

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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 \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

2009

OMB No 1545 1150

Open to Public Inspection

	Α	For the 2009 ca <u>lendar</u>	year, or tax year beginning	, 2009, and	ending			,
	<u>B_</u>	Check if applicable	C			D Emp	loyer	identification number
\mathfrak{Q}		Address change Please use IRS	84	84-1449882				
\mathbb{Q}	Ш	Name change label or print or	E Tele	Telephone number				
S	\vdash	Initial return type	1 30	303-825-0122				
\mathbb{Z}	H	Termination Specific Instruc-	DENVER, CO 80204					
SCANNED		Application pending tions.	<u> </u>			Nur	<u>nber</u>	xemption
AUG		• Section 501(c)(3) must atta) organizations and 4947(a)(1) nonexempt charitab och a completed Schedule A (Form 990 or 990-EZ).	le trusts	G Accounting Other (spe		d [_	Cash X Accrual
					H Check ►			ganization is not
≫		Website: ► <u>WWW.CC</u> Tax-exempt status (check o		a)(1) or 527	- 1 000 57	attach 990-PF	Sche	dule B (Form 990,
2			anization is not a section 509(a)(3) supporting orga	-77 -7 -1 -1		are norr	nally	not more than
2010		\$25,000 A Form 990-EZ	or Form 990 return is not required, but if the organizat	ion chooses to	file a return, be su			
	L	Add lines 5b, 6b, and instead of Form 990-E.	7b, to line 9 to determine gross receipts, if \$500,00 Z	0 or more, file	Form 990		► \$	263,053.
	Pa	rt I Revenue,	Expenses, and Changes in Net Assets or	Fund Bala	nces (See the	ınstru	ctior	
		 Contributions, git 	fts, grants, and similar amounts received				1	176,000.
		2 Program service	revenue including government fees and contracts			L	2	7,858.
		•	s and assessments				3	53,576.
		4 Investment incor		1 -	1	-	4	4,965.
			om sale of assets other than inventory	5 a				
	В		er basis and sales expenses	5 b	<u> </u>			
	Ë		ale of assets other than inventory (Subtract In 5b from In 5a) ctivities (complete applicable parts of Schedule G) If any amount	is from gaming	chael hara	. — 1	5 c	· · · · · · · · · · · · · · · · · · ·
	REVERU	a Gross revenue (r			check here	U	1	
	Ü	reported on line		6a	.1		- 1	
	E	•	enses other than fundraising expenses	6 b		\dashv		
			from special events and activities (Subtract line 6b from line 6a)		Ί		6c	
			eventory, less returns and allowances	7a	1	-		
		b Less cost of goo		71				
		_	oss) from sales of inventory (Subtract line 7b from	line 7a).			7 c	
) [8	20,654.
		9 Total revenue A	dd lines 1, 2, 3, 4, 5c, -6c, 7c, and 8			_ ▶[9	263,053.
			ar amounts paid (attach schedule)				10	
	_	11 Benefits paid to	or for member JUL 2 6 2010				11	
	E X P	12 Salaries, other c	or for members JUL 2 6 2010 Opposition and employee benefits				12	165,147.
	E	13 Professional fees		13	1,073.			
	S	14 Occupancy, rent	s and other payments to independent contractors, utilities, and maintenance			_	14	5,259.
	S	15 Printing, publicat	tions, postage, and shipping			-	15	21,232.
		16 Other expenses (desc	-) [-	16	42,472.			
		17 Total expenses.		17	235,183.			
	Δ	18 Excess or (defici		18	27,870.			
	N S	19 Net assets or fur	nd balances at beginning of year (from line 27, colu	mn (A)) (must	t agree with end-o	f-year -	19	241,884.
	N S E E T		n prior year's return) n net assets or fund balances (attach explanation)			⊢ ⊢	20	241,004.
	Ś	_	nd balances at end of year. Combine lines 18 through	ah 20		-	21	269,754.
	Pa		heets. If Total assets on line 25, column (B) are \$		more, file Form 99			
	<u> </u>	Dalance 5	(See the instructions for Part II)	11,230,000 01 1	(A) Beginning			(B) End of year
	22	Cash, savings, and ii	·			, 868.		266, 936.
		Land and buildings					23	
	24		pe ► SEE STATEMENT 3)		8	,294.	24	4,529.
	25					,162.	$\overline{}$	271,465.
	26		cribe ► <u>SEE STATEMENT 4</u>			,278.		1,711.
	27		alances (line 27 of column (B) must agree with line		241	,884.	27	269,754.
	BA	A For Privacy Act and	Paperwork Reduction Act Notice, see separate ins	tructions.				Form 990-EZ (2009)

