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Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form
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)

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

2008**Open to Public
Inspection****A** For the 2008 calendar year, or tax year beginning **7/01/08**, and ending **6/30/09****B** Check if applicable

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

Please
use IRS
label or
print or
type.
See
Specific
Instruc-
tions**C** Name of organization**DENVER BALLET GUILD**

Number and street (or P O box, if mail is not delivered to street address)

PO Box 2656

Room/suite

City or town, state or country, and ZIP + 4

Littleton**CO 80161-2656****D** Employer identification number**74-2107342****E** Telephone number**303-347-0860****F** Group ExemptionNumber **▶**

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach
a completed Schedule A (Form 990 or 990-EZ).

G Accounting method ☐ Cash ☒ AccrualOther (specify) **▶****I** Website: **▶ www.denverballetguild.org****H** Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)**J** Organization type (check only one) — ☒ 501(c) (**3**) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ **▶ \$ 526,050****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	32,911
	2	Program service revenue including government fees and contracts	2	384,381
	3	Membership dues and assessments	3	96,720
	4	Investment income	4	10,898
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach sch)	5c	
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
	6a	Gross revenue (not including \$ of contributions reported on line 1)	6a	
	6b	Less direct expenses other than fundraising expenses	6b	
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe ▶ See Statement 2)	8	1,140	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶	9	526,050	
Expenses	10	Grants and similar amounts paid (attach schedule) See Statement 3	10	90,000
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	100
	15	Printing, publications, postage, and shipping	15	13,556
	16	Other expenses (describe ▶ See Statement 4)	16	445,351
	17	Total expenses. Add lines 10 through 16 ▶	17	549,007
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-22,957
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	699,114
	20	Other changes in net assets or fund balances (attach explanation) See Statement 5	20	-31,626
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21	644,531

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	950,991	862,406
23 Land and buildings		
24 Other assets (describe ▶ See Statement 6)	17,281	66,000
25 Total assets	968,272	928,406
26 Total liabilities (describe ▶ See Statement 7)	269,158	283,875
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	699,114	644,531

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Form **990-EZ** (2008)

P 20

Part VI Other Information (Note the statement requirements in the instructions for Part VI.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		X
37a Enter amount of political expenditures, direct or indirect, as described in the instr	37a	
b Did the organization file Form 1120-POL for this year?	37b	X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations. Enter		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ , section 4955 ▶		
b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I	40b	X
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d Enter amount of tax on line 40c reimbursed by the organization		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	X
41 List the states with which a copy of this return is filed. ▶ None		
42a The books are in care of ▶ Dianne Ripley Telephone no. ▶		
15 Vista Road		
Located at ▶ Englewood, CO ZIP + 4 ▶ 80113		
b 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)?	42b	X
If "Yes," enter the name of the foreign country ▶		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	X
If "Yes," enter the name of the foreign country: ▶		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here ▶ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

Part VII Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51

- 46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
- 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a Did the organization make any transfers to an exempt non-charitable related organization?
- b If "Yes," was the related organization(s) a section 527 organization?
- 50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

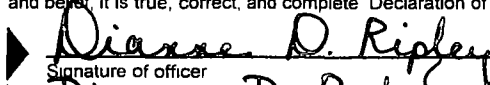
	Yes	No
46		X
47		X
48		X
49a		X
49b		

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$100,000				

- 51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

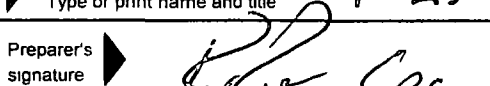
(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		
Total number of other independent contractors each receiving over \$100,000		

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  **Date** 5/10/10

Type or print name and title Dianne D. Ripley, Treasurer

Paid Preparer's Use Only

Preparer's signature  Date 4/27/10 Check if self-employed ☐

Firm's name (or yours if self-employed), address, and ZIP + 4 Taylor Roth and Company
800 Grant St Ste 310
Denver, CO 80203-2944

Preparer's Identifying Number (See instr.) EIN 20-3746583
Phone no 303-830-8109

May the IRS discuss this return with the preparer shown above? See instructions ☐ Yes ☐ No

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1-3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	%
16a 33 1/3 % support test—2008. 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 ► <input type="checkbox"/>		
b 33 1/3 % support test—2007. 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 ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2008. 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 ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2007. 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 ► <input type="checkbox"/>		
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 ► <input type="checkbox"/>		

