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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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

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			dar year,		eginning 12/01	, 200	9, and ending			, 2010	
В	Check if	applicable	Dia	c				D Employ	yer Identı	fication Number	
	Add	ress change	Please use IRS label	COLORADO	500 CHARIT	Y FUND		84-	0986	727	
	Nam	ne change	or print or type.		ING PAN ROAL			E Teleph			
	\vdash	-	See		CO 81621						
	H Initia	al return	specific Instruc-					970	-927	-4010	
	Terr	тıлаtıon	tiòns.								
	Ame	ended return	1					G Gross	receipts \$	67	,728.
	-	lication pending	F Name a	and address of prii	ncinal officer			H(a) Is this a group retu			1
	☐ ~ pp	incation penuing						H(b) Are all affiliates inc		₽ ```	
				AS C ABOV	<u> </u>			If 'No,' attach a list		tructions) Yes	∐ No
<u></u>	<u>Та</u> х-е	exempt statu	ıs X 501	(c) (3)◀ (insert no)	4947(a)(1) or	527				
J	Webs	site: ► N/	Α		,			H(c) Group exemption n	umber 🏲	•	
ĸ		of organization	Corpora	ation Trust	Association	Other ►	Year of Formati			egal domicile	
_			<u> </u>	ation Trust	ASSOCIATION	Other - I	- real or rollial	111	State of it	egai domicile	
Pa	ırt I	Summa									
) 1 E	Briefly descri	be the orq	ganızatıon's m	nission or most sig	nificant activities	<u> PROVII</u>	<u>DE_ASSISTAN</u> O	<u>E IN</u>	<u>THE FORM</u>	LOF_
•	l :	SCHOLARS	HIPS A	ND GRANT	S TO WORTHY	INDIVIDUALS_	AND_ORGA	NIZATIONS I	N_WES	TERN	
ဋ		COLORADO									
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ē	2 7	Charle Abra ba				its operations or dis					
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ď					overning body (Pai		165	•	3		
69						ıng body (Part VI, III	ne (b)	•	4		0
ŧ				yees (Part V,					5		0
ŧ	6 T	Total number	of volunt	eers (estimat	e if necessary)				6		0
ď	7 a T	Total gross u	nrelated t	ousiness revei	nue from Part VIII,	column (C), line 12			7 a		0.
	l .				me from Form 990				7b		0.
					·	<u>'</u>		Dailou Vocas		Current Y	
	ا							Prior Year			
<u>o</u>				ts (Part VIII,			•	105,2	208.		<u>,750.</u>
Š				ue (Part VIII,							
Revenue	10	nvestment in	come (Pa	art VIII, colum	n (A), lines 3, 4, a	nd 7d)		5,8	386.	3	,978.
æ), lines 5, 6d, 8c, 9						
						art VIII, column (A),	line 12)	111,0	094.	67	,728.
_								99,3	$\overline{}$,857.
					art IX, column (A),			33,	213.		, 657.
3					art IX, column (A),						
~~	15 9	Salaries, othe	er comper	rsation, empl	oyee benefits (Parl	IX, column (A), line	es 5-10)		1	_	
					IX, column (A), line					·	
Ē	l .			C	The state of the s			. 12 74			
Expenses	Ь⊺	Total fundrais	sing expe	nses (Part IX,	, column (D), line 2	25) > (0)		18 1 18 22 3	, ⁵ t	سهريم الجديد	4 , (
о П	17 (Other expens	es (Part l	X. columກີ່ຂໍ້(A), lines 11a-11d,?1	11-24n O	i	24,2	248.	26	,013.
•	18 T	rotal evnens	ec Δdd Iu	nes 13.17 (m	ust equal Part IX (column (A), line 25)		123,			,870.
		-			STLANCE	ter formation in the	•				$\frac{73.5}{142.}$
	19 F	Revenue less	expense	s Subtract III	ne 18: from-line: 12:	1 0	· · ·	-12,4	109.		, 142.
Net Assets or Fund Balancos				<u>. </u>	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			Beginning of \	rear	End of Ye	ear
Ϋ́	20 T	Total assets	(Part X. lı	ne 16)				717,2	256.	653	,115.
ξä		Total liabilitie	•	•					0.		0.
žŠ	1		-				•	717	25.0		
	22 1				ct line 21 from line	20		717,2	256.		<u>,115.</u>
Pa	rt II	Signati	<u>ure.Bloc</u>	<u> </u>						· · · · · ·	
		Under penaltie	s of periury.	I declare that I ha	ve examined this return.	including accompanying so) is based on all information	chedules and state	ements, and to the best	of my kno	wledge and belief,	ıt ıs
		true, correct, a	ind complete	Declaration of pr	eparer (other than officer	r) is baséd on all information	on of which prepai	rer has any knowledge			
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He	,,,	Signature	ella	AL VILLE	arm ar			Data /	/-		
ne	IC	1.			-			Date			
		► WALL	ACE DAI	LLENBACH				PRESIDENT	_		
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_			_				Date	Check if	Pre	eparer's identifying ee instructions)	number
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Or	ııy	employed), address, and ZIP + 4	·) 927-478	20
					81621			Phone no	(9/6		
_					arer shown above?					X Yes	No
	A F	Drivacy Act	and Panel	work Reduct	ion Act Notice, sec	the separate instru	actions.	TEEA0113	L 12/29/	09 Form 99	0 (2009)