Form 990-EZ (2009) COLORADO CRIM	INAL JUSTICE REFORM		84-	144988	32 Page
	Service Accomplishment	s (See the instruction	ons.)	E	xpenses
What is the organization's primary exempt purpose? Describe what was achieved in carrying ou describe the services provided, the numbe program title	SEE STATEMENT 5 If the organization's exempt pure of persons benefited, or other	poses In a clear and co relevant information for	oncise manner, conceach f	(Reduired 501(c)(3) organizati 4947(a)(1 for others	for section and (4) lons and section trusts, optional
** *** *** *** *** *** ***					
(Grants \$	f this amount includes foreign g	rants, check here		28 a	
29					
(Grants \$)	f this amount includes foreign g	rants, check here		29 a	
30					
(Grants \$	f this amount includes foreign g	rants, check here		30 a	
31 Other program services (attach sche					
	f this amount includes foreign o	rants, check here		31 a	
32 Total program service expenses (ad				32	
Part IV List of Officers, Directo	rs, Trustees, and Key En (b) Title and average hours	* *	, 		(See the instrs) Expense accoun
(a) Name and address	per week devoted to position	not paid, enter -0)	employee benefit plans deferred compensati	and and	l other allowance
CATHERINE GUERRERO 819 EAST 25TH AVE.	BOARD MEMBER			0.	0
DENVER, CO 80205					
JOE MAURO	TREASURE	0.		0.	C
2549 HIGH STREET	1.00	ł			
DENVER, CO 80205	- 7		•		
RICHARD JACKSON	BOARD MEMBER	0.		0.	0
145 W. 4TH	1.00				
DENVER, CO 80223					
DANI HARABURDA	BOARD MEMBER			0.	0
1313 WILLIAMS ST. #606	1.00)			
DENVER, CO 80218	CECDEMADA			_	
MARDY WILSON	SECRETARY			0.	0
2564 W 32ND AVE		'			
DENVER, CO 80211 JOHN RILEY	PRESIDENT	0.	-	0.	0
9165 E. FLOYD AVE	1.00				O
DENVER, CO 80231 CHRISTINE M DONNER	EXECUTIVE DIREC	0.		0.	0
1212 MARIPOSA STREET, STE DENVER, CO 80204					_
ROSEMARY MARSHALL	BOARD MEMBER	0.		0.	0
3451 E. 26TH AVE	1.00				
DENVER, CO 80203					
BAA		01/30/10	1	F	orm 990-EZ (200

