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. 990-EZ

Department of the Treasury Internal Revenue Service

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 494(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 \$500,000 and total
assets less than \$1,250,000 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

2009

Open to Public Inspection

ΑI	For the	2009 calend	ar year,	or tax year beginning , 2009, and en	nding			, 20	
В	Check if a	pplicable	Please	C Name of organization	DE	mployer ic	lentific	ation number	
	Address o	change	ge use IRS DOLLS FOR DAUGHTERS AND KENZIS KIDZ				26-4678835		
	Name cha	ange	print or Number and street (or P O box, if mail is not delivered to street address) Room/suite E Telep				umber		
==	Initial retu	1- IPO POV 20200E					3-728	-4283	
=	Specific O								
=	Amended Application	Group Exemption Number ▶							
느									
	o Sec	tion 501(c)(3)	-			-	☑ (Cash	
_			a cor	npleted Schedule A (Form 990 or 990-EZ).	Other (spe				
				H	l Check ▶	✓ If the •	organiz	zation is not	
1 \	Nebsit	te:▶ <u>www</u>	.dollsfo	rdaughters.com	required to	o attach S	chedul	le B (Form 990,	
J 1	Гах-ехе	empt status (check o	nly one) — ☐ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527	990-EZ, o	r 990-PF)			
K	Check I	▶ ☐ If th	e organi	zation is not a section 509(a)(3) supporting organization and its gross receip	ots are norm	ally not m	ore tha	an \$25,000. A	
	Form 9		•	turn is not required, but if the organization chooses to file a return, be sure		-		,	
_				e 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Fo		▶ 9	:		
_	art I			enses, and Changes in Net Assets or Fund Balances (Se		truction	s for	Part I.)	
_	1			ts, grants, and similar amounts received		. 1		23132	
	}		_	_		·		23132	
	2	-		revenue including government fees and contracts		. 2			
	3		•	s and assessments		. 3			
	4	Investmen				4		5	
	5a			m sale of assets other than inventory 5a		_			
	b	Less: cost	or othe	er basis and sales expenses					
•	С	Gain or (lo	ss) fron	n sale of assets other than inventory (Subtract line 5b from line 5a))	. <u>5c</u>		0	
ž	6	Special event	s and act	ivities (complete applicable parts of Schedule G). If any amount is from gaming, che	eck here 🕨 📋]			
Revenue	а	Gross reve							
ě		a Gross revenue (not including \$ of contributions reported on line 1)							
_	1 .								
								0	
		7a Gross sales of inventory, less returns and allowances							
	Ь								
			•			7c		0	
	1	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)							
	8		•) 8		0	
_	9			dd lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	!	▶ 9		23137	
	10			r amounts paid (attach schedule)		. 10		10484	
	11	-		r for members		11		0	
es	12			mpensation, and employee benefits		12		0	
Expenses	13	Profession	al fees	and other payments to independent contractors		13		0	
Ř	14-	Occupancy, rent, utilities, and maintenance						0	
ш	15	Ritting, publications, postage, and shipping						1583	
	16	Other expenses (descripte) see attached description						1874	
	12	Totalexpe	enses	Add lines 10 through 16		▶ 17		13941	
S	18	Excess of	(deficit)	for the year (Subtract line 17 from line 9)		. 18		9196	
šet	19	Net assets	or fun	id_ballances at beginning of year (from line 27, column (A)) (must	t agree wit	th 🗌			
Net Assets		engt-of-yea	anyfigune	reported on prior year's return) net assets or fund balances (attach explanation).	٠.	19		0	
et.	20_	Other char	nges in	net assets or fund balances (attach explanation)		20		0	
ž	21							9196	
13	art II	Balance	e Shee	ets. If Total assets on line 25, column (B) are \$1,250,000 or more,	file Form 9	≥ 21 990 instea	ad of F		
	(See the instructions for Part II.) (A) Beginning of							B) End of year	
20) C	ach cavings	andia	· · · · · · · · · · · · · · · · · · ·	. 4 _ 09		22	7826	
22 Cash, savings, and investments								7020	
							23	1370	
24 Other assets (describe ► Dolls and toys, gift cards) 25 Total assets							25		
25			- احا م					9196	
26) IC	otal liabilitie	s (desc	palances (line 27 of column (B) must agree with line 21)			26	9196	
	, P46	er assets or	TUTIES F	rarances note 27 Or COMMONDE INUSTRACTER WITH IMP 21)		1)	17/1	9 196	

Form 990-EZ (2009)