Forn	n 990 (2009) COLORADO 500 CHARITY FUND	84-0986727	Page 2
Pa	rt III Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission TO PROVIDE ASSISTANCE IN THE FORM OF SCHOLARSHIPS AND GRANTS TO AND ORGANIZATIONS IN WESTERN COLORADO.	WORTHY INDIVIDUALS	
		·	
2	Did the organization undertake any significant program services during the year which were not listed o Form 990 or 990-EZ?	n the prior Yes X	No
3	If 'Yes,' describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program se	ervices? Yes X	No
4	If 'Yes,' describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program service and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants at expenses, and revenue, if any, for each program service reported	es by expenses. Section 501(c and allocations to others, the to	r)(3) otal
4 8	TO PROVIDE CASH BENEFITS TO MOSTLY YOUTH ORIENTED AGENCIES THAT FUND RAISING ORGANIZATIONS, ON THEWESTERN SLOPE OF THE STATE OF	ARE FORGOTTEN BY TH) IE
41	(Code. (C	(Revenue \$)
40	C (Code:) (Expenses \$19,300. including grants of \$) TO PROVIDE FINANCIAL ASSISTANCE TO WORTHY INDIVIDUALS AND FAMILII COLORADO.	(Revenue \$_ES_IN_WESTERN	
40	d Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue	\$	
46	e Total program service expenses ► 111,857.		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u>X</u> _	ļ <u>.</u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х_
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	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? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		<u>x</u> _
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		<u>x</u>
9	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	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? It 'Yes,' complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable .	11	Х	
	 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 investments— program related 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 IX Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X 			
	 Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X 			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		Х
	AWas the organization included in consolidated, independent audited financial statement for the tax Yes No			
	year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional	10		v
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E a Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If 'Yes,' complete Schedule F, Part I</i>	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
19		10		v
20	complete Schedule G, Part III Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	19 20		X

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X

Part IV Checklist of Required Schedules (continued) Yes No 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 Х 21 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. Х 22 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 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, and 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 Х 24b **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .. . 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25 a 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 25<u>a</u> X b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete 25b Х Schedule L, Part I 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II X 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee 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 transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV X 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28b Х Schedule L, Part IV 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 X 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If 'Yes,' complete Schedule M* 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 X Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Х 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, Х 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, X Part V. line 2. . 35 **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* 36 X

BAA Form **990** (2009)

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O

treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI

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Statements Regarding Other IRS Filings and Tax Compliance Part V Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S Information Returns, Enter -0- if not applicable 0 O **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1 b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c 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 0 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **2** b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3 a **b** If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q 3Ь 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?. 4a 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. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?. 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited 5с Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6a Х b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not 6b deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services Х 7 a provided to the payor? 7 b b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7 e benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f Х g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7 g 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business 8 holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. 9a a Did the organization make any taxable distributions under section 4966? 9b **b** Did the organization make any distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 ... 10a b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from other members or shareholders **b** Gross income from other sources (Do not net amounts due or paid to other sources against 11 b amounts due or received from them)

BAA

Form 990 (2009)

12a

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

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.