Page **3**

33 Dut the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of seah activity." 34 Were any changes made to the organization or governing documents? If "Yes," attach a conformed copy of the changes 34 is the approach to the organization and engage and expendent of and and report the scores of from 98-1. 35 If the approach to all the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice reporting, and ploys to sequentents? If "Yes," has it filed a tax return on Form 990-T for this year? 36 Dut the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice reporting, and ploys to sequentents? 37 If "Yes," complete applicable parts of Schedule N. Permation, or significant disposition of net assets during the gross of the organization the Form 1126-PDL for this year? 38 Dut the organization before from or, 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? 38 Di If "Yes," complete Schedule I Part II and enter the total amount involved 39 Section 501(c)(7) organizations Enter amount of fax imposed on the organization during the year undersection \$10 C(3) organizations. Enter amount of fax imposed on the organization during the year undersection \$10 C(3) and \$10 C(4) organizations. Did the organization engage in any section 4958 excess benefit framescion during the year or is at wave that it relanged in an excess benefit transaction with a disqualified person in a prior year, and that the fransaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes, complete Schedule I Part II. 40 Exception 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization's prior Forms 990 or 990-E27 If "Yes, complete Schedule I Part II. 41 Exception 501(c)(3) and	Pai	TV Other information (Note the statement requirements in the histis for Part V) SEE STA	LEME	Yes	/ No
acan activity Al Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes 33 Were any changes made to the organization of organization of an expected on item 30.1 34 Were any changes made to the organization of an expected on item 30.1 35 Mere any changes made to the organization of an expected on ferm 390.7, attach a statement epidamiquely be organization to prove the scenae of ferm 30.1 36 John Herrich organization have unrelated bissness gross income of \$1,000 or more or was it subject to section 6033(e) notice reporting, and grosy tax requirements? 36 Did the organization have unrelated bissness gross income of \$1,000 or more or was it subject to section 6033(e) notice (with the organization organization organization and provided and provided provided in the provided provided provided in the state of the organization of political expenditures, dured or unfract, as described in the instructions 37 a Did the organization her form 1120-POL for this year? 37 a Enter amount of political expenditures, dured or unfract, as described in the instructions 37 a Did the organization her form 1120-POL for this year? 38 a Did the organization before year and still ordisationing at the end of the period covered by the refunding the year or year and still ordisationing at the end of the period covered by the refunding the year or year of the period covered by the refunding the year or year of the period covered by the refunding the year or year of the year or year of the organization during the year or year of the year or year of the organization during the year under section \$400 the year or year of the year or year of year or year of year of year or year of year or year of year or	22	Did the experience on any activity not provincely reported to the IDS2 If 'Voc.' attach a detailed december of		res	NO
15 If the organization had income from business schilllers, such as those reported on hiera 2 (6), and 7a (arrong others), but not reported on Farm 950 T, attack a statement episemia why the organization and enterpretary and the properties of the 1950 T. 25 If the organization have unrelated business pross income of \$1,000 or more or was it subject to section 6033(e) notice, a first year and proxy tax requirements? 26 Out the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 1951, compilete applicable parts of Stockdule N 27 a Enter amount of political expenditures, direct or indirect, as described in the instructions. 28 a Did the organization become from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made on a prior year and shill outstanding at the end of the period covered by this return? 28 a Did the granization become from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made on a prior year and shill outstanding at the end of the period covered by this return? 29 a Section 501(c)? organizations Enter 20 a Section 501(c)? organizations Enter amount of lax imposed on the organization during the year undersection 493 and 501(c)? organizations and the properties of dispulsed person in a prior year, and that the fransaction has not been reported on any of the organization of properties Schedule L, Part II 20 c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization and properties Schedule L, Part II 21 c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization and properties Schedule L, Part II 22 a The organizations. At any hime during the tax year, was the organization a party to a prohibited tax schedular year, did the organization have an interest more a sig	33	each activity			X
attable sistement epipeming why the organization did not report the internet on Form 980-T a Did the organization have unreliated business gross income of \$1,000 or more or was it subject to section 6035(e) notice reporting, and proxy tax requirements? 5b Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Nei," complete applicable parts of Schedden N 7a Enter amount of political expenditures, direct or indirect, as described in the instructions. 7a Enter amount of political expenditures, direct or indirect, as described in the instructions. 7a Enter amount of political expenditures, direct or indirect, as described in the instructions. 7a Enter amount of political expenditures, direct or indirect, as described in the instructions. 7a Enter amount of political expenditures, direct or indirect, as described in the instructions. 7a Enter amount of political expenditures, direct or indirect, as described in the instructions. 7a Enter amount of political expenditures, direct or indirect, as described in the instructions. 7a Enter amount of political expenditures, direct or indirect, as described in the instructions. 7a Enter amount of political expenditures, direct or indirect, as described in the instructions. 7a Enter amount of political expenditures, direct or indirect, as described in the instructions. 7a Enter amount of political expenditures, direct or indirect, as described in the instructions. 7a Enter amount or political expenditures and the instructions. 7a Enter amount or political expenditures and the instructions. 7a Enter amount or political expenditures and the instructions. 7a Enter amount or political expenditures and the instructions of the instructions. 7a Enter amount of the instructions of th	34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes	34		X
reporting, and proxy tax requirements? 38	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			
36 Dut the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete adjustable parts of Schedule N 37 a Enter amount of political expenditures, direct or indirect, as described in the instructions 38 a Did the organization brown 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? 38 a Did the organization brown 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? 38 bif 'Yes,' complete Schedule I, Part II and enter the total amount involved 39 Section 50 (Ic)(30) organizations. Enter amount of the period covered by this return? 40 Section 50 (Ic)(30) organizations. Enter amount of tex imposed on the organization during the year undersection 4912 — 0., section 4912 — 0., section 4912 — 0., section 4913 — 0. 50 Section 50 (Ic)(30) and 50 (Ic)(40) organizations. Dot 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 priory year, and that the transaction has not been reported on any of the organizations which a disqualified person in a priory year, and that the transaction has not been reported on any of the organization with a disqualified person in a priory year, and that the transaction has not been reported on any of the organization with a disqualified person in a priory year, and that the transaction has not been reported on any of the organization with a disqualified person in a priory year, and that the transaction has not been reported on any of the organization with a disqualified person in a priory year. And that the transaction is the priory of		reporting, and proxy tax requirements?			Х
year? If Yes, complete applicable parts of Schedule N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions bid the organization file Form 1120-POL for this year? 37a Did the organization berrow 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? bif Yes, complete Schedule L, Part II and enter the total amount involved 38b N/A 39 Section 501(c)(7) organizations circled on line 9 b Gross receipts, included on line 9, for public use of club facilities a linktation fees and capatal contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities section 4911 P 0, section 4912 D, section 4955 S, cossible 404 40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 P 0, section 4912 D, section 4955 S, cossible fees and capatal 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 c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization and 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 c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualitied 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 of disqualitied person in a prior year, and that the transaction are sections and the prior the section 4912 and 40c a			35 b		
b Did the organization file Form 112P-POL for this year? 33a 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? 35b 174 185		year? If 'Yes,' complete applicable parts of Schedule N	36		X
38a Did the organization borrow from, or make any loans to, any officer, director, frustee, 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? 38b 11 12 13 13 14 15 15 15 15 15 15 15					
any such loans made in a prior year and still outstanding at the end of the period covered by this return? 38a		-	3/0		X
amount involved 3 Section 501(c)(2) organizations Enter a Initiation fees and capital contributions included on line 9 a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9 for public use of club facilities 39 N/A 40 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. b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4955 • 0. b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization spinor Forms 990 or 990-EZ? If Yes, complete depersons during the year under sections 4912, 4955, and 4958 c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax in the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 c All organizations At any time during the tax year, was the organization a party to a prohibited tax sheller transaction? If Yes, complete form 886-T. List the states with which a copy of this return is filed > NONE 42 a The organizations books are in care of > THE ORGANIZATION	38 8	a 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?	38 a		Χ
a Institution fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 40 a 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 b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 * 0 b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 secess 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 organizations prior Forms 990 or 990-EZ? If Yes, complete Schedule L, Part I c 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 495. d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, "complete Form 8865-T" 40 Extension 1 Ext	l	olf 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A			
b Gross receipts, included on line 9, for public use of club facilities 40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 \(\times \) 0., section 4912 \(\times \) 0., section 4955 \(\times \) 0. b 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 disqualited person in a prior year, and that the transactions not been reported on any of the organization is prior forms 990 or 990 E2? If year, 1 and transaction and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4938 c 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 4938 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. e All organization of 15(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization. e All organizations. If Yes, 'complete Form 8865-T List the states with which a copy of this return is filed. NONE 42a The organization? 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)? If Yes, 'enter the name of the foreign country. See the instructions for exceptions and filing requirements for form TD F90-22.1, Report of a Foreign Bank and Financial Accounts. c 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. 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of ta					,
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 *					;
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 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 I., Part I c 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 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 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 imposed on organization managers or disqualified persons during the sample of the forganizations. Enter amount of tax imposed on organization and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified person in a prior year, and the view organization and the sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization approach to tax imposed on organization organization approach to a prohibited tax. 42 a The organizations Telephone no prior tax in the foreign country of the organization have an inferest in or a signature or other authority over a financial account in a foreign country over a financial account in a foreign					,
b 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 disgualified person in a prior year, and that the transaction has not been reported on any of the organization with a disgualified person in a prior year, and that the transaction of 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 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. 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. 40 e 42 a The organizations. books are in care of Part Organizations. 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 accountry over a financial account in a foreign country (such as a bank account, securities account, or other financial accountry. Ferm 40 b 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. 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. 44 Did the organization maintain any donor advised funds? If Yes, Form 990 must be completed instead of Form 990-EZ. 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If Yes, form 990-EZ.	40 (,
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-E2? If Yes, complete Schedule L, Part I C Section SO1(c)(3) and SO1(c)(4) organizations. Enter amount of tax imposed on organization analysis or disqualified persons during the year under sections 4912, 4955, and 4958 O. d Section SO1(c)(3) and SO1(c)(4) organizations. 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 886-T. 1 List the states with which a copy of this return is filed. NONE View organization's books are in care of THE ORGANIZATION Telephone no					-
c 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. 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 8865-T. List the states with which a copy of this return is filed. NONE 12	ı	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	40 ь		X
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 41 List the states with which a copy of this return is filed NONE 42a The organization's books are in care of THE ORGANIZATION Telephone no Located at 1212 MARIPOSA STE 6 DENVER CO DAILY HAND THE AND THE	(Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization	-	i.	
42a The organization's books are in care of ► THE ORGANIZATION	(Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization			
42 a The organization's books are in care of ► THE ORGANIZATION Located at ► 1212 MARIPOSA STE 6 DENVER CO ZIP +4 ► 80204 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)? See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts. C 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 3 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 44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 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	•	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	40 e	!	X
books are in care of THE ORGANIZATION Located at 1212 MARIPOSA STE 6 DENVER CO SIP + 4 80204 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)? See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts. c 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 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 Yes N Yes N Yes N Yes N Yes N Yes N Soction 4947(a)(1) nonexempt charitable trusts filing Form 990 must be completed instead of Form 990-EZ If 'Yes,' Form 990 must be completed instead of Form 990-EZ 44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	41	List the states with which a copy of this return is filed ► NONE			
books are in care of THE ORGANIZATION Located at 1212 MARTPOSA STE 6 DENVER CO DENVER CO SIP + 4 80204 **No. 1212 MARTPOSA STE 6 DENVER CO Located at 1212 MARTPOSA STE 6 DENVER CO TIP + 4 80204 Yes No. 1212 MARTPOSA STE 6 DENVER CO TIP + 4 80204 Yes No. 1212 MARTPOSA STE 6 DENVER CO TIP + 4 80204 Yes No. 1212 MARTPOSA STE 6 DENVER CO TIP + 4 80204 Yes No. 1212 MARTPOSA STE 6 DENVER CO TIP + 4 80204 Yes No. 1212 MARTPOSA STE 6 DENVER CO TIP + 4 80204 Yes No. 1212 MARTPOSA STE 6 DENVER CO TIP + 4 80204 Yes No. 1212 MARTPOSA STE 6 DENVER CO TIP + 4 80204 Yes No. 1212 MARTPOSA STE 6 DENVER CO TIP + 4 80204 Yes No. 1212 MARTPOSA STE 6 DENVER CO TIP + 4 80204 Yes No. 1212 MARTPOSA STE 6 DENVER CO TIP + 4 80204 Yes No. 1212 MARTPOSA STE 6 DENVER CO TIP + 4 80204 Yes No. 1212 MARTPOSA STE 6 DENVER CO TIP + 4 80204 The solution of the authority over a signature or other signature or other authority over a signature or other signature o					
books are in care of THE ORGANIZATION Located at 1212 MARIPOSA STE 6 DENVER CO SIP + 4 80204 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)? See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts. c 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 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 Yes N Yes N Yes N Yes N Yes N Yes N Soction 4947(a)(1) nonexempt charitable trusts filing Form 990 must be completed instead of Form 990-EZ If 'Yes,' Form 990 must be completed instead of Form 990-EZ 44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	12	a The organization's			
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)? 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 a Foreign Bank and Financial Accounts. c 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	42	books are in care of THE ORGANIZATION Telephone no	 -		_ _ -
At any time during the calendar year, did the organization have an interest in or a signature or other autinity over a financial account; a foreign country 42b 2 2 2 2 3 3 3 3 3 3		Located at ► 1212 MARIPOSA STE 6 DENVER CO ZIP + 4 ► 80204			- - -
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts. c 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 42 c 3 42 c 3 42 c 3 42 c 42 c 3 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 No. Yes No. 44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 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	1	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42 b	Yes	No X
c 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 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 44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 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					
c 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 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 44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 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		See the instructions for exceptions and filing requirements for Form TD F 90-22 1. Report of a Foreign Rank and Financial Accounts			
and enter the amount of tax-exempt interest received or accrued during the tax year Yes N Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 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	•	At any time during the calendar year, did the organization maintain an office outside of the U.S ?	42 c		X
and enter the amount of tax-exempt interest received or accrued during the tax year Yes N Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 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	43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here		▶ □	N/A
of Form 990-EZ 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 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' 45 Is any related organization accompleted instead of Form 990-EZ	•	_ _		Yes	N/A
Form 990 must be completed instead of Form 990-EZ	44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44		Х
Total 330 mast be completed misted of total 330 EE	45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,'	 		v
	BA/)- EZ (X 2009)

