) IN CHILDCARE CENTERS BY OFFERING A COMBINATION OF TRAINING, COACHING, PROFESSIONAL DEVELOPMENT, LEARNING MATERIALS, AND TECHNOLOGY, TO EXPAND THE NUMBER OF CERTIFIED PPA TRAINERS AND COACHES (WE ENROLLED FOUR IN ANNUAL CERTIFICATION PROCESS IN FY12-13), AND OFFER TRAINING TO THE BROADER EARLY CHILDHOOD COMMUNITY IN DENVER

4b (Code) (Expenses \$ 262,785 including grants of \$) (Revenue \$ 6,585)
 PROFESSIONAL DEVELOPMENT AND DENVER CHILDCARE RESOURCE & REFERRAL PROGRAMS EXPAND ACCESS TO HIGH QUALITY TRAINING AND SCHOLARSHIP PROGRAMS THAT PROVIDE TRAININGS ON INDUSTRY BEST PRACTICE AND EVIDENCE-BASED CURRICULUM TO HELP EARLY CHILDHOOD PROFESSIONALS INCREASE THEIR KNOWLEDGE AND APPLY IT IN THE CLASSROOM OUR PROFESSIONAL DEVELOPMENT OFFERINGS ARE OFTEN PAIRED WITH ON-SITE COACHING THAT ENHANCES THE APPLICATION AND EFFECTIVENESS OF THE DELIVERED CONTENT WE PROVIDED 294 HOURS OF EXPANDING QUALITY FOR INFANTS & TODDLERS TRAINING AND 132 HOURS OF RELATED COACHING FOR MORE THAN 130 PROVIDERS IN THE FY12-13 WE ALSO PROVIDED 291 HOURS OF STAND-ALONE TRAINING, AND AN ADDITIONAL 33 HOURS OF TRAINING PAIRED WITH COACHING IN ORDER TO EXPAND ACCESS TO HIGH-QUALITY TRAININGS AND INFORMATION SESSIONS, DECC BRAIDS FUNDING TO OFFER ADDITIONAL COMMUNITY SLOTS TO ALL DENVER EARLY CHILDHOOD EDUCATION PROFESSIONALS, INCLUDING HOME PROVIDERS, FAMILY CARE PROVIDERS, AND OTHER EARLY CHILDHOOD STAKEHOLDERS IN TOTAL, WE HAD 1,026 REGISTRATIONS FOR 74 PROFESSIONAL DEVELOPMENT TRAININGS, WITH 207 SESSIONS IN FY12-13 ADDITIONALLY, THROUGH OUR RESOURCE & REFERRAL PROGRAM, DECC PROVIDED ANSWERS TO OVER 60 EARLY CHILDHOOD RELATED QUESTIONS FROM PROVIDERS THROUGH OUR HELP DESK SYSTEM

4c (Code) (Expenses \$ 207,139 including grants of \$) (Revenue \$)
 AS PART OF OUR EARLY CHILDHOOD SYSTEMS BUILDING WORK, WE COORDINATE COLLABORATIVE DECISION-MAKING ABOUT FEDERAL, STATE, LOCAL, AND PHILANTHROPIC EARLY CHILDHOOD FINANCIAL RESOURCES IN DENVER AND FACILITATE SERVICE DELIVERY TO THE PUBLIC AND PRIVATE EARLY LEARNING PROVIDERS WE ARE WORKING TO INCREASE THE QUALITY, ACCESS, AND AVAILABILITY OF EARLY CHILDHOOD CARE AND EDUCATION (ECE) SERVICES WE ARE ALSO WORKING TO BETTER UNDERSTAND AND THE INTEGRATION OF HEALTH AND MENTAL HEALTH SERVICES IN THE ECE COMMUNITY IN DENVER BY CONDUCTING ENVIRONMENTAL SCANS RELATED TO HOME VISITATION AND THE DEVELOPMENTAL SCREENING AND REFERRAL SYSTEM, AND BY BUILDING INFRASTRUCTURE RELATED TO MAPPING ENTITIES AND AVAILABLE RESOURCES THIS HAS ALLOWED US TO BRING NEW PARTNERS TOGETHER TO EXAMINE SYSTEMATIC DUPLICATION AND SERVICE GAPS OUR STAFF ACTIVELY PARTICIPATED IN VARIOUS WORKGROUPS AND COMMITTEES WHICH CONTRIBUTED TO PROVIDING FEEDBACK AND DESIGN GUIDANCE ON THE NEW TIERED QUALITY RATING IMPROVEMENT SYSTEM FOR THE STATE OF COLORADO AND OTHER STATEWIDE EARLY CHILDHOOD SYSTEMS EFFORTS THAT WILL BE FUNDED BY THE RACE TO THE TOP EARLY LEARNING CHALLENGE GRANT THIS INFORMATION PAIRED WITH THE DATE WE'RE COLLECTING THROUGH OUR QUALITY IMPROVEMENT AND PROFESSIONAL DEVELOPMENT PROGRAMS WILL ALLOW US TO BETTER INFORM STAKEHOLDERS AND MORE EFFECTIVELY SERVE THE EARLY CHILDHOOD WORKFORCE IN THE EARLY LEARNING, CHILD HEALTH, MENTAL HEALTH, AND FAMILY SUPPORT DOMAINS