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	99,341	141,574	143,825	124,792	193,438	702,970
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	458,432	478,872	416,075	436,309	384,381	2,174,069
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 1-5	557,773	620,446	559,900	561,101	577,819	2,877,039
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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000				17,062	21,358	38,420
c Add lines 7a and 7b				17,062	21,358	38,420
8 Public support (Subtract line 7c from line 6)	557,773	620,446	559,900	544,039	556,461	2,838,619

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	557,773	620,446	559,900	561,101	577,819	2,877,039
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,608	18,697	23,404	17,595	10,898	77,202
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	6,608	18,697	23,404	17,595	10,898	77,202
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.)					1,140	1,140
13 Total support. (Add lines 9, 10c, 11, and 12.)	564,381	639,143	583,304	578,696	589,857	2,955,381
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 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 2008 (line 8, column (f) divided by line 13, column (f))	15	96.0492 %
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	96.5185 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	2.6123 %
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	3.4815 %

19a 33 1/3 % support tests—2008. 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—2007. 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 explanation required by Part II, line 10, Part II, line 17a or 17b, or Part III, line 12. Provide any other additional information. (see instructions)

Part III, Line 12 - Other Income Detail

Other income	\$	1,140
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Federal Statements

Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

<u>Description</u>	<u>Amount</u>
Membership	\$
Fall Membership Event	4,150
Membership Dues	25,700
Membership	8,360
Membership:Lifetime Membershi	6,000
Memebership Dues	-2,580
Cygnettes Membership	4,160
Membership-Le Bal	2,600
Membership-Les Dem's	2,580
ADMINISTRATIVE:Membership:Mem	45,750
Total	\$ 96,720

Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

<u>Description</u>	<u>Amount</u>
Miscellaneous	\$ 1,140
Total	\$ 1,140

Federal Statements

Statement 3 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid

Name and Address	Description of Property	Cash Contribution	Relationship to Organization		Class of Activity		Date of Gift		Purpose
			Noncash Contribution	Book Value	Book Value Explanation	FMV Explanation			
David Taylor Dance Theatre PO Box 140750 Edgewater, CO 80214		10,000							
Colorado Ballet 1278 Lincoln St Denver, CO 80203		25,000							
Cleo Parker Robinson Dance 119 Park Avenue West Denver, CO 80205		14,000							
Ballet Nouveau Colorado 3001 Industrial Lane #12 Broomfield, CO 80020		15,000							
Total									
		64,000							

Federal Statements**Statement 4 - Form 990-EZ, Part I, Line 16 - Other Expenses**

Description	Amount
Expenses	\$
Travel/Airfare Expense	2,545
Meeting	5,853
Insurance	2,299
Other Expenses	9,328
Scholarships	25,140
Newsletter	6,451
Performances	160,995
Database	1,494
Professional services	4,500
Membership	5,251
Special event direct expe	216,035
Dues and subscriptions	5,460
Total	\$ 445,351

Statement 5 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
Unrealized/Realized Gains	\$
Unrealized/Realized Gains	-31,626
Total	\$ -31,626

Statement 6 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beginning of Year	End of Year
Accounts Receivable	\$ 2,390	\$ 36,053
Prepaid Expenses and Deferred Charges	14,891	29,947
	17,281	66,000

Statement 7 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Beginning of Year	End of Year
Accounts Payable and Accrued Expenses	\$ 85,103	\$ 105,912
Deferred Revenue	184,055	177,963
	269,158	283,875

Federal Statements**Statement 8 - Form 990-EZ, Part III, Line 28 - Statement of Program Service
Accomplishments**Description

The Denver Ballet Guild makes a significant impact on the community by awarding grants to professional dance companies by providing financial scholarships for young dancers and by offering dance education. The goals of the Guild's programs are to promote excellence in performance and to increase the size of dance audiences.

DBG DENVER BALLET GUILD
74-2107342
FYE: 6/30/2009

Federal Statements

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Statement 9 - Form 990EZ, Part IV - List of Officers, Directors, Trustees and Key Employees