Form 990-EZ (2009) COLORADO CRIMINAL		W 3/13	84-14498			Page 4
Part VI Section 501(c)(3) organization 501(c)(3) organizations and se 46-49b and complete the table	ction 4947(a)(1) no	nexempt charitable				1
Did the organization engage in direct or indirect for public office? If 'Yes,' complete Schedule	ct political campaign ac C, Part I	ctivities on behalf of or	in opposition to candidates	46	Yes	No X
47 Did the organization engage in lobbying activi	ties? If 'Yes,' complete	Schedule C, Part II		47		Х
48 Is the organization a school as described in s	ection 170(b)(1)(A)(ii)?	If 'Yes,' complete Sche	edule E	48		Х
49a Did the organization make any transfers to an	exempt non-charitable	related organization?		49 a		Х
b If 'Yes,' was the related organization a section				49 b		
50 Complete this table for the organization's five employees) who each received more than \$10	highest compensated e	employees (other than from the organization	officers, directors, trustees If there is none, enter 'No	and key	1	
(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 and deferred compensation	àccoi	xpense unt and llowance:	s
NONE						
	1					
f Total number of other employees paid over \$ 51 Complete this table for the organization's five compensation from the organization. If there	highest compensated i	ndependent contractor	s who each received more	than \$1	00,000	of