4d Other program services (Describe in Schedule O)
 (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 1,335,588

Part IV Checklist of Required Schedules

| | Yes | No |
|---|-----|----|
| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> <input checked="" type="checkbox"/> | Yes | |
| 2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? <input checked="" type="checkbox"/> | Yes | |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | | No |
| 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> | | No |
| 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> | | No |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> <input checked="" type="checkbox"/> | | No |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> <input checked="" type="checkbox"/> | | No |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> <input checked="" type="checkbox"/> | | No |
| 9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> <input checked="" type="checkbox"/> | | No |
| 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> <input checked="" type="checkbox"/> | | No |
| 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | | |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> <input checked="" type="checkbox"/> | | No |
| b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> <input checked="" type="checkbox"/> | | No |
| c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> <input checked="" type="checkbox"/> | | No |
| d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> <input checked="" type="checkbox"/> | | No |
| e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> <input checked="" type="checkbox"/> | | No |
| f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> <input checked="" type="checkbox"/> | Yes | |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> <input checked="" type="checkbox"/> | Yes | |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> <input checked="" type="checkbox"/> | | No |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> | | No |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | | No |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> | | No |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> | | No |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i> | | No |
| 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i> | | No |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> | | No |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> | | No |
| 20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> | | No |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | | |

Part IV Checklist of Required Schedules (continued)

| | | | | |
|------------|--|------------|-----|----|
| 21 | Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> | 21 | | No |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> | 22 | | No |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> | 23 | | No |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> | 24a | | No |
| b | 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 to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> | 25a | | No |
| b | 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? <i>If "Yes," complete Schedule L, Part I</i> | 25b | | No |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> | 26 | | No |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> | 27 | | No |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) | | | |
| a | A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> | 28a | | No |
| b | A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> | 28b | | No |
| c | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> | 28c | Yes | |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> | 29 | | No |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | 30 | | No |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> | 31 | | No |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | 32 | | No |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> | 33 | | No |
| 34 | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> | 34 | | No |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | No |
| 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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 35b | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 36 | | No |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> | 37 | | No |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O | 38 | Yes | |

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

| | | Yes | No |
|------------|--|-----|----|
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. 1a 23 | | |
| 1b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. 1b 0 | | |
| 1c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2a 10 | | |
| 2b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). | Yes | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | | No |
| 3b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | | No |
| b | If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | No |
| 5b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | No |
| 5c | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | | No |
| 6b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | |
| a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | | |
| 7b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | |
| 7c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | | |
| 7d | If "Yes," indicate the number of Forms 8282 filed during the year. 7d | | |
| 7e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | |
| 7f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | |
| 7g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | | |
| 7h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | | |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | |
| 9a | Did the organization make any taxable distributions under section 4966? | | |
| 9b | Did the organization make a distribution to a donor, donor advisor, or related person? | | |
| 10 | Section 501(c)(7) organizations. Enter | | |
| 10a | Initiation fees and capital contributions included on Part VIII, line 12. 10a | | |
| 10b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. 10b | | |
| 11 | Section 501(c)(12) organizations. Enter | | |
| 11a | Gross income from members or shareholders. 11a | | |
| 11b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). 11b | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | | |
| 12b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | |
| 13a | Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 13a | | |
| 13b | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. 13b | | |
| 13c | Enter the amount of reserves on hand. 13c | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | | No |
| 14b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. | | |

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

| | | Yes | 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 if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O | | |
| 1b | Enter the number of voting members included in 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? | | No |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? | | No |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | No |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | | No |
| 6 | Did the organization have members or stockholders? | | No |
| 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? | Yes | |
| 7b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | |
| 8a | The governing body? | Yes | |
| 8b | Each committee with authority to act on behalf of the governing body? | Yes | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | | No |