	330-122 (2003)						rage Z
Par							Expenses
Desc man	is the organization's primary exemine what was achieved in carry her, describe the services provide	ring out the org	anization's exempt purpos	ses. In a clear a	nd concise	orgar 4947	ured for section (3) and 501(c)(4) nizations and section (a)(1) trusts, optional
	program title.					for ot	hers)
28	Dolls for Daughters collected and p service programs. 1096 dolls and t				er social		
) If this amount	includes foreign grants, ch	eck here	. ▶ 🗆	28a	13941
29							
	(Grants \$) If this amount	includes foreign grants, ch	eck here	. ▶ □	29a	
30							
			includes foreign grants, ch			30a	
31	Other program services (attach so	hedule)					
			includes foreign grants, ch		<u> </u>	31a	
	Total program service expenses				. •	32	13941
Par	List of Officers, Directors, T	rustees, and Key		· · · · · · · · · · · · · · · · · · ·		_	
	(a) Name and address		(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0)	(d) Contribution employee benefit deferred compe	t plans &	(e) Expense account and other allowances
370	-airrax St, Denver, CO 80220		President, 5 hours	0		0	0
9900	y Vera Richfield St, Commerce City, CO 80	022	VP & Treasurer, 4 hours	0		0	0
	her Nehls E 28th Ave, Unit 1, Denver, CO 8023	8	Secretary, 3 hours	0		0	0
	Jurjovec		Chair of Kenzis Kidz, 3 hrs				
1646	S Deframe St, #B6, Lakewood, CO 8	0228		0		0	0

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							_

Part	Other Information (Note the statement requirements in the instructions for Part V.)			-90
			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	33		1
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		1
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 why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		✓
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 outstanding at the end of the period covered by this return?	38a		1
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9	1		
	Gross receipts, included on line 9, for public use of club facilities	1		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under.			
	section 4911 ▶ 0 , section 4912 ▶ 0 ; section 4955 ▶ 0			
ь	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		✓
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization			
е	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		1
41	List the states with which a copy of this return is filed. ▶ Colorado			
42a	The organization's books are in care of ▶ Emily Vera Telephone no. ▶	303-72	8-428	3
	Located at ▶ 9900 Richfield St, Commerce City, CO ZIP + 4 ▶	800)22	
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		Yes	No
	account)?	42b	ļ	- √
	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.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country. ▶	42c		✓
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			
				T
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			,
45	Form 990-EZ	44	 -	✓
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		✓

Page	4

Part VI

Part V	Section 501(c)(3) organizations and 501(c)(3) organizations and section 494 and complete the tables for lines 50 are	47(a)(1) nonexempt cha	exempt charital ritable trusts mu	ole trusts only. A st answer question	II sec ons 46	tion 3-49	
	Did the organization engage in direct or indirect candidates for public office? If "Yes," complete		ties on behalf of o			Yes	No
	•				46 47		Y
	Did the organization engage in lobbying activitie	•					- V
	Is the organization a school as described in section Did the organization make any transfers to an expense to a expense to an expense to a expense		•	e	48 49a		V
	If "Yes," was the related organization a section 5		eo organization?	•	49b	<u> </u>	1
	Complete this table for the organization's five hi		ovece (other than	officers directors			d kov
50	employees) who each received more than \$100,	Onest compensated emp	the organization	officers, directors,	ter "N	one'	u ney
	employees) who each received more than \$100,	(b) Title and average	(c) Compensation	(d) Contributions to		Exper	
	(a) Name and address of each employee paid more	hours per week	(4, 45	employee benefit plans & deferred compensation	acc	count a	and
NONE	than \$100,000	devoted to position	- 	deterred compensation	other	aliowa	inces
NONE							
				ļ	ļ		
					ĺ		
		ļ	į		1		
	(a) Name and address of each independent contractor	paid more than \$100,000	(b) T ₁	/pe of service	(c) Cor	mpens	ation
NONE					_		
d	T-toloring house of the condensate of the conden		200				
	Total number of other independent contractors of	each receiving over \$100,	000 ▶				
	Under penalties of perjury, I declare that I have examinand belief, it is true, correct, and complete Declaration	ed this return, including accompa of preparer (other than officer) is	anying schedules and st based on all informatio	atements, and to the bes	any kno	knowl	edge e
Sign Here	Signature of officer Date						
	Emily M. Vera, Vice President & Treasure Type or pont name and title	<u>r</u>			_		
Paid	Preparer's signature	Date	Check if self-	Preparer's identifying nur	nber (Se	 e instruc	tions)
Prepare Use On	Firm's name (or	's Firm's name (or					
	address, and ZIP + 4			hone no Þ			
May the	e IRS discuss this return with the preparer show	n above? See instructions	<u> </u>	<u> ▶ </u>	Yes		No
				Fo	rm 99 (D-EZ	(2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047

2009
Open to Public Inspection

Employer identification number Name of the organization 26 DOLLS FOR DAUGHTERS AND KENZIS KIDZ 4678835 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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) R A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33\% % 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\% % 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.) ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 b 🗀 Type II **c** Type III–Functionally integrated d ☐ Type III-Other a 🗌 Type I 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the q following persons? No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) |11g(i) and (iii) below, the governing body of the supported organization? |11g(ii) (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? 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (iii) Type of organization (iv) Is the organization (v) Did you notify (ii) FIN (vi) is the (vii) Amount of organization in col organization (described on lines 1-9) in col (i) listed in your the organization in support above or IRC section governing document? (i) organized in the col (i) of your (see instructions)) support? Yes Yes No No Yes

