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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

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

Open to Public Inspection

<u> </u>	rur un	and endir	iy											
В	Check if applicab	Please C Name of organization		D Employer identific	cation number									
_		Just instruct Area Council Boy Scouts												
느	Addre	e print or OI America Trust												
<u> </u>	Name Chang	1		94 - 5	059377									
느	Initial return	See Number and street (or P.O. box if mail is not delivered to street address) Room		E Telephone number										
느	Termi	Instruct 10455 West oth Avenue 100	١	303-	455-5522									
느	Amen return Applic	City or town, state or country, and ZIP + 4		G Gross receipts \$	884,085.									
_	tion pendi	Deliver, co ouzio		H(a) Is this a group re										
		F Name and address of principal officer. JOHN G. Cabeza		for affiliates?	Yes X No									
		same as C above		H(b) Are all affiliates inc										
		empt status: X 501(c) (3) ◀ (Insert no.) 4947(a)(1) or 527			list (see instructions)									
		te: N/A organization: X Corporation Trust Association Other \[\]		H(c) Group exemption	n number ► 1 / 6 1 State of legal domicile: CO									
	art I	Summary	_ year c	or normation: 1904 N	State of legal domicile; CO									
		Briefly describe the organization's mission or most significant activities: See Sch	-du	10.0										
Activities & Governance	'	Briefly describe the organization's mission of most significant activities.	cau	10 0.										
'nar	2	Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets.												
Ķ		Number of voting members of the governing body (Part VI, line 1a)												
Ğ	1	Number of independent voting members of the governing body (Part VI, line 1b)		4	14									
80	1	Total number of employees (Part V, line 2a)		5	0									
į	6	Total number of volunteers (estimate if necessary)		6	0									
Ćţ	7a	Total gross unrelated business revenue from Part (1) column (0) ine 12		7a	0.									
_	b	Net unrelated business taxable income from Form 990-1. line 34		7b	0.									
		NO N		Prior Year	Current Year									
e		Contributions and grants (Part VIII, line 11) NOV 1 9 2010		70,817.	33,958.									
Revenue	9	Program service revenue (Part VIII, line 29)												
ě		investment income (Part VIII, column (A), lines 3, 4, and 70)	L.	406,901.	850,127.									
		Other revenue (Part VIII, column (A), lines 5, 6d, 80,95,00 and 14e)		455 540										
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u> </u>	477,718.	884,085.									
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	-	742,200.	808,800.									
	I	Benefits paid to or for members (Part IX, column (A), line 4)	-											
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-											
ben	loa	Professional fundraising fees (Part IX, column (A), line 11e)												
찚	17	Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	·	25,230.	24,425.									
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		767,430.	833,225.									
	1	Revenue less expenses Subtract line 18 from line 12	-	<289,712.										
Net Assets or Fund Balances		Torondo todo expenseo edibilido no nem inte 12	Bed	ginning of Current Year	End of Year									
sets	20	Total assets (Part X, line 16)		21,339,050.	20,654,140.									
ASS	21	Total liabilities (Part X, line 26)		301,462.	366,663.									
캺	22	Net assets or fund balances Subtract line 21 from line 20		21,037,588.	20,287,477.									
Pi	art II	Signature Block												
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and state and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any kno	ments, a wledge	nd to the best of my knowledg	ge and belief, it is true, correct,									
			-	1/-15-										
Sig	n	Signature of officer			70									
Her	е	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Date										
		Yohn G. Cabeza, Trustee Type or print name and title		 										
		Data	LChe	CK if Prepare	r's identifying number									
Paid	d	Preparer's maria Montogn 11/12/10	self	_ (see ins	tructions)									
Pre	parer's	Firm's name (or Kundinger, Corder & Engle, P.C.	_ Lemp	oloyed										
Use	Only	yours if self-employed), 475 Lincoln Street, Ste. 200		EIN ►										
		address, and		Dhone no N 2	03_53 / _5053									
	, +b = "			Prione no. ► 3	03-534-5953									
May	∕ tne II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No									

932001 02-04-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. See Schedule O for Organization Mission Statement Continuation

Form **990** (2009)



Pa	rt III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission See Schedule O for Continuation
	The mission of the Boy Scouts of America is to prepare young people to
	make ethical and moral choices over their lifetimes by instilling in
	them the values of the Scout Oath and Law.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-F7?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4-	(Code) (Expenses \$ 808,800 • including grants of \$ 808,800 •) (Revenue \$
4a	(Code)(Expenses \$008,800 · including grants of \$008,800 ·)(Revenue \$) As provided by the endowment trust document, an amount equal to 4.5% of
	the twelve quarter rolling average of the Trust investment balances is
	made available for general and donor-specified purposes to the Denver
	Area Council, Boy Scouts of America. This 4.5% totaled \$808,800 for
	the year ended December 31, 2009.
	the year ended becember 31, 2003.
4b	(Code:) (Expenses \$ Including grants of \$) (Revenue \$)
40	(Code:) (Expenses \$ including grants of \$) (Revenue \$)

	· · · · · · · · · · · · · · · · · · ·
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	(code: //Exponded including grante of \$\psi\$
4d	Other program services (Describe in Schedule O.)
74	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses \$ 808,800.