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

| | | Yes | No |
|------------|--|-----|----|
| 10a | Did the organization have local chapters, branches, or affiliates? | | No |
| 10b | 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? | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | Yes | |
| 11b | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | Yes | |
| 12b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | Yes | |
| 12c | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done | Yes | |
| 13 | Did the organization have a written whistleblower policy? | Yes | |
| 14 | Did the organization have a written document retention and destruction policy? | Yes | |
| 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? | | |
| 15a | The organization's CEO, Executive Director, or top management official | Yes | |
| 15b | Other officers or key employees of the organization | | No |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | | No |
| 16b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | | |

Section C. Disclosure

- 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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization
THE ORGANIZATION 3532 FRANKLIN STREET NOF DENVER, CO (303) 297-1800

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below dotted line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|--|---|-----------------------|---------|--------------|------------------------------|--------|---|--|---|
| | | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) GERIE GRIMES BOARD CHAIR | 2 00 | X | | X | | | | 0 | 0 | 0 |
| (2) LYNN ANDREWS VICE CHAIR | 2 00 | X | | X | | | | 0 | 0 | 0 |
| (3) DAVID CORDOVA TREASURER | 2 00 | X | | X | | | | 0 | 0 | 0 |
| (4) SUSAN RIDER SECRETARY | 2 00 | X | | X | | | | 0 | 0 | 0 |
| (5) CAROL EDWARDS BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| (6) CHERYL CALDWELL BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| (7) DEVVY ALTMAN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| (8) DIANA GADISON BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| (9) JUNE ALLEN BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| (10) PAMELA HARRIS PHD BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| (11) ANNA JO HAYNES BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| (12) SARAH BRENKERT BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| (13) MALINDA JONES BOARD MEMBER | 1 00 | X | | | | | | 0 | 0 | 0 |
| (14) EMILY BUSTOS MOOTZ EXECUTIVE DI | 40 00 | | | X | | | | 67,857 | 0 | 7,102 |
| | | | | | | | | | | |
| | | | | | | | | | | |

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

| | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 | |
|--|---|---|--|---|---|--|
| Contributions, Gifts, Grants and Other Similar Amounts | 1a Federated campaigns . . . 1a _____ | | | | | |
| | b Membership dues 1b _____ | | | | | |
| | c Fundraising events 1c _____ | | | | | |
| | d Related organizations 1d _____ | | | | | |
| | e Government grants (contributions) 1e 1,245,758 | | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above 1f 1,031,181 | | | | | |
| | g Noncash contributions included in lines 1a-1f \$ _____ | | | | | |
| | h Total. Add lines 1a-1f | 2,276,939 | | | | |
| Program Service Revenue | Business Code | | | | | |
| | 2a CONSULTING/COACHING _____ | 611430 | 11,663 | 11,663 | | |
| | b SHARED SERVICES _____ | 900099 | 7,512 | 7,512 | | |
| | c TRAINING FEES _____ | 611430 | 6,585 | 6,585 | | |
| | d _____ | | | | | |
| | e _____ | | | | | |
| | f All other program service revenue _____ | | | | | |
| g Total. Add lines 2a-2f | 25,760 | | | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) | | | | | |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | |
| | 5 Royalties | | | | | |
| | 6a Gross rents | (i) Real | | | | |
| | | (ii) Personal | | | | |
| | | b Less rental expenses | | | | |
| | | c Rental income or (loss) | | | | |
| | d Net rental income or (loss) | | | | | |
| | 7a Gross amount from sales of assets other than inventory | (i) Securities | | | | |
| | | (ii) Other | | | | |
| | | b Less cost or other basis and sales expenses | | | | |
| | | c Gain or (loss) | | | | |
| | d Net gain or (loss) | | | | | |
| | 8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 | a _____ | | | | |
| | | b Less direct expenses b _____ | | | | |
| | | c Net income or (loss) from fundraising events | | | | |
| 9a Gross income from gaming activities See Part IV, line 19 | a _____ | | | | | |
| | b Less direct expenses b _____ | | | | | |
| | c Net income or (loss) from gaming activities | | | | | |
| 10a Gross sales of inventory, less returns and allowances | a _____ | | | | | |
| | b Less cost of goods sold b _____ | | | | | |
| | c Net income or (loss) from sales of inventory | | | | | |
| Miscellaneous Revenue | Business Code | | | | | |
| 11a OTHER INCOME _____ | 900099 | 725 | 725 | | | |
| b _____ | | | | | | |
| c _____ | | | | | | |
| d All other revenue | | | | | | |
| e Total. Add lines 11a-11d | 725 | | | | | |
| 12 Total revenue. See Instructions | 2,303,424 | 26,485 | | | | |