(a) Name and address of each independent contractor paid more than \$100,000 (b) Type of service (c) Compensation NONE d Total number of other independent contractors each receiving over \$100,000 Under penal have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Date Type or print name and title Preparer's Identifying Number (See instructions) Date 1 | 15 | 10 Check if self employed Preparer's signature Paid P00288317 Pre-Firm's name (or yours if self employed), address, and ZIP + 4 GILMAN ROSS & CO parer's Use WAY SUITE 100 84-0919569 495 UINTA 303-261-1016 Only CO 80230 DENVER Phone no ►X Yes No May the IRS discuss this return with the preparer shown above? See instructions Form **990-EZ** (2009) BAA

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

Open to Public

Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

COLORADO CRIMINAL JUSTICE REFORM

COALITION

Employer identification number

84-1449882

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.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or 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 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section** 170(bx1)xAxiv). (Complete Part II) 5 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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) 7 X 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or 11 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 Type III - Functionally integrated Type III- Other d | 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 If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization? 11 g (i) 11 g (iı) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) h Provide the following information about the supported organizations (v) Did you notify the organization in col (i) of your support? (vii) Amount of Support (ii) EIN (iii) Type of organization (iv) is the (vi) Is the (i) Name of Supported (described on lines 1-9 above or IRC section (see instructions)) Organization rganization in col (i) listed in your organization in col (i) organized in the governing document? Yes No Yes No Yes No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