Denver Area Council Boy Scouts

Form 990 (2009) of America Trust Part IV | Checklist of Required Schedules

1 is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," compilete Schedule or Contributions? Did the organization required to complete Schedule is Schedule of Contributions? 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 II Section 501(c)(4), 501(c)(3), and 501(c)(3) organizations, is the organization subject to the section 603(s) notice and reporting requirement and proxy tax // If "Yes," complete Schedule C, Part III Did the organization maintain any donor advasced funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II Did the organization report and areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization report and amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide redictions. In the organization report and amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide redictions. In the organization report and amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide reside consensity, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount for lind, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part X, II It is the organization report an amount for rivestments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part X, II Did the organization report an amount for rivestments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part X, II Did the organization report an amount for investments - program related in Part X, line 16? If "Yes," complete Schedule D, Part X, II Did the organization report an amount for investments - program related in Part X, line 16? If "Yes," complete Schedule D, Part X, II				Yes	No
2 Ix Ibr organization required to complete Schedule B, Schedule of Contributors? 3 Did the organization engage in direct or indirect political campage in activate an organization public office? If "Yes," complete Schedule C, Part II 4 Section 501(c)[4] organizations. Did the organization subject to the section 603(s) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 5 Bottine 501(c)[4], 501(c)[6], and 501(c)[6] organizations is the organization subject to the section 603(s) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advessed funds or any semilar funds or accounts the "Yes," complete Schedule D, Part III 7 Did the organization receive or hold a conservation easement, including easements to preserve gone space, the emvironment, instonic land areas, or historic structures? If "Yes," complete Schedule D, Part III 7 Did the organization report an amount in Part X, line 21; serve as a outsideal nor amounts not lated in Part X, or profile Schedule D, Part III 8 Did the organization report an amount in Part X, line 21; serve as a outsideal nor amounts not lated in Part X, or with the organization is an amount for it leads of part IV to the organization is an amount for it leads of part IV to Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV III III III III III III III III III	1		1	х	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? **It**Pes**, **completes Schedule** C, Part II** Section 50*(16)(4), 90*(16)(5), and 50*(16)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax** If **Yes**, **complete Schedule** C, Part II** Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts of **It** **s**, **complete Schedule** D, Part II** Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If **Tes**, **complete Schedule** D, Part II** Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debit management, credit repair, or debt negotiation services? If **Yes**, **complete Schedule** D, Part II** Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If **Yes**, **complete Schedule** D, Part VII** Did the organization report an amount for investments - other securities in Part X, line 10? If **Yes**, **complete Schedule** D, Part VII** Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If **Yes**, **complete Schedule** D, Part VII** Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If **Yes**, **complete Schedule** D, Part X.** Did the organization subject to uncertain tax positions under II** In **48.11** If **Yes**, **complete Schedule** D, Part X.** Did the organization seporate or amount for investments - program related in Part X,	2				
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8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V It is the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XII. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III Did the organization asset years as expenses of more than \$15,000 to marriamaking, fundrasing, business, and program service activities outside the United States? If "Yes," complete Sc	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	,		
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complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X	19	•			
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H			19		х
	20				
				990 c	

Denver Area Council Boy Scouts

Form 990 (2009) of America Trust

Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	• • •		 -	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	i	i	
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С				
	any tax-exempt bonds?	24c	1	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	200		
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
21	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV	21		
20	instructions for applicable filing thresholds, conditions, and exceptions).			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
		200		
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
30	contributions? If "Yes," complete Schedule M	30		х
24		30_	 -	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	-		
32	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity?			
34	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
25	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	34		
35	If "Yes," complete Schedule R, Part V, line 2	25		х
26		35	<u> </u>	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	26		х
27		36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			x
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	ļ	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	20	х	
	Note. All Form 990 filers are required to complete Schedule O	38 Form		2009)
		LOIM	ココリ (2UU91

						Yes	No			
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of]		\sigma_{\sigma}^{\delta}		:			
	U.S. Information Returns. Enter -0- if not applicable	1a			<u>0</u>					
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b			0	٠,	,			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	reporta	able gamı	ng		'	-			
	(gambling) winnings to prize winners?				1c	X				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					,				
	filed for the calendar year ending with or within the year covered by this return	2a	·		<u> </u>		_			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu				2b					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see				<u> </u>		<u>.</u> .			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by t	this retun	n?	3a	<u> </u>	X			
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O				3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other			а		· '				
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	ınt)?		4a	L	X			
b	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.									
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				<u>5a</u>	<u> </u>	X			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transf			_	5b					
С	c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited									
Tax Shelter Transaction?										
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	ne org	anization	SOIICIT			x			
_	any contributions that were not tax deductible?	tions (or aitto		6a	 				
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	ilions (or gires		6b					
_	were not tax deductible?				00					
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	aood	s and ser	VICOS		<u> </u>				
а		good	s and ser	VICES	7a		х			
	provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b	1				
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	vas rec	guired		1					
·	to file Form 8282?		,		7c	1	Х			
а	If "Yes," indicate the number of Forms 8282 filed during the year	7d			. ,	7.3	, ;			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	persor	nal		7.		:			
Ū	benefit contract?	•			7e		X			
f	The state of the s	tract?			7f		X			
g	The state of the s			N/A	7g					
h	The second secon		equired?	N/A	7h					
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or	rganiz	ations. D		1	ľ.				
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exceeding			oldings						
	at any time during the year?			N/A	8	ļ				
9	Sponsoring organizations maintaining donor advised funds.			/-	× × ×					
а				N/A	9a	<u> </u>	├ ─			
b	•			N/A	9b	.	 			
10	Section 501(c)(7) organizations. Enter:	حدا	1			,~	r l			
а	·	10a	 		\dashv	1				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	<u>i</u>		\dashv		1			
11	Section 501(c)(12) organizations. Enter: Gross uncome from members or shareholders N/A	1445	1							
a	Gloss income non-monitore of characteristics.	11a	 		\dashv		!			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	11b			-					
40	amounts due or received from them)		2		12a		1			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			128		<u> </u>			
D	ii res, enter the amount of tax-exempt interest received of accrued during the year	بـــــ				'	. '			