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Check if Schedule O contains a response to any question in this Part IX

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|---|------------------------------|--|---|------------------------------------|
| 1 | Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to individuals in the United States. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 72,329 | 56,198 | 12,504 | 3,627 |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 397,001 | 323,366 | 67,096 | 6,539 |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 9,120 | 7,397 | 1,566 | 157 |
| 9 | Other employee benefits | 45,716 | 43,195 | 2,521 | |
| 10 | Payroll taxes | 39,185 | 32,390 | 6,042 | 753 |
| 11 | Fees for services (non-employees) | | | | |
| a | Management | | | | |
| b | Legal | | | | |
| c | Accounting | 10,400 | | 10,400 | |
| d | Lobbying | | | | |
| e | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) | 47,609 | 43,521 | 4,088 | |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | 11,755 | 9,592 | 2,052 | 111 |
| 14 | Information technology | 21,240 | 16,744 | 4,496 | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 55,275 | 49,273 | 6,002 | |
| 17 | Travel | 11,420 | 11,351 | 62 | 7 |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 8,592 | 7,889 | 703 | |
| 20 | Interest | 379 | | 379 | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | | | | |
| 23 | Insurance | 3,743 | | 3,743 | |
| 24 | Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) | | | | |
| a | DIRECT PROGRAM EXPENSES | 723,739 | 723,739 | | |
| b | STAFF DEVELOPMENT | 5,426 | 3,317 | 2,109 | |
| c | COMMUNITY OUTREACH | 4,320 | 4,320 | | |
| d | PRINTING | 4,008 | 3,296 | 712 | |
| e | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 1,471,257 | 1,335,588 | 124,475 | 11,194 |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) | | | | |

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X

| | | (A) Beginning of year | | (B) End of year |
|---|--|--------------------------|------------|--------------------|
| Assets | 1 Cash—non-interest-bearing | 68,275 | 1 | 283,346 |
| | 2 Savings and temporary cash investments | | 2 | |
| | 3 Pledges and grants receivable, net | 209,189 | 3 | 745,535 |
| | 4 Accounts receivable, net | 1,342 | 4 | 2,899 |
| | 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | 5 | |
| | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L | | 6 | |
| | 7 Notes and loans receivable, net | | 7 | |
| | 8 Inventories for sale or use | | 8 | |
| | 9 Prepaid expenses and deferred charges | 3,788 | 9 | 20,012 |
| | 10a Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D | 10a | | |
| | b Less accumulated depreciation | 10b | 10c | |
| | 11 Investments—publicly traded securities | | 11 | |
| | 12 Investments—other securities. See Part IV, line 11 | | 12 | |
| | 13 Investments—program-related. See Part IV, line 11 | | 13 | |
| | 14 Intangible assets | | 14 | |
| | 15 Other assets. See Part IV, line 11 | 1,200 | 15 | 2,350 |
| 16 Total assets. Add lines 1 through 15 (must equal line 34) | 283,794 | 16 | 1,054,142 | |
| Liabilities | 17 Accounts payable and accrued expenses | 98,920 | 17 | 87,101 |
| | 18 Grants payable | | 18 | |
| | 19 Deferred revenue | | 19 | |
| | 20 Tax-exempt bond liabilities | | 20 | |
| | 21 Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | 22 | |
| | 23 Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 Unsecured notes and loans payable to unrelated third parties | 50,000 | 24 | |
| | 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | | 25 | |
| | 26 Total liabilities. Add lines 17 through 25 | 148,920 | 26 | 87,101 |
| Net Assets or Fund Balances | Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | |
| | 27 Unrestricted net assets | 36,943 | 27 | 57,246 |
| | 28 Temporarily restricted net assets | 97,931 | 28 | 909,795 |
| | 29 Permanently restricted net assets | | 29 | |
| | Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. | | | |
| | 30 Capital stock or trust principal, or current funds | | 30 | |
| | 31 Paid-in or capital surplus, or land, building or equipment fund | | 31 | |
| | 32 Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| 33 Total net assets or fund balances | 134,874 | 33 | 967,041 | |
| 34 Total liabilities and net assets/fund balances | 283,794 | 34 | 1,054,142 | |

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

| | | | |
|-----------|---|-----------|-----------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 2,303,424 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 1,471,257 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | 832,167 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 134,874 |
| 5 | Net unrealized gains (losses) on investments | 5 | |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 967,041 |