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) ► (b) 2006 (a) 2005 (e) 2009 (c) 2007 (d) 2008 (f) Total Gifts, grants, contributions and membership fees received (Do not include 'unusual grants') 130,522 153,924 191,722 229,576 255,771 961,515. Tax revenues levied for the organization's benefit and either paid to it or expended 0. on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge 0. 130,522 153,924 191,722 255,771 229,576 961,515. 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 0. shown on line 11, column (f) Public support. Subtract line 5 961,515. from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total beginning in) 255,771 229,576 961,515. 7 Amounts from line 4 130,522 153,924 191,722 Gross income from interest, dividends, payments received on securities loans, rents, rovalties and income form 52 20 968 4,965 6,005. similar sources Net income from unrelated business activities, whether or not the business is regularly 0. carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV 2,690 166 141 413 20,654 24,064. Total support. Add lines 7 991,584. through 10 12 Gross receipts from related activities, etc (see instructions) 12 0. 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) 97.0% 14 98.3% 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 16a 33-1/3 support test − 2009. If the organization did not check the box on line 13, and the 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** — **2008.** 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 - 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 18 Schedule A (Form 990 or 990-EZ) 2009 BAA

COLORADO CRIMINAL JUSTICE REFORM 84-1449882 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 (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 Calendar year (or fiscal yr beginning in) ► (f) Total Giffs, grants, contributions and membership fees received (Do not include 'unusual grants ') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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 6 Total. Add lines 1 through 5 7a Amounts included on lines 1. 2, 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 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 (e) 2009 (f) Total Calendar year (or fiscal yr beginning in) (a) 2005 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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.) 12 13 Total support. (add Ins 9, 10c, 11, 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) organization, check this box and stop here Section C. Computation of Public Support Percentage % 15 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)). 16 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage % Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 18 Investment income percentage from 2008 Schedule A, Part III, line 17 19 a 33-1/3 support tests - 2009. 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 - 2008. If the organization did not check a box on line 14 or 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. Provide any other additional information. See instructions.
•	Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.
	

2009 SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5 COLORADO CRIMINAL JUSTICE REFORM COALITION CLIENT CCJRC 84-1449882 7/15/10 08 55PM PART II, LINE 10 - OTHER INCOME NATURE AND SOURCE 2009 2008 2007 2006 2005 TOTAL $\frac{20,654}{\$ 20,654}$. $\frac{2,690}{\$ 2,690}$. $\frac{413}{\$ 413}$. $\frac{141}{\$ 141}$. $\frac{\$}{\$}$ **MISCELLANEOUS**

2009	FEDERAL STATEMENTS		PAGE 1
CLIENT CCJRC	COLORADO CRIMINAL JUSTICE REFORM COALITION		84-144988
7/15/10			08 55PN
STATEMENT 1 FORM 990-EZ, PART I, LINE 8 OTHER REVENUE			
MISCELLANEOUS INCOME		TOTAL \$	20,654. 20,654.
STATEMENT 2 FORM 990-EZ, PART I, LINE 16 OTHER EXPENSES	3		
CONTRACT & OTHER PROFESS DEPRECIATION EVENTS & TRAINING FOR OT INSURANCE OFFICE EXPENSES		\$	14,510. 41. 948. 4,754. 13,855.
TELEPHONE TRAVEL WEB HOSTING/INTERNET		TOTAL \$	2,140. 665. 5,559. 42,472.
STATEMENT 3 FORM 990-EZ, PART II, LINE 2 OTHER ASSETS	4		
FURNITURE AND FIXTURES		<u>BEGINNING</u> \$ 62. 8 8,201.	
INVENTORIES MACHINERY AND EQUIPMENT	TOTAL	31.	4,477. 9. \$ 4,529.
STATEMENT 4 FORM 990-EZ, PART II, LINE 2 TOTAL LIABILITIES	6		
ACCOUNTS PAYABLE AND ACC FISCAL AGENT ACCOUNT	RUED EXPENSES	\$ 266. \$ 2,012. \$ 2,278.	ENDING \$ 185. 1,526. \$ 1,711.

STATEMENT 5 FORM 990-EZ, PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE

TO RAISE PUBLIC AWARENESS AND INCREASE POLITICAL SUPPORT FOR ALTERNATIVES TO INCARCERATION THROUGH PUBLIC EDUCATION, COMMUNITY ORGANIZING, COALITION BUILDINGS AND CRIMINAL JUSTICE REFORM CAMPAIGNS.