Total

'Péwill' 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 (d) 2008 (a) 2005 (b) 2006 (c) 2007 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) ⊳ Gifts, grants, contributions, and membership fees received. (Do not 3300 33025 0 0 6593 23132 include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on 0 O 0 0 0 0 its behalf The value of services or facilities furnished by a governmental unit to the 0 0 0 0 n organization without charge 0 0 3300 6593 23132 33025 Total. Add lines 1 through 3 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 n shown on line 11, column (f) Public support. Subtract line 5 from line 4. 33025 Section B. Total Support (c) 2007 (e) 2009 (f) Total (a) 2005 (b) 2006 (d) 2008 Calendar year (or fiscal year beginning in) > 0 0 3300 6593 23132 33025 Amounts from line 4 Gross income from interest, dividends. payments received on securities loans. rents, royalties and income from similar 0 0 5 5 Net income from unrelated business activities, whether or not the business is 0 0 0 0 regularly carried on Other income Do not include gain or 10 loss from the sale of capital assets 0 0 n n (Explain in Part IV) 33030 11 Total support. Add lines 7 through 10 . 33030 12 Gross receipts from related activities, etc. (see instructions) 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 Section C. Computation of Public Support Percentage 14 % Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 15 % Public support percentage from 2008 Schedule A, Part II, line 14 16a 33%% support test-2009. If the organization did not check the box on line 13, and line 14 is 33%% or more, check this box \triangleright \square and stop here. The organization qualifies as a publicly supported organization 331/2 % support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 331/2 % or more, check this box and **stop here**. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2009. 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 - 2008. 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions \triangleright Schedule A (Form 990 or 990-EZ) 2009 Page 3 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) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total grants, Gifts. contributions. membership fees received (Do not include any "unusual grants.") . 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. Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 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 Public support (Subtract line 7c from line 6) Section B. Total Support (b) 2006 (c) 2007 (d) 2008 (f) Total (a) 2005 (e) 2009 Calendar year (or fiscal year beginning in) > Amounts from line 6 . 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, 13 and 12) 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) 14 \triangleright organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) . . . 15 % Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage % 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . % 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19a 331/3 % support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 331/3 %, and line 17 is not more than 331/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization ho \Box

331/3 % support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33/3 %, and line 18 is not more than 331/5 %, check this box and stop here. The organization qualifies as a publicly supported organization $\,\triangleright\,\Box$ Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions >

Schedule A (F	Form 990 or 990-EZ) 2009	Page 4
Part IV	Supplemental Information. Complete this part to provide the Part II, line 17a or 17b, and Part III, line 12. Provide any other a	explanations required by Part II, line 10;
· · · · · · · · · · · · · · · · · · ·		
• • • • • • • • • • • • • • • • • • • •		

Form 990-EZ, Line 16 Schedule	
Bowl-a-thon	461.32
Donated goods given away	197.74
Thank you gift	100.00
Membership fee non-profit associa	50.00
Paypal fee	31.02
Board Meeting Expense	284.36
IRS 501c3 filing fee	750.00
	1,874.44

Form 990-EZ, Line 10 Schedule

Name	Address	Phone Number	Conact Person	Email Address	Number of Dolls	FMV/Book Value
	2301 Lawrence Street, Denver, CO				450	
Samartain House	80205		Lyric Ruab	LRaub@ccdenver org	150	\$1,434 81
	1649 Downing St			vbowers@safehouse-		
SafeHouse Denver	Denver, CO 80218	303-318-9959	Vibian Bowers	denver org	100	\$956 54
The Gathering Place	1535 High St Denver, CO 80218	303-321-4198	Justine Zollo	justine@the- gatheringplace org	135	\$1,291 33
Warren Village	1323 Gilpin Street Denver, CO 80218	303-321-2345	Elyse Montgomery	EMontgomery@warren village org	50	\$478 27
Denver Children's		303-399-4890	Joan Richardson	jrichardson@denverchil	270	\$2,582 66
Home	Denver, CO 80220 1741 Gaylord Street Denver, CO	303-333-4830	Joan Richardson	drenshome.org	270	\$2,382 00
Judi's House	80206	720-941-0331	Jason	Jason@judishouse.org	16	\$153 05
Inter-Faith Community Services	3370 South Iriving St Englewood, CO 80110	303-789-0501	Maria Pearson	mariap@ifcs org	50	\$478 27
Inter-Faith Hospitality of				ashleyallenby3@gmail		
Greater Denver	419 Lipan Street	303-675-0713	Ashley Allenby	com	15	\$143 48
Boys and Girls Club of Denver	2017 West 9th Ave Denver, CO 80204	303-892-9200 ext	Kathy Luna	KathyL@bgcmd org	303	\$2,898 32
or beliver	<u> </u>	107	Kathy Luna	Kathyteobgenia org	303	\$2,050 32
Sacred Heart House	2844 Lawrence Street Denver, CO 80205	303-296-6689	Carrie Hansen	pa@sacredhearthouse.	1	\$9 57
	2544 Champa Street Denver, CO	100,000			_	1
Champa House	80205	303-294-9961			6	\$57.39

\$10,483 70

Dolls distributed include baby dolls, barbie dolls, and other assorted dolls. The fair market value and book value is reported as the same amount and is determined on an average value per doll based on contributed doll values and purchased doll values. The per doll average is \$9 56542.