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

| | Yes | No |
|--|-----|----|
| 1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O | | |
| 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | | No |
| 2b Were the organization's financial statements audited by an independent accountant? 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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | Yes | |
| 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 process during the tax year, explain in Schedule O | Yes | |
| 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? | | No |
| 3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | |

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2012

Open to Public Inspection

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

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

Name of the organization

DENVER EARLY CHILDHOOD COUNCIL

Employer identification number

27-3083665

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 (ii) A family member of a person described in (i) above?
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

| | Yes | No |
|-----------------|-----|----|
| 11g(i) | | |
| 11g(ii) | | |
| 11g(iii) | | |

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions)) | (iv) Is the organization in col (i) listed in your governing document? | | (v) Did you notify the organization in col (i) of your support? | | (vi) Is the organization in col (i) organized in the U S ? | | (vii) Amount of monetary support |
|------------------------------------|----------|--|--|----|---|----|--|----|----------------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total | | | | | | | | | |

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
|--|----------|----------|----------|-----------|-----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") | | | 153,422 | 1,211,553 | 2,276,939 | 3,641,914 |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3 | | | 153,422 | 1,211,553 | 2,276,939 | 3,641,914 |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
| 6 Public support. Subtract line 5 from line 4 | | | | | | 3,641,914 |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
|---|----------|----------|----------|-----------|-----------|-----------|
| 7 Amounts from line 4 | | | 153,422 | 1,211,553 | 2,276,939 | 3,641,914 |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | | | 17 | 725 | 742 |
| 11 Total support (Add lines 7 through 10) | | | | | | 3,642,656 |
| 12 Gross receipts from related activities, etc (see instructions) | | | | | 12 | 31,279 |

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

| | | |
|--|-----------|--|
| 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) | 14 | |
| 15 Public support percentage for 2011 Schedule A, Part II, line 14 | 15 | |

16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") | | | | | | |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 Total. Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 Public support (Subtract line 7c from line 6) | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 9 Amounts from line 6 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 13 Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |
| 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/> | | | | | | |

Section C. Computation of Public Support Percentage

| | | |
|--|-----------|--|
| 15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)) | 15 | |
| 16 Public support percentage from 2011 Schedule A, Part III, line 15 | 16 | |

Section D. Computation of Investment Income Percentage

| | | |
|--|-----------|--|
| 17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)) | 17 | |
| 18 Investment income percentage from 2011 Schedule A, Part III, line 17 | 18 | |

- 19a 33 1/3% support tests—2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

| |
|-------------------------------------|
| Facts And Circumstances Test |
|-------------------------------------|

| |
|--------------------|
| Explanation |
| |
| |
| |
| |

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2012

Open to Public Inspection

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization DENVER EARLY CHILDHOOD COUNCIL

Employer identification number

27-3083665

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate contributions, aggregate grants, aggregate value, and questions about donor informed.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Form for Part II Conservation Easements including checkboxes for preservation types, a table for held at the end of the year (2a-2d), and various questions about monitoring and expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets including questions about reporting and amounts for revenues and assets.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table

| | Amount |
|-----------|--------|
| 1c | |
| 1d | |
| 1e | |
| 1f | |

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | | | | | |
| b Contributions | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

| | Yes | No |
|--|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | | | | |
| b Buildings | | | | |
| c Leasehold improvements | | | | |
| d Equipment | | | | |
| e Other | | | | |
| Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) | | | | |

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

| (a) Description of security or category (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 | | |
| Other | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 12.) | | |

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

| (a) Description of investment type | (b) Book value | (c) Method of valuation Cost or end-of-year market value |
|--|----------------|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 13.) | | |

Part IX Other Assets. See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|--|----------------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.) | |

Part X Other Liabilities. See Form 990, Part X, line 25.

| 1 (a) Description of liability | (b) Book value |
|--|----------------|
| Federal income taxes | |
| | |
| | |
| | |
| | |
| | |
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| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) | |

2. Fin 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

| | | | | |
|----------|---|-----------|-----------|-----------|
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | 2,303,424 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | | |
| a | Net unrealized gains on investments | 2a | | |
| b | Donated services and use of facilities | 2b | | |
| c | Recoveries of prior year grants | 2c | | |
| d | Other (Describe in Part XIII) | 2d | | |
| e | Add lines 2a through 2d | | 2e | |
| 3 | Subtract line 2e from line 1 | | 3 | 2,303,424 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1 | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII) | 4b | | |
| c | Add lines 4a and 4b | | 4c | |
| 5 | Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12) | | 5 | 2,303,424 |