2009

FEDERAL STATEMENTS

PAGE 2

CLIENT CCJRC

COLORADO CRIMINAL JUSTICE REFORM COALITION

84-1449882

7/15/10

09 06PM

STATEMENT 6
FORM 990-EZ, PART III, LINE 28
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

COORDINATE STATEWIDE NETWORK OF INDIVIDUALS AND ORGANIZATIONS ADVOCATING FOR ALTERNATIVES TO INCARCERATION AND REFORM OF CRIMINAL JUSTICE POLICIES. CONDUCT PUBLIC EDUCATION PROGRAMS THROUGH SPEAKING ENGAGEMENTS, COMMUNITY EVENTS, AND OUR NEWSLETTERS.

2009 ACTIVITIES INCLUDED: WORK WITH THE LEGISLATURE TO GET SEVERAL BILLS PASSED. SUPPORTED REPRESENTATIVE MARSHALL'S BILL TO REQUIRE THE COMMISSION ON CRIMINAL & JUVENILE JUSTICE TO STUDY RACIAL DISPARITY IN THE CRIMINAL JUSTICE SYSTEM. SUCCESSFULLY OPPOSED LEGISLATION THAT WOULD HAVE FURTHER INVOLVED THE POLICE WHEN A JUVENILE WAS TRUANT FROM SCHOOL. DISTRIBUTED OVER 25,000 FREE COPIES OF OUR NEWEST PUBLICATION, "GETTING ON AFTER GETTING OUT: A REENTRY GUIDE FOR COLORADO". DEEPLY INVOLVED IN THE NEW STATE COMMISSION ON CRIMINAL & JUVENILE JUSTICE WHICH APPROVED 66 RECOMMENDATIONS TO REDUCE RECIDIVISM THAT WERE FORWARDED ON THE GOVERNOR. DISTRIBUTED OVER 50,000 COPIES OF OUR VOTING BROCHURE "CAN I VOTE" ACROSS THE STATE SO THAT PEOPLE WITH CRIMINAL RECORDS COULD DETERMINE THEIR ELIGIBILITY TO VOTE. WORKED WITH JAIL ADMINISTRATORS TO ENSURE THAT PEOPLE IN JAIL WHO WERE ELIGIBLE TO VOTE WERE INFORMED AND HAD AN OPPORTUNITY AND MECHANISM TO VOTE. CONDUCTED NUMEROUS PUBLIC PRESENTATIONS, PARTICIPATED IN PUBLIC EVENTS AND OTHERWISE ENGAGED IN EFFORTS TO EDUCATE THE PUBLIC AND POLICY MAKERS.

STATEMENT 7 FORM 990-EZ, PART V REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?

(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?

NO NO

12/31/09	A 2009 FEDERAL	900 F	EDER/	 	SOOK	DEP	BOOK DEPRECIATION SCHEDULE	TION	SCHE	DULE	•			ΡÀ	PAGE 1
CLIENT CCJRC	,		8	LOR/	ADO CE	COALIT	COLORADO CRIMINAL JUSTICE REFORM COALITION	E REFOI	SM.					1.48	84-1449882
7/15/10	DATE	DATE	COST/ RASIS	BUS	CUR 179 BONIS	SPECIAL DEPR ALLOW	PRIOR 179/ BONUS/ SP. DEPR	PRIOR DEC BAL DEPR	SALVAG /BASIS RFDIICT	DEPR. BASIS	PRIOR	METHOD	LIFE RATE	3	O8 55PM CURRENT DEPR
PP-086/066 W				! !										1	
FURNITURE AND FIXTURES															
1 OFFICE FURNITURE	4/28/01		100							100	100	S/L HY	m		0
2 OFFICE CHAIRS	5/10/04		200							200	200	S/L HY	m		0
3 OFFICE FURNITURE	5/21/04		120							120	120	S/L HY			0
4 STORAGE CABINET-4 SHELF	6/05/05	,	130	'		ĺ				130	89	S/L	. 7	İ	19
TOTAL FURNITURE AND FIXTURE			550		0	0	0	0	0	550	488				61
MACHINERY AND EQUIPMENT															
5 VERIFONE TRANZ	3/27/00		405							405	405	S/L HY	2		0
6 COMPUTER RELATED EQUIP.	1/01/02		250							250	250	S/L HY	en		0
7 SYSTEM PHONES -4	8/22/02		406							406	406	S/L HY	S		0
8 PHONE SYSTEM PROCESSOR	9/22/02		629							679	629	S/L HY	S		0
9 VOICEMAIL CARD	8/22/02		255							255	255	S/L HY	. 22		0
10 SERVER COMPUTER	10/08/03		200							200	200	S/L HY			0
11 MONITOR FOR SERVER	10/08/03		100							100	100	S/L HY			0
	11/25/03		220							220	550				0
	4/04/04		178							178	178	S/L			0
	11/15/04		120							150	150	S/L			0
15 SOFTWARE-MICROSOFT UPGARD	7/22/05		330							330	330	S/L	က		0
16 COMPUTER STORAGE DEVICE	6/30/05		108							108	77	S/L			22
17 SHARP COPIER	2/01/04	•	1,529	1		ĺ				1,529	1,529	S/L	5	İ	0
TOTAL MACHINERY AND EQUIPME			5,090		0	0	0	0	0	5,090	5,059				22