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Mrs Gary Bell 6973 South Olive Way Centennial, CO 80112	Past Pres	5	0	0	0
Ms. Virginia Danna 11 Club Lane Columbine Valley, CO	President	5	0	0	0
Mrs. Richard Duke 934 S. Josephine Street Denver, CO 80209	Pres Elect	5	0	0	0
Mrs. James Hansen 18 Crestmoor Drive Denver, CO 80220	Rec Sec	5	0	0	0
Mrs. David Zatterman 25 Huntwick Lane Cherry Hills Village, CO 80113	Treasurer	5	0	0	0
Mrs. Henry Ripley	Treas Elect	5	0	0	0
Mrs. George Hills 2305 S. Hoyt Street Lakewood, CO 80227	VP Comm Enri	5	0	0	0
Mrs. Christopher Elliott 6560 E. Berry Ave Greenwood Village, CO 80111	CO-VP Pres	5	0	0	0
Mrs. Stanley Galansky 3 Polo Club Drive Denver, CO 80209	CO-VP Pres	5	0	0	0
Mrs. Louise Douglass 2450 Cherryridge Rd	CO-FR Deve	5	0	0	0

Federal Statements

Statement 9 - Form 990EZ, Part IV - List of Officers, Directors, Trustees and Key Employees (continued)

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Cherry Hills Village, CO 80113					
Mrs. Debra Wilcox 7490 South Harrison Way Centennial, CO 80122	CO-FR Deve	5	0	0	0
Mrs. Barry Gatz 486 Jackson St Denver, CO 80206	VP FR	5	0	0	0
Mrs. Barry Gatz 486 Jackson St Denver, CO 80206	VP Marketing	5	0	0	0
Mrs. Michael Scheid 1955 Mountain Laurel Circle Highlands Ranch, CO 80126	VPMembershi	5	0	0	0
Mrs. Greg Sippel 865 Pontiac Street Denver, CO 80220	VP School Pr	5	0	0	0
Mrs. Paul Wissmann 4710 S. Downing St Cherry Hills Village, CO 80113	CO-VP Pres	5	0	0	0
Mrs. William Jolliffe 5778 S. Galena St Greenwood Village, CO 80111	CO-VP Pres	5	0	0	0
Mrs. Michael O'Neal 27 Huntwick Lane Englewood, CO 80113	CO-VP Social	5	0	0	0
Mrs. Alexander Read 25 Viking Dr	CO-VP Social	5	0	0	0

Federal Statements

Statement 9 - Form 990EZ, Part IV - List of Officers, Directors, Trustees and KeyEmployees (continued)

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Englewood, CO 80113					
Mrs. Michael Brennan 16896 Maplewood Dr Aurora, CO 80016	Database Sup	5	0	0	0
Mrs. Stuart Kassan 9940 E. Progress Circle Greenwood Village, CO 80111	Camp Sec	5	0	0	0
Mrs. Gary Buntmann 1960 E. Belleview Lane Greenwood Village, CO 80121	Historian	5	0	0	0
Mrs. Christopher Harding 4071 Preserve Pkwy North Greenwood Village, CO 80121	Newsletter	5	0	0	0
Mrs. David S. Harmon 11434 Pine Valley Dr Franktown, CO 80116	Parliamentar	5	0	0	0
Mrs. Sydney Lee Terry Jr. 3840 South Narcissus Way Denver, CO 80237	Publicity	5	0	0	0
Mrs. Douglas Adams 4681 S. Columbine Court Englewood, CO 80113	Celebration	5	0	0	0
Mrs. James Wilson 18556 East Long Ave Centennial, CO 80016	Bylaws	5	0	0	0
Mrs. Stuart Kassan 9940 E. Progress Circle	Endowment	5	0	0	0

Federal Statements

Statement 9 - Form 990EZ, Part IV - List of Officers, Directors, Trustees and Key Employees (continued)

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Greenwood Village, CO 80111					
Mrs. Henry Ripley	Internal Aud	5	0	0	0
Mrs. Christopher Pacetti 7037 S. Cook Court Littleton, CO 80122	LeBal de Bal	5	0	0	0
Mrs. Mitchell Achee 6 Sedgwick Dr Englewood, CO 80113	Les Cygnette	5	0	0	0
Mrs. Mitchell Achee 6 Sedgwick Dr Englewood, CO 80113	Nominating	5	0	0	0
Mrs. Andrea Dutton-Frieson 6867 S. Franklin Cir Centennial, CO 80122	Les Demoisel	5	0	0	0
Mrs. Larry Underwood 12031 West 54th Ave Arvada, CO 80002	LeBal de Bal	5	0	0	0
Mrs. David Hoffman 1500 E. Layton Ave Cherry Hills Village, CO 80113	Vol Recognit	5	0	0	0
Mrs. John Kucera 6178 S. Alton Way Greenwood Village, CO 80111	Vol Recognit	5	0	0	0
Mrs. Mitchell Achee 6 Sedgwick Dr Englewood, CO 80113	Vol Recognit	5	0	0	0