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

| | | | | |
|----------|--|-----------|-----------|-----------|
| 1 | Total expenses and losses per audited financial statements | | 1 | 1,471,257 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | | |
| a | Donated services and use of facilities | 2a | | |
| b | Prior year adjustments | 2b | | |
| c | Other losses | 2c | | |
| d | Other (Describe in Part XIII) | 2d | | |
| e | Add lines 2a through 2d | | 2e | |
| 3 | Subtract line 2e from line 1 | | 3 | 1,471,257 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1 : | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII) | 4b | | |
| c | Add lines 4a and 4b | | 4c | |
| 5 | Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18) | | 5 | 1,471,257 |

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

| Identifier | Return Reference | Explanation |
|---------------------------------|----------------------------|---|
| LIABILITY UNDER FIN 48 FOOTNOTE | SCHEDULE D, PAGE 3, PART X | DECC FOLLOWS ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH REQUIRES DECC TO DETERMINE WHETHER A TAX POSITION (AND RELATED TAX BENEFIT) IS MORE LIKELY THAN NOT TO BE SUSTAINED UPON EXAMINATION BY THE APPLICABLE TAXING AUTHORITY, BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFIT TO BE RECOGNIZED IS MEASURED AS THE LARGEST AMOUNT OF BENEFIT THAT IS GREATER THAN FIFTY PERCENT LIKELY OF BEING REALIZED UPON SETTLEMENT, PRESUMING THAT THE TAX POSITION IS EXAMINED BY THE APPROPRIATE TAXING AUTHORITY THAT HAS FULL KNOWLEDGE OF ALL RELEVANT INFORMATION. DURING THE YEAR ENDED JUNE 30, 2013, DECC'S MANAGEMENT EVALUATED ITS TAX POSITIONS TO DETERMINE THE EXISTENCE OF UNCERTAINTIES, AND DID NOT NOTE ANY MATTERS THAT WOULD REQUIRE RECOGNITION OR WHICH MAY HAVE AN EFFECT ON ITS TAX-EXEMPT STATUS. |

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2012

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. Attach to Form 990 or Form 990-EZ. See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization DENVER EARLY CHILDHOOD COUNCIL

Employer identification number 27-3083665

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

Table with 4 main columns: (a) Name of disqualified person, (b) Relationship between disqualified person and organization, (c) Description of transaction, (d) Corrected? (Yes/No)

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 \$
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

Table with 9 main columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization (To/From), (e) Original principal amount, (f) Balance due, (g) In default? (Yes/No), (h) Approved by board or committee? (Yes/No), (i) Written agreement? (Yes/No)

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 5 main columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

| (a) Name of interested person | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | (e) Sharing of organization's revenues? | |
|-------------------------------|---|---------------------------|--------------------------------|---|----|
| | | | | Yes | No |
| (1) CLAYTON EARLY LEARNING | SHARE ONE COMMO | 262,651 | ONE BOARD MEMBER FRO | | No |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

| Identifier | Return Reference | Explanation |
|------------------------|-------------------|---|
| ADDITIONAL INFORMATION | SCHEDULE L PART V | <p>BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS 1 NAME OF PERSON CLAYTON EARLY LEARNING 2 RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION SHARE ONE COMMON BOARD MEMBER 3 DESCRIPTION OF TRANSACTION ONE BOARD MEMBER FROM DECC ALSO SERVES ON THE BOARD OF CLAYTON OR CLAYTON RELATED ENTITIES DURING THE YEAR ENDED JUNE 30 2013 DECC INCURRED EXPENSES TOTALING 262651 TO CLAYTON EARLY CLEARING CLAYTON FOR PROGRAM EXPENSES RELATING TO QUALITY IMPROVEMENT SERVICES INCLUDING SPECIALIZED COACHING AND TRAINING FOR DECCS DENVER PRESCHOOL PROGRAM AND SCHOOL READINESS INITIATIVES CLAYTON WAS SELECTED TO PROVIDE THESE SERVICES THROUGH A FUNDERDRIVEN COMPETITIVE RFP PROCESS CLAYTON IS A COLORADO 501C3 NONPROFIT ORGANIZATION A BOARD MEMBER OF DECC IS EMPLOYEED BY CLAYTON ADDITIONALLY ONE DECC BOARD MEMBER ALSO SERVES ON THE BOARD OF CLAYTON OR ENTITIES RELATED TO CLAYTON DECC TAKES PRECAUTIONS AS OUTLINED IN ITS CONFLICT OF INTEREST POLICY TO MAINTAIN ITS COMMITMENT TO INTEGRITY AND FAIRNESS IN THE CONDUCT OF ALL ACTIVITIES INCLUDING ANNUAL WRITTEN DICLOSURE BY ALL BOARD MEMBERS OF ANY RELATIONSHIPS THAT COULD CONSTITUTE A CONFLICT OF INTEREST PARTICIPANTS WHO HAVE A CONFLICT OF INTEREST SHALL ABSTAIN FROM VOTING ON THOSE DECISIONS AND THAT ABSTENTION IS FORMALLY NOTED IN THE BOARD MINUTES WITH DISCLOSURE TO OTHER PARTICIPANTS THE WORK OF THE DECC IS FURTHERED BY THE WILLINGNESS OF ITS PARTICIPANTS TO SHARE INFORMATION BEARING UP ON THE MATTER UNDER CONSIDERATION</p> |