Р́АGE 2 84-1449882	08 55PM CURRENT DEPR.	41	41			
1 · (5) · (1)	METHOD_ LIFE _RAIE_					
, N	PRIOR DEPR.	5,547	5,547			
DULE	DEPR BASIS	5,640	5,640			
SCHE	SALVAG /BASIS REDUCT					
ATION CE REFO	PRIOR DEC BAL DEPR		0			
PRECI	PRIOR 1797 BONUS/ SP. DEPR.		0			
K.DEI	SPECIAL DEPR ALLOW.		0			
RAL BOOK DEPRECIATION SOCOLORADO CRIMINAL JUSTICE REFORM COALITION	CUR BUS 179 PCT. BONUS					
DE	COST/ E	5,640	5,640			
2009 FE	DATE DATE ACQUIRED SOLD					
٠	DATE — ACQUIREI					
ALC:	NOIL	N _O	RECIATION			
9	DESCRIPTION	TOTAL DEPRECIATION	GRAND TOTAL DEPRECIATION			
12/31/09 Example 12/31/09 CLIENT CCJRC	7/15/10 NO	TOTA	GRAN			

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Internal Revenue	Service		File a sepai	rate application for ea	ach return.		j		
• If you are	filing for an	Automatic 3-Month E	xtension, comp	lete only Part I and c	heck this box			_	► X
If you are	filing for an a	Additional (Not Auto	matic) 3-Month I	Extension, complete	only Part II (on	page 2 of the	s form)	
				an automatic 3-month					
Part I	Automatic .	3-Month Extensi	on of Time. C	only submit original	al (no copies	needed).			
				, ,	,				
· ·	•			tomatic 6-month exter				-	
All other corp income tax re		luding 1120-C filers),	partnerships, Rt	EMICS, and trusts mu	ist use Form 70	004 to reques	t an ex	tension of tin	ne to file
returns noted the additional Form 990-T	below (6 mo I (not automa Instead, vou r	nths for a corporation	n required to file on or (2) you file completed and:	orm 8868 if you want Form 990-T) Howev Forms 990-BL, 6069, signed page 2 (Part I & Nonprofits	er, you cannot or 8870. grour	file Form 886 returns, or a	8 elect	ronically if (1 osite or cons) you want olidated
-	Name of Exempt	Organization			_		Employ	er identification	number
Type or print	COLORADO COALITIO	CRIMINAL JUS	TICE REFOR	M			84-1	449882	
File by the	e date for								
filing your return See	1212 MAR	IPOSA STREET,	SUITE 6						
instructions		t office, state, and ZIP code		s, see instructions					
	DENVER,	CO 80204							
Check type o	f return to be	filed (file a separate	application for	each return)	<u> </u>				
Form 990)		Form 990-T (co	orporation)		Form 472	20		
Form 990-BL Form 990-T (section 401(a) or 408(a) trust) Form 5227									
X Form 990-EZ Form 990-T (trust other than above) Form 6069									
Form 990-PF Form 1041-A Form 8870									
Telephone If the orga If this is f check this	No ► anization doe or a Group R	eturn, enter the orga If it is for part of th	or place of busin	FAX No ► 303-1 ness in the United Sta git Group Exemption this box ► □ and a	tes, check this Number (GEN)	If			
			s for a corporation	on required to file For	m 990-T) exter	sion of time			
untıl _ The <u>ex</u> t	8/15 ension is for	_, 20 <u>10</u> _, to file t the organization's re	he exempt orgar	nization return for the					
<u> </u>	calendar yea								
▶ ∐	tax year begi	nning	, 20,	and ending $_$ $_$ $_$ $_$, 20 _				
2 If this ta	ax year is for	less than 12 months	, check reason	Initial return	Final retu	urn 🔲 C	Change	ın accountin	g period
3a If this a nonrefu	pplication is t indable credit	for Form 990-BL, 990 s See instructions	PF, 990-T, 4720	0, or 6069, enter the t	tentative tax, le	ss any	3a	\$	0.
		for Form 990-PF or 9 rior year overpaymer		refundable credits and redit	d estimated tax	payments	3 b	\$	0.
deposit See ins	with FTD cou tructions	ipon or, if required, b	y using EFTPS	payment with this form (Electronic Federal Ta	ax Payment Sy	stem) - 	3 c		0.
Caution. If yo payment inst		to make an electronic	fund withdrawa	I with this Form 8868	, see Form 845	3-EO and Fo	rm 887	9-EO for	
BAA For Pri	vacy Act and	Paperwork Reduction	n Act Notice, se	e instructions.				Form 8868 (F	Rev 4-2009)

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.