of America Trust

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

Sec	tion A. Governing Body and Management	_					
					Yes	No	
1a	Enter the number of voting members of the governing body	1a	1				
b	Enter the number of voting members that are independent	1b	1	4		,	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other				
	officer, director, trustee, or key employee?			2		<u> </u>	
3	Did the organization delegate control over management duties customarily performed by or under th	e dire	ct supervision	1			
	of officers, directors or trustees, or key employees to a management company or other person?			3	L	<u>X</u>	
4	Did the organization make any significant changes to its organizational documents since the prior Fo		0 was filed?	4		X	
5	Did the organization become aware during the year of a material diversion of the organization's asset	ts?		5		X	
6	Does the organization have members or stockholders?			6		Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	ember	s of the				
	governing body?			7a		<u>X</u>	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per			7b		X	
8							
	by the following:						
а	The governing body?			8a	X		
þ	Each committee with authority to act on behalf of the governing body?			8b	X		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched	at the			v	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	L	<u> </u>	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code)		I.,		
				40.	Yes	No X	
	Does the organization have local chapters, branches, or affiliates?			10a			
þ	If "Yes," does the organization have written policies and procedures governing the activities of such	cnapi	ers, aniliates,	405			
	and branches to ensure their operations are consistent with those of the organization?	طة حصا	o form?	10b	х		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fi	iii iy u	le form?			,	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			12a	X		
	Does the organization have a written conflict of interest policy? If "No," go to line 13	ıld an	10 F00	IZa			
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	aia giv	e rise	12b	X		
	to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Vac "	describe	120	 		
С	in Schedule O how this is done	103,	describe	12c	х		
40	Does the organization have a written whistleblower policy?			13		Х	
13	Does the organization have a written document retention and destruction policy?			14		X	
14	Did the process for determining compensation of the following persons include a review and approve	al hv i	ndependent	17	-	3"	
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official			15a		X	
	Other officers or key employees of the organization			15b		X	
J	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)					:	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment '	with a			. 1	
	taxable entity during the year?			16a		X	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva	luate	its participation			-	
-	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org					1	
	exempt status with respect to such arrangements?			16b			
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ► None						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	Γ (501	(c)(3)s only) availab	le for			
-	public inspection. Indicate how you make these available. Check all that apply.						
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflic	t of interest policy,	and fina	ancial		
	statements available to the public						
20	State the name, physical address, and telephone number of the person who possesses the books a	nd re	cords of the organi	zation:	-		
	John G. Cabeza - 303-455-5522						
	10455 West 6th Avenue, Ste. 100, Denver, CO 80215	<u> </u>					

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, dir compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

X Check this box if the organization did not co	ompensate an	у сі	irren	t off	icer	, dire	ecto	r, or trustee		
(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average			Pos				Reportable	Reportable	Estimated
	hours	(cl	heck	c all t	that	nat apply)		compensation	compensation	amount of
	per	Ę	ļ		1			from	from related	other
	week	gie				pa		the organization	organizations (W-2/1099-MISC)	compensation from the
		stee o	ustee		١	ensat		(W-2/1099-MISC)	(**-2/1099-141130)	organization
		al tru:	la tr		loyee	g e		(** 2, 1000 *********************************		and related
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	iaer			organizations
		Ĕ	Ĕ	ā	S.	훈등	હ			
Frederic C. Hamilton			Ì							
Endowment Chair	1.00	X		Х				0.	0.	0.
Louis P. Bansbach, III	4 00	l				ļ	ŀ			
Trustee	1.00	X			<u> </u>	ļ		0.	0.	0.
Bruce D. Benson							ŀ			
Trustee	1.00	X						0.	0.	0.
Peter H. Coors				1		Ì				
Trustee	1.00	X					<u> </u>	0.	0.	0.
Cortlandt S. Deitler	4 00	l								
Trustee	1.00	X			L_			0.	0.	0.
M. Doak Jacoway	4 00	l								
Trustee	1.00	X						0.	0.	0.
John W. Madden, Jr.	1 00				Ī	1				_
Trustee	1.00	X				ļ	ļ	0.	0.	0.
Robert L. Manning, Jr.	4 00	l								_
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Richard L. Robinson	1 00									_
Trustee	1.00	X	_					0.	0.	0.
G. Jackson Tankersley, J	1 00	۱.,		ŀ						_
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Timothy J. Travis	1 00	١,,								
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Joseph E. Wagner	1 00	\						0.	0.	^
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Trustee Earl L. Wright	1.00	X	<u> </u>	<u> </u>	ļ	├	<u> </u>	U •	0.	0.
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Trustee Jeffrie A. Herrmann	1.00	₽		-		├	┝	0.	U •	0.
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	990 (2009) of Americ	<u>a Trust</u>	<u>t </u>							<u>84-60</u>	<u> 1593</u>	<u> 377</u>	P	age 8
Par	VII Section A. Officers, Directors, Tru	stees, Key E	mplo	yee	s, a	nd l	ligh	est	Compensated Employ	rees (continued)				
	(A)	(B)	ĺ		(((D)	(E)			(F)	
	Name and title	Average			Pos	tion)		Reportable	Reportable		Es	tımate	ed
		hours	(cl	heck	c all t	that	арр	ıly)	compensation	compensation	1	am	ount	of
		per	Ē				Ė	Ī	from	from related	i		other	
		week	Irect				L		the	organizations		com	pensa	tion
			9 0 (寶			sate		organization	(W-2/1099-MIS	C)		om th	
			truste	al fres) se	mpensated		(W-2/1099-MISC)		Į	_	anızat	
		ĺ	Individual trustee or director	Institutional trustee	ا اِ	ap M	sst cc oyee	 					i relat	
			Indiv	Instit	Officer	Key emplc yee	Highest cc I employee	E E				orga	ınızatı	ons
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	Total						▶		0.	177,65		4	0,4	38
2	Total number of individuals (including but no	ot limited to tr	nose	liste	ed al	oove	e) wh	no r	eceived more than \$100	J,000 in reportable)			(
	compensation from the organization												Yes	No
3	Did the organization list any former officer,	director or tru	etaa	ko:	v em	nlo	vee	or h	nighest compensated ei	mnlovee on	Γ		,	
•	line 1a? If "Yes," complete Schedule J for si			, 10	y C.	ipio:	y 00,	0. 1	ngricot compensated el	nployee on		3		x
4	For any individual listed on line 1a, is the su			amo	ensa	ation	and	d otl	her compensation from	the organization	F		-	
	and related organizations greater than \$150									3		4	Х	
5	Did any person listed on line 1a receive or a	accrue compe	nsat	ion f	from	any	unr	elat	ed organization for serv	ices rendered to				
	the organization? If "Yes," complete Schedu	ule J for such	pers	on								5		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest con	mpensated in	depe	ende	ent c	ontr	racto	ors t	hat received more than	\$100,000 of comp	pensa	ition f	rom	
	the organization NONE													
	(A) Name and business	address							(B) Description of s	envices	Cc	O)	;) nsatio	n
	Name and business	auuress		-					Description of a	services		mpei	isatio	
	_							\dashv						
								丁						
								_						
								\dashv	.					
	Total number of independent contractors (iii	neluding but r	not le	mito	d to	the	ال مء	etec	t above) who received n	nore than				