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2012

**Open to Public
Inspection**

Name of the organization
DENVER EARLY CHILDHOOD COUNCIL

Employer identification number

27-3083665

| Identifier | Return Reference | Explanation |
|------------------------|-----------------------------------|--|
| ORGANIZATION'S MISSION | FORM 990 - ORGANIZATION'S MISSION | THE VISION OF THE DENVER EARLY CHILDHOOD COUNCIL (DECC) IS THAT EVERY YOUNG CHILD IN DENVER ENTERS SCHOOL READY TO SUCCEED WE SERVE AS DENVER'S EARLY CHILDHOOD HUB BY LEVERAGING RESOURCES, OPPORTUNITIES, AND CONNECTIONS TO CREATE A QUALITY SYSTEM THAT IMPACTS THE LIVES OF CHILDREN AND THEIR FAMILIES |

| Identifier | Return Reference | Explanation |
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| FIRST ACCOMPLISHMENT DESCRIPTION | FORM 990, PAGE 2, PART III, LINE 4A | DPP ARE REQUIRED TO BE QUALITY RATED BY AN INDEPENDENT THIRD-PARTY PARTICIPATING CHILDCARE PROVIDERS HAVE RECOGNIZED CONSISTENT AND STATISTICALLY SIGNIFICANT GAINS IN QUALITY YEAR OVER YEAR AS A RESULT OF THE ADDITIONAL QUALITY IMPROVEMENT SUPPORTS AND RESOURCES PROVIDED THIS IS THE FIRST YEAR OF THE SEED INITIATIVE. OUR GOALS ARE TO IMPLEMENT THE PYRAMID PLUS APPROACH (PPA) IN CHILDCARE CENTERS BY OFFERING A COMBINATION OF TRAINING, COACHING, PROFESSIONAL DEVELOPMENT, LEARNING MATERIALS, AND TECHNOLOGY, TO EXPAND THE NUMBER OF CERTIFIED PPA TRAINERS AND COACHES (WE ENROLLED FOUR IN ANNUAL CERTIFICATION PROCESS IN FY 12-13), AND OFFER TRAINING TO THE BROADER EARLY CHILDHOOD COMMUNITY IN DENVER |

| Identifier | Return Reference | Explanation |
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| SECOND ACCOMPLISHMENT DESCRIPTION | FORM 990, PAGE 2, PART III, LINE 4B | DECC BRAIDS FUNDING TO OFFER ADDITIONAL COMMUNITY SLOTS TO ALL DENVER EARLY CHILDHOOD EDUCATION PROFESSIONALS, INCLUDING HOME PROVIDERS, FAMILY CARE PROVIDERS, AND OTHER EARLY CHILDHOOD STAKEHOLDERS IN TOTAL, WE HAD 1,026 REGISTRATIONS FOR 74 PROFESSIONAL DEVELOPMENT TRAININGS, WITH 207 SESSIONS IN FY 12-13 ADDITIONALLY, THROUGH OUR RESOURCE & REFERRAL PROGRAM, DECC PROVIDED ANSWERS TO OVER 60 EARLY CHILDHOOD RELATED QUESTIONS FROM PROVIDERS THROUGH OUR HELP DESK SYSTEM |