Federal Statements

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Statement 9 - Form 990EZ, Part IV - List of Officers, Directors, Trustees and Key Employees (continued)

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Mrs. Mark Alan Betker PO Box 1082 Castle Rock, CO 80104	BD Notebooks	5	0	0	0
Mrs. David S. Harmon 11434 Pine Valley Dr Franktown, CO 80116	Dance Dates	5	0	0	0
Mrs. Douglas Kelsall 6177 E. Princeton Ave Englewood, CO 80111	Database Ent	5	0	0	0
Mrs. Gary Bell 6973 S. Olive Way Centennial, CO 80112	Database Ent	5	0	0	0
Mrs. Kim Koehn 5701 S. Ash St Greenwood Village, CO 80121	Lunch Coord	5	0	0	0
Mrs. Richard Dehncke 1323 Cherryville Rd Greenwood Village, CO 80121	Ad Hoc Comm	5	0	0	0
Tracia Tayon 9540 Newton St Westminster, CO 80031	Mailing	5	0	0	0
Mrs. Larry Emmons 7290 S. Andes Court Centennial, CO 80016	BD Education	5	0	0	0
Mrs. Michael Brennan 16896 Maplewood Dr Aurora, CO 80016	Communicatio	5	0	0	0

Federal Statements

Statement 9 - Form 990EZ, Part IV - List of Officers, Directors, Trustees and Key Employees (continued)

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Mrs. Thomas Campbell 2122 South Clayton St Denver, CO 80210	Dance Dates	5	0	0	0
Mrs. Mark Vandehey 555 S. Corona St Denver, CO 80209	Database Ent	5	0	0	0
Mrs. John Wells 3231 S. Magnolia St Denver, CO 80224	Photography	5	0	0	0
Tracia Tayon 9540 Newton St Westminster, CO 80031	Photography	5	0	0	0
Mrs. Michael Norton 8946 S. Foreest Dr Highlands Ranch, CO 80126	Les Cynettes	5	0	0	0
Mrs. Christopher Elliott 6560 E. Berry Ave Greenwood Village, CO 80111	Les Demoisel	5	0	0	0
Mrs. James Klein 1909 26th Street, Suite One C Boulder, CO 80302	Legal Adviso	5	0	0	0
Mrs. Larry Underwood 12031 West 54th Ave Arvada, CO 80002	Guild Adviso	5	0	0	0

Form **8868**
(Rev. April 2009)**Application for Extension of Time To File an
Exempt Organization Return**

OMB No 1545-1709

Department of the Treasury
Internal Revenue Service► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)**A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits

Type or print File by the due date for filing your return. See instructions	Name of Exempt Organization	Employer identification number
	DENVER BALLET GUILD	74-2107342
	Number, street, and room or suite no. If a P O box, see instructions PO Box 2656	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions Littleton CO 80161-2656	

Check type of return to be filed (file a separate application for each return)

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ► **Trece O'Donnell**

Telephone No. ►

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach

a list with the names and EINs of all members the extension will cover

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **2/15/10**, to file the exempt organization return for the organization named above. The extension is for the organization's return for

- ☐ calendar year or
 ► ☒ tax year beginning **7/01/08**, and ending **6/30/09**

- 2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

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P If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box ☒

Note Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

● If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)

Type or print File by the extended due date for filing the return. See instructions	Name of Exempt Organization	Employer identification number
	DENVER BALLET GUILD	74-2107342
	Number, street, and room or suite no. If a P O box, see instructions	For IRS use only
	PO Box 2656	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	Littleton CO 80161-2656	

Check type of return to be filed (File a separate application for each return)

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input checked="" type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

● The books are in the care of **▶ Trece O'Donnell**

Telephone No **▶**

FAX No **▶**

● If the organization does not have an office or place of business in the United States, check this box ☐

● If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) **▶** If this is
for the whole group, check this box **▶** ☐ If it is for part of the group, check this box **▶** ☐ and attach a

list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until **5/15/10**
- 5 For calendar year **7/01/08**, or other tax year beginning **7/01/08**, and ending **6/30/09**
- 6 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension

Additional time is requested to gather information to prepare a complete and accurate return.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete and that I am authorized to prepare this form

Signature **▶** *[Signature]*

Title **▶** *Partner*

Date **▶** **2/12/10**

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