\$100,000 in compensation from the organization

Denver Area Council Boy Scouts Form 990 (2009) of America Trust 84-6059377 Page 9 Part VIII Statement of Revenue (D) Revenue (A) (C) (B) Total revenue Related or Unrelated excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, gifts, grants and other similar amounts 1 a Federated campaigns 1a 1b b Membership dues 10 c Fundraising events d Related organizations 1d e Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 33,958 g Noncash contributions included in lines 1a-1f \$ 33,958. h Total. Add lines 1a-1f **Business Code** Program Service Revenue All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 89,739 89,739. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of 760,388. assets other than inventory b Less cost or other basis and sales expenses 760,388. c Gain or (loss) 760,388. 760,388. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b

884,085.

0.

850,127.

Form 990 (2009)

d All other revenue

12

932009 02-04-10 Total. Add lines 11a-11d

Total revenue. See instructions.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				,
	organizations in the U.S. See Part IV, line 21	808,800.	808,800.		
2	Grants and other assistance to individuals in		·		
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified		_		
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):			·	
а	Management				
b	Legal				_
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	24,425.		24,425.	
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy			<u> </u>	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а					
b		***			
С					
d					
е					
f	All other expenses	000	000 000	0.4.40=	
25	Total functional expenses. Add lines 1 through 24f	833,225.	808,800.	24,425.	0.
26	Joint costs. Check here If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

Part X | Balance Sheet (A) (B) Beginning of year End of year 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 2 1,932,218. 215,623. 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 31,214. 31,214. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 10b b Less: accumulated depreciation 10c 664,370. 11 Investments - publicly traded securities 11 17,910,844. 19,443,922. 12 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 800,404. 963,381. 15 Other assets See Part IV, line 11 15 21,339,050. 20,654,140. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 301,462. 366,663. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 -iabilities Payables to current and former officers, directors, trustees, key employees. highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities Complete Part X of Schedule D 25 301,462. 366,663**.** 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances <192,485.<4,808.> 27 Unrestricted net assets 7,128,975. 7,760,743. 28 Temporarily restricted net assets 28 14,101,098. 12,531,542. Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 20,287,477. 21,037,588. 33 Total net assets or fund balances 33 20,654,140. 21,339,050. Total liabilities and net assets/fund balances 34

Form **990** (2009)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

0111	1550 (2005) OI IMICIICA II ABC	55511	ı a	yc
Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2 b	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both			
	Separate basis X Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a	L	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			

Form **990** (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.