| Identifier | Return Reference | Explanation |
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| THIRD ACCOMPLISHMENT DESCRIPTION | FORM 990, PAGE 2, PART III, LINE 4C | DUPLICATION AND SERVICE GAPS OUR STAFF ACTIVELY PARTICIPATED IN VARIOUS WORKGROUPS AND COMMITTEES WHICH CONTRIBUTED TO PROVIDING FEEDBACK AND DESIGN GUIDANCE ON THE NEW TIERED QUALITY RATING IMPROVEMENT SYSTEM FOR THE STATE OF COLORADO AND OTHER STATEWIDE EARLY CHILDHOOD SYSTEMS EFFORTS THAT WILL BE FUNDED BY THE RACE TO THE TOP EARLY LEARNING CHALLENGE GRANT THIS INFORMATION PAIRED WITH THE DATA WE'RE COLLECTING THROUGH OUR QUALITY IMPROVEMENT AND PROFESSIONAL DEVELOPMENT PROGRAMS WILL ALLOW US TO BETTER INFORM STAKEHOLDERS AND MORE EFFECTIVELY SERVE THE EARLY CHILDHOOD WORKFORCE IN THE EARLY LEARNING, CHILD HEALTH, MENTAL HEALTH, AND FAMILY SUPPORT DOMAINS |

| Identifier | Return Reference | Explanation |
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| ELECTION OF MEMBERS AND THEIR RIGHTS | FORM 990, PAGE 6, PART VI, LINE 7A | DENVER EARLY CHILDHOOD COUNCIL'S BY LAWS STIPULATE UNDER ARTICLE IV, THAT "THE BOARD SHALL HAVE TWO DIRECTORS APPOINTED BY THE MAYOR OF THE CITY AND COUNTY OF DENVER, ONE OF WHOM WILL BE A DENVER HUMAN SERVICES DESIGNEE, AND TWO DIRECTORS APPOINTED BY THE SUPERINTENDENT OF DENVER PUBLIC SCHOOLS, ONE OF WHOM WILL BE AN EARLY EDUCATION DEPARTMENT DESIGNEE." |

| Identifier | Return Reference | Explanation |
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| ORGANIZATION'S PROCESS USED TO REVIEW FORM 990 | FORM 990, PAGE 6, PART VI, LINE 11B | DENVER EARLY CHILDHOOD COUNCIL'S FINANCE AND AUDIT COMMITTEE REVIEWED THE 2012 FORM 990 AND THEN THE BOARD TREASURER PRESENTED THE 990 TO THE BOARD MEMBERS FOR APPROVAL PRIOR TO SUBMISSION TO THE IRS |

| Identifier | Return Reference | Explanation |
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| ENFORCEMENT OF CONFLICTS POLICY | FORM 990, PAGE 6, PART VI, LINE 12C | DENVER EARLY CHILDHOOD COUNCIL STATES CLEARLY IN ITS CONFLICT OF INTEREST POLICY THAT "PARTICIPANTS OF THE DECC ARE COMMITTED TO COMMUNICATING FULLY WITH THE DECC AND ARE EXPECTED TO DISCLOSE ANY RELATIONSHIP OR COMMITMENT WHICH COULD AFFECT THE IMPARTIAL FULFILLMENT OF THEIR ROLE IN THE AFFAIRS OF THE DECC " THE POLICY FURTHER STIPULATES THAT "A DISCLOSURE FORM WILL BE SIGNED BY DIRECTORS ANNUALLY AND REVIEWED BY THE EXECUTIVE COMMITTEE, HIGHLIGHTING ANY ACTUAL OR POTENTIAL CONFLICTS OF INTEREST" |

| Identifier | Return Reference | Explanation |
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| COMPENSATION PROCESS FOR TOP OFFICIAL | FORM 990, PAGE 6, PART VI, LINE 15A | ANNUALLY, THE EXECUTIVE COMMITTEE OBTAINS RESEARCH AND INFORMATION IN ORDER TO MAKE A RECOMMENDATION TO THE FULL BOARD FOR THE COMPENSATION OF THE EXECUTIVE DIRECTOR. RESEARCH INCLUDES, SALARY AND BENEFIT STUDIES FROM INDEPENDENT SOURCES, INFORMATION OBTAINED FROM 990 FILINGS OF SIMILAR ORGANIZATIONS, AND OTHER DATA. |

| Identifier | Return Reference | Explanation |
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| GOVERNING DOCUMENTS DISCLOSURE EXPLANATION | FORM 990, PAGE 6, PART VI, LINE 19 | THE PUBLIC MAY ACCESS THESE DOCUMENTS VIA THE DENVER EARLY CHILDHOOD COUNCIL'S WEBSITE, INDEPENDENT THIRD-PARTY WEBSITES SUCH AS GUIDESTAR, AND BY REQUESTING HARD COPIES EITHER IN PERSON AT THE PRINCIPAL OFFICE OR BY PHONE OR EMAIL |

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| CHANGE IN FINANCIAL REVIEW PROCESS | FORM 990, PAGE 12, PART XII, LINE 2C | THERE HAVE BEEN NO CHANGES FROM THE PRIOR YEAR |