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Denver Area Council Boy Scouts

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

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

of America Trust

Employer identification number 84-6059377

2 🗔			s, or association of char (0(b)(1)(A)(ii). (Attach Sc			ction 170	ינטאָר זאָראאָניוּ	,.		
3 🗔			tal service organization	•		170(b)(1)	(A)(iii)			
4			operated in conjunction					/h\/4\/A\/;;	i) Entart	ha hacartal'a nama
-	city, and stat		operated in conjunction	Willianos	pital desci	iibea iii se	CHOII 170	יואליו אליו	ıj. Lintei t	ne nospitai s name,
5 🗀	• •		benefit of a college or ui	nivereity o	wood or or	perated by	, a govern	montal un	t desemb	od in
-		(b)(1)(A)(iv). (Comple		inversity of	writed or of	berated by	a govern	mental uni	t describe	ed III
6 🗀			ent or governmental uni	t describe	d in sectio	n 170(h)(:	11(A)(v)			
7 🗔		•	eives a substantial part					or from the	general	nublic described in
. —		(b)(1)(A)(vi). (Comple	•	or its supp	ort nom a	governin	antai unit C		generali	public described in
8 🗀			ection 170(b)(1)(A)(vi).	(Complete	Part II \					
ğ 🗔			eives: (1) more than 33			rom contr	hutione n	namharchi	n foos ar	ad arose receints from
• —			nctions - subject to certa							= :
		<u>-</u>	axable income (less sect	•	,	•				·
		509(a)(2). (Complete	,	tion on te	ix, nom bu	311103303	acquired t	y the orga	i iizatioi i e	arter durie 50, 1575
10			perated exclusively to te	st for publ	ic safety 5	See sectio	n 509(a)(4	1)		
11 X	-		perated exclusively for the	-	_			-	v out the	purposes of one or
	_	•	ations described in secti		•				•	• •
			organization and compl				-,. 000 00 1	J.1.011 000(адо ј. Опс	on the box that
	a X Type		¬ , *		e III - Func		tegrated		d	Type III - Other
e X	* .		it the organization is not			•	-	r more dis	gualified i	
			han one or more publicly							
f			ten determination from t		-				- (-)(-)	
	-	rganization, check th			,	. , ,,	, ,,			
g	Since Augus	t 17, 2006, has the c	organization accepted ar	ny gift or c	ontribution	from any	of the foll	owing pers	sons?	
	(i) A perso	n who directly or ind	rectly controls, either al	lone or tog	ether with	persons o	described	ın (ıı) and (ııı) below,	Yes No
			upported organization?							11g(i) X
	(ii) A family	member of a persor	n described in (i) above?)						11g(ii) X
	(iii) A 35%	controlled entity of a	person described in (i) of	or (II) above	e?					11g(iii) X
h	Provide the f	ollowing information	about the supported or	ganization	(s)					
		<u> </u>								
(i) Name	of supported	(ii) EIN	(iii) Type of organization		organization		u notify the	(vi) ls organization	the	(vii) Amount of
orga	anization		(described on lines 1-9		sted in your		ion in col.	(i) organiz U.S	ed in the	support
			above or IRC section		document?		r support?		.7	
			(see instructions))	Yes	No	Yes	No	Yes	No	
	couts	04 0404005	-	**		37		l		000 000
OI AM	erica,	84-0404225	/	X		X	ļ	X	\vdash	808,800.
		 			 		 	 		
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	-	_					 		 	
	-	 		 					 	
Total]					808,800.
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LHA 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

Schedule A (Form 990 or 990-EZ) 2009 Page 2 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) 2005 (b) 2006 (c) 2007(d) 2008 (e) 2009 (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 through 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) 2005 (b) 2006 (c) 2007 (d) 2008(e) 2009 (f) Total 7 Amounts from line 4 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) 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 Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 % 15 15 Public support percentage from 2008 Schedule A, Part II, line 14 % 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 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.

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.

Schedule A (Form 990 or 990 EZ) 2009 Part III Support Schedule for (Organizations	Described in	Section 509(a	(Complete only	/ If you checked the bo	Page 3 ox on line 9 of Part
Section A. Public Support				, , , , , , , , , , , , , , , , , , ,	,	
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1,7,5,5,5			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
membership fees received. (Do not						
include any "unusual grants ")				1		1
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities turnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or bus-						
iness under section 513		1		1		
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to	1	1			1	
the organization without charge]		1		
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and		1				
3 received from disqualified persons	İ				İ	
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	_		:	<u> </u>		
8 Public support (Subtract line 7c from line 6) Section B. Total Support	<u> </u>	1		1	l	
· · · · · · · · · · · · · · · · · · ·	(-) 0005	(h) 000C	(=) 0007	(4) 0000	(*) 0000	(6 Tatal
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b		-			<u> </u>	
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		,				
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)	L	<u> </u>	<u> </u>	ļ .	<u> </u>	<u> </u>
14 First five years. If the Form 990 is for	r the organization	's first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organi	zation,
check this box and stop here	· 0					
Section C. Computation of Publ						
15 Public support percentage for 2009 (•	column (f))		15	
16 Public support percentage from 2008 Section D. Computation of Inve			<u> </u>		[16]	
17 Investment income percentage for 20)09 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	
18 Investment income percentage from	•		ν,,		18	g
19a 33 1/3% support tests - 2009. If the			on line 14, and lin	e 15 is more than		
more than 33 1/3%, check this box a						▶□
h 33 1/3% support tests - 2008 If the	•					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

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Denver Area Council Boy Scouts Name of the organization of America Trust

Employer identification number 84-6059377

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		·
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?	• • •	Yes No
Pa	rt II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or	pleasure) Preservation of an his	storically important land area
	Protection of natural habitat		ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06	2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	asement is located >	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, and enforcing conservation easements d	uring the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	the year > \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	tion easements in its revenue and expense	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	ation's financial statements that describes	the organization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections o		ther Similar Assets.
	Complete if the organization answered "Yes" to Form	i 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and b	alance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	blic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these	items	
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and balan	ice sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service	e, provide the following amounts relating to
	these items		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	
	the following amounts required to be reported under SFAS 1	I16 relating to these items.	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		► \$ ► \$

Denver Area Council Boy Scouts

		ica Trust						
Par	t III Organizations Maintaining C							
3	Using the organization's acquisition, accessi	on, and other record	is, check any of the	e following that a	ire a signi	ficant use of i	ts collection it	əms
	(check all that apply):							
а	Public exhibition	d	I ∟ Loan or ex	change program	s			
b	Scholarly research	е	· U Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explai	n how they further	the organization	's exempt	purpose in F	Part XIV	
5	During the year, did the organization solicit o	r receive donations	of art, historical trea	asures, or other	sımılar as	sets		
	to be sold to raise funds rather than to be ma	aintained as part of t	the organization's o	ollection?			Yes	No_
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if organization a	answered "Yes" t	to Form 9	90, Part IV, III	ne 9, or	
	reported an amount on Form 990, Par	rt X, line 21	_					
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for contributio	ns or other asse	ts not inc	luded		
	on Form 990, Part X?					[Yes [No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing table:					
							Amount	
С	Beginning balance					1c		
	Additions during the year					1d		
	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?		•	•	Yes	□ No
	If "Yes," explain the arrangement in Part XIV							
Par		f the organization an	nswered "Yes" to Fo	orm 990, Part IV,	, line 10			
		(a) Current year	(b) Pnor year	(c) Two years b	oack (d)	Three years ba	ck (e) Four yea	ars back
1a	Beginning of year balance	21037588.	26569439	•		,		
b	Contributions	33,958.	70,817	•				
c	Net investment earnings, gains, and losses	24,731.	<4860468			**		i
d	Grants or scholarships	808,800.	742,200	. ?	, ?^*;	** \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1 1 1	- t
e	Other expenditures for facilities				1	× .	. 4: 4	
•	and programs			* , ```	`	,		4 {
f	Administrative expenses			T		×, *, .	5	1
a	End of year balance	20287477.	21037588				,	
2	Provide the estimated percentage of the year	r end balance held a	as	<u> </u>	•		•	
	Board designated or quasi-endowment		%					
b	Permanent endowment ► 100.00	%	— · -					
c		 /~						
3a	Are there endowment funds not in the posse		ation that are held	and administered	d for the	organization		
-	by:					J	Ye	s No
	(i) unrelated organizations						3a(i) X	
	(ii) related organizations						3a(ii)	X
h	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Schedule R?				3ь	
4	Describe in Part XIV the intended uses of the						[
	rt VI Investments - Land, Building			0, Part X, line 10.				
	Description of investment	(a) Cost or o		st or other	(c) Accu	mulated	(d) Book va	alue
		basis (investr	1	s (other)	depre		• •	
1a	Land				, s	1		
	Buildings							
	Leasehold improvements	<u> </u>						
	Equipment						-	
	Other							
	1. Add lines 1a through 1e. (Column (d) must e	gual Form 990, Part	X, column (B), line	10(c))	·	•		0.

Part VII Investments - Other Securities. Se	e Form 990, Part X, line 12	•	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year n	
Financial derivatives			
Closely-held equity interests			
Other			
Alternative investments	19,443,922.	End-of-Year Marke	t Value
			,
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	19,443,922.		
Part VIII Investments - Program Related. S	ee Form 990, Part X, line 13	3	*
(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year n	
			<u> </u>
			
			· · · · · · · · · · · · · · · · · · ·
- ,			
	, _ , _ ,		
			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, line	15.		
	Description		(b) Book value
		-	

			·
Total. (Column (b) must equal Form 990, Part X, col (B) line			>
Part X Other Liabilities. See Form 990, Part X,	line 25.		
1. (a) Description of liability		(b) Amount	
Federal income taxes		0.	
Total. (Column (b) must equal Form 990, Part X, col (B) line	25)		
5 504 40 5 4 4 5 4 400 4 4 4 4 4 4 4 4 4			

Part V, line 4: As provided by the endowment perpetual trust document,

an amount equal to 4.5% of the twelve quarter rolling average of the Trust investment balances is made available for general and donor-specified purposes of the Denver Area Council from endowment funds' income and accumulated earnings and gains.

Part XI, Line 8 - Other Adjustments:

Change in value of remainder, term and perpetual trusts: 162976.

Denver Area Council Boy Scouts	04 6050277 -
Schedule D (Form 990) 2009 of America Trust Part XIV Supplemental Information (continued)	84-6059377 Page 5
Supplemental information (continued)	
Loss on pledge receivable write-off: -1675620.	
Part XII, Line 2d - Other Adjustments:	
	160076
Change in value of remainder, term and perpetual trus	sts: 1629/6.
Loss on pledge receivable write-off: -1675620.	
	
	

932055 02-01-10 Schedule D (Form 990) 2009

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Employer identification number 84-6059377Opento Public Inspection

Name of the organization De	nver Are	Denver Area Council	l Boy Scouts	ល				Employer identification number
	America Trust	rrust						84-6059377
Part I General Information on Grants and Assistance	on Grants an	d Assistance						
1 Does the organization maintain records to substantiate the amount of	intain records to	substantiate the		or assistance, the	grantees' eligibility	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	stance, and the select	tion
	grants or assist	tance?		:				X Yes No
ß۲	ganization's pro	cedures for monit	oring the use of grant f	funds in the United	States.			
Fart II Grants and Other /	Assistance to C	Sovernments and	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, Inv. 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Check this box if no one recipient received more than \$5,000. Check this box if no one recipient received more than \$5,000. Check this box if no one recipient received more than \$5,000.	United States. Co	omplete if the orga	anization answered "Year IV and Schedule I-1	es" to Form 990, Part (Form 990) if addition	IV, line 21, for any
1 (a) Name and address of organization or government	organization	(b) EIN	ame and address of organization (b) EIN (c) IRC section (d) Amount of or government (b) EIN (c) IRC section (d) Amount of or government (f) Method of valuation (book, respectively) (g) Description of (h) Purpose or assistance or assistance or assistance other)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Boy Scouts of America, Denv Council #61 - 10455 W. 6th . Ste. 100 - Denver, CO 80215	Denver Area 6th Ave.,	84-0404225	501(c)(3)	808,800	0	N/A	N/A	Genesal Support
2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations	tion 501(c)(3) an	nd government or(ganizations					
1 -	serwork Reduc	tion Act Notice,	see the Instructions for	or Form 990.				Schedule I (Form 990) 2009

84-6059377 Schedule I (Form 990) 2009 Of America Trust

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	de the informatio	n required in Part I,	line 2, and any other	additional information	
Schedule I, Part I, Line 2: The Tr	Trust supp	supports the E	Boy Scouts	of America,	
Denver Area Council #16 through an	annual cash	grants	as determin	determined by the	
Trust's distribution policy. This	dis	ution poli	tribution policy applies	to all Trust	
endowment funds unless those funds,	and	associated c	designated	investments,	
have their own distribution requiremen	ements.	The Trust	Trust monitors	its grants to	
the Council to ensure that such gr	grants are	used for	proper	purposes and are	
not otherwise diverted from the in	intended u	use by rece	receiving periodic	odic reports	
from the Council.					

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees

Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.

2009

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

► Attach to Form 990. ► See separate instructions.

Denver Area Council Boy Scouts

of America Trust

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

84-6059377

Employer identification number

Schedule J (Form 990) 2009

Pa	art I Questions Regarding Compensation			-
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g , maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,	<u> </u>		
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply.			
	Compensation committee Written employment contract		<u> </u>	
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	-	Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of.			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regs. section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

Schedule J (Form 990) 2009

84-6059377

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of	(B) Breakdown of W.2 and/or 1099-MISC compensation	C compensation	(0)	(Q)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Hetirement and other deferred compensation	Nontaxable benefits	lotal of colums (B)(i)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	(3)	0	0	0	1	0	0	0
Jeffrie A. Herrmann	: €	177,658.	0	0	5,553.	34,885.	218,096.	0
	Ξ							
	(ii)							
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							Schedul	Schedule J (Form 990) 2009

SCHEDULE O

(Form 990)

932211 02-03-10

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public

Name of the organization

Denver Area Council Boy Scouts of America Trust

Employer identification number 84-6059377

Schedule O (Form 990) 2009

Form 990, Part I, Line 1, Description of Organization Mission: The Denver Area Council Boy Scouts of America Trust is a supporting organization of the Boy Scouts of America, Denver Area Council #61. The mission of the Boy Scouts of America is to prepare young people to make ethical and moral choices over their lifetimes by instilling in them the values of the Scout Oath and Law. Form 990, Part III, Line 1, Description of Organization Mission: The Denver Area Council Boy Scouts of America Trust (Trust) is a perpetual trust established by the Denver Area Council, Boy Scouts of America (the Council) on November 6, 1984 to receive and invest endowment contributions solely for the benefit of the Council, and to distribute investment income to the Council. Trust income is available for the general purposes of the Council and for other purposes specified by donors. Form 990, Part VI, Section B, line 11: A PDF copy of the Form 990 will be emailed to the Audit and Fiscal Affairs Committee as well as the governing board of Trustees for their review of the information presented in the return before it is sent to the entire board and filed with the IRS. Form 990, Part VI, Section B, Line 12c: The Council monitors and enforces compliance with the written conflict of interest policy as follows. Scout Executive and Secretary of the governing board obtains conflict of

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

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

Denver Area Council Boy Scouts of America Trust

Employer identification number 84-6059377

interest statements from members of the governing board and staff. The
Scout Executive has the additional responsibility to identify and report
transactions involving members of the governing board, staff and associated
related parties at a regular meeting of the governing board of trustees for
approval of those transactions, if any.
Form 990, Part VI, Section C, Line 19: The Trust's public information is
available upon written request and may be reviewed in the administrative
offices of the Boy Scouts of America, Denver Area Council #61 during normal
business hours. In addition, a copy of the current financial statements
and annual public information filings with the state and federal government
are mailed within the United States upon written request.
Form 990, Part IV, Section B, Line 15:
As already noted, the Trust has no employees and the officers and
directors are not paid. Therefore, a process for determining compensation of the CEO, officers, etc., is not relevant to the Trust.

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships

► See separate instructions.

2009 Opensto Publica Inspections

OMB No 1545-0047

Schedule R (Form 990) 2009 Employer identification number 84-6059377 Direct controlling Direct controlling entity entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) N/A End-of-year assets o status (if section Public charity 501(c)(3)) **e** 0 Exempt Code Total income section ਉ 501(c)(3) Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or Legal domicile (state or foreign country) foreign country) Colorado LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. promotion of the Boy Scouts of America Scout Oath and ► Attach to Form 990. Denver Area Council Boy Scouts Primary activity Primary activity ,av of America Trust Scouts of America, Denver Area Council - 84-0404225, 10455 W. 6th Ave., Ste. Name, address, and EIN Name, address, and EIN of related organization of disregarded entity CO 80215 Name of the organization Denver, Part II Part | 100, Boy #16

Denver Area Council Boy Scouts

Schedule R (Form 990) 2009

Part III organizations freated as a partnership during the tax year)

Page 2

organizations treated as a partriership uniting the tax year (a)	(h)	[3	₹	(6)		9	(2)		3	9	5
Name, address, and EIN of related organization	ctivity	Legal domicile (state or foreign country)	Direct e	Predominant income (related, unrelated, excluded from tax under sections 512-514)		Share of total	(9) Share of end-of-year assets		tion-	Code amoui 20 of 8 K-1 (Fo	_ G Bar G
None						0		0	×	N/A	×
Part IV Identification of Related Orgonizations treated as a cor	Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	poration or x year.)	Trust (Complete ıf t	he organizatic	on answered "Y	es" to Form 99	90, Part IV, lın	ie 34 be	scause it h	ad one or more	related
(a) Name, address, and EIN of related organization	<u>S</u> c	<u> </u>	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(C corp, S corp, or trust)		(f) Share of total income		(g) Share of Peend-of-year o	(h) Percentage ownership
None									.0	.0	\$00.
				-							
											;
		, ,									
932162 02-04-10									Sch	Schedule R (Form 990) 2009	90) 2009

84-6059377

Yes No

Denver Area Council Boy Scouts of America Trust

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Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV2		_		
a Receipt of (i) interest (ii) annuties (iii) royalties or (iv) rent from a controlled entity		1a	×	ı
b Gift, grant, or capital contribution to other organization(s)		1b X		ı
c Gift, grant, or capital contribution from other organization(s)		10	X	
d Loans or loan guarantees to or for other organization(s)		19	X	1 1
e Loans or loan guarantees by other organization(s)		1e	×	1 1
f Sale of assets to other organization(s)		#	×	1
g Purchase of assets from other organization(s)		19	X	ı ı
h Exchange of assets		ŧ	×	
i Lease of facilities, equipment, or other assets to other organization(s)		=	×	- 1
j Lease of facilities, equipment, or other assets from other organization(s)		į ,	×	1 1
k Performance of services or membership or fundraising solicitations for other organization(s)		¥	×	- 1
l Performance of services or membership or fundraising solicitations by other organization(s)		=	צ	1
m Sharing of facilities, equipment, mailing lists, or other assets		1	×	1
n Sharing of paid employees		Ę.	×	1
o Reimbursement paid to other organization for expenses		9	×	1 1
p Reimbursement paid by other organization for expenses		10	×	- 1
			-	1
q Other transfer of cash or property to other organization(s)		4	×	- 1
r Other transfer of cash or property from other organization(s)		11	×	- 1
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	action threshokts.			- 1
(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved	ved	1
(1) N/A			0.	1
(2)				
(3)				1
(4)				
(5)				
(9)				
932163 02-04-10	Schedu	Schedule R (Form 990) 2009	0) 2009	ا ھ

84-6059377

Denver Area Council Boy Scouts of America Trust

Schedule R (Form 990) 2009

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue)

Notine address, and EIN Primary activity (Legal domotion and entropy of entro	(a)	(9)	(၁)	9	(e)	Œ	(6)		Œ
Of entity (state of toregn segmentary)	Name, address, and EIN	Primary activity		Are all partners		Dispropor-			eral or
X X 0 X X X X X X X X X X X X X X X X X	of entity			organizations?		allocations?		- 1	
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Form 8	3868 (Rev. 4-2009)			Page 2				
• If y	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this	oox		→ X				
	Only complete Part II if you have already been granted an automatic 3-month extension on a previously file		8868	,				
• If y	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).							
Par	t II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no	copies i	needed)					
_	Name of Exempt Organization	Emp	Employer identification number					
Туре	Denver Area Council Boy Scouts							
print	of America Trust	8	4-605	59377				
File by extende		For I	RS use or	nly				
due dat	e for 10455 West 6th Avenue, No. 100]						
return :	See City, town or post office, state, and ZIP code. For a foreign address, see instructions							
ınstruct	Denver, CO 80215							
Chec	k type of return to be filed (File a separate application for each return).							
X	Form 990	∐_ F	orm 5227	Form 8870				
L	Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	☐ F	om 6069					
STOF	! Do not complete Part II if you were not already granted an automatic 3-month extension on a previo	usly file	ed Form 8	3868.				
	William McGuire		•					
• Th	e books are in the care of > 10455 West 6th Avenue, Ste. 100 - Denv	er.	ന മ	215				
	lephone No ► 303-455-5522 FAX No ► 303-455-468		<u> </u>	,				
	he organization does not have an office or place of business in the United States, check this box			- ▶ □				
	·	his is fo	r the who	le group, check this				
box I				9 , .				
4	I request an additional 3-month extension of time until November 15, 2010.							
5	For calendar year 2009, or other tax year beginning, and ending							
6	If this tax year is for less than 12 months, check reason Initial return Final return		Change ı	n accounting period				
7	State in detail why you need the extension							
	More time is requested to acquire all information nee	ded	to fi	lle 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	ŀ						
	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 instruction	8c	\$	N/A				
	Signature and Verification							
Under it is tri	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to ie, correct, and complete, and that I am authorized to prepare this form.	he best o	ot my know	riedge and belief,				
Signat	ura Maria, Montaen Tilla D CDA	Nate	S	16/10				

Form **8868** (Rev. 4-2009)