Se	ction A.	Governing Bo	dy and Manag	gement										
												Ye	s	No
1	a Enter the	number of voting	members of the o	governing bod	у.	•	1	a			_1		T	
	b Enter the	number of voting	members that are	e independent	t		1	b						1
2	Did any o officer, d	fficer, director, tru rector, trustee or I	stee, or key empl key employee?	oyee have a f	famıly relatıoı	nship or a business r 	relatio	onshi	p with a	any other			_	X
3	Did the o	rganization delega s, directors or trus	te control over ma	anagement du oyees to a ma	uties customa	arily performed by or ompany or other pers	unde	er the	direct	supervisi	on :	3		X
4	Did the o	rganization make i	any significant cha	anges to its or	rganizational	documents						1		X
	since the	prior Form 990 wa	as filed?								🗀		Т	
5	Did the o	rganization becom	e aware during th	e year of a m	aterial divers	ion of the organization	on's a	asset	s?		Ŀ	<u> </u>	\perp	<u>X</u>
6	Does the	organization have	members or stoc	kholders?	•							<u>. </u>		<u>X_</u>
7	a Does the governing	organization have body? .	members, stockh	olders, or oth	er persons w	ho may elect one or	more	e mei	mbers o	of the		7 a		<u>X</u>
	b Are any o	lecisions of the go	verning body subj	ect to approve	al by membe	rs, stockholders, or o	other	pers	ons?			7 b		X
8	Did the o	rganization conten	nporaneously doc	ument the me	etings held o	r written actions und	dertak	ken d	uring th	ne year by	y			
	a The gove	rning body?				•					_ [1	3a		X
	b Each con	nmittee with autho	rity to act on beha	alf of the gove	rning body?						- [3b		X
9	Is there a organizat	iny officer, director ion's mailing addre	r or trustee, or key ess? <i>If 'Yes,' prov</i>	y employee lis	sted in Part V s and addres	/II, Section A, who ca ses in Schedule O	anno	t be r	eached	at the	_ ,	,		Х
_	ction B.					bout policies not					nal			
Rev	enue Code)												
											_	Ye		No
10	a Does the	organization have	local chapters, bi	ranches, or af	filiates?	•				•	10) a	4	<u>X</u>
	and bran	ches to ensure the	ir operations are	consistent wit	h those of th						s, 10	ь		
		•				of its governing body					1			<u>X</u>
				=	_	review this Form 99	90	SEE	SCHE	EDULE	· —		_	
		organization have		-	•	-		•			12	<u>≀a</u>	4	<u>X</u>
	to conflic	ts? .	•			ose annually interests					<u> </u>	2b	\downarrow	
	c Does the Schedule	organization regul	larly and consistei e .	ntly monitor a	nd enforce co	ompliance with the p	olicy	? If '\	Yes,' de	escribe in	12	2c	┵	
13	Does the	organization have	a written whistlet	olower policy?							. 1	-		X
		organization have				· -			•		14	<u> </u>	-	<u>X</u>
15	Did the p persons,	rocess for determi comparability data	ning compensation, and contempora	n of the follow aneous substa	ving persons intiation of th	include a review and e deliberation and de	d app ecisio	oroval on?	by inde	ependent	t [\perp		
	a The orga	nization's CEO, Ex	ecutive Director,	or top manage	ement officia	Ι .					. 1	ia	4	X
		cers of key emplo			•						1!	<u> </u>	4	<u>X</u>
		line 15a or 15b, o	•		•	•								1
16	a Did the o entity dui	rganization investing the year?	in, contribute ass	ets to, or parti	icipate in a jo	oint venture or simila	ar arra	anger	nent w	ith a taxa	ible 10	a	1	X
	b If 'Yes,' h	as the organization	n adopted a writte			uring the organizatio en steps to safeguar		evalu e orga	iate its inizatioi	participat n's exem	tion pt 16	-	1	
50		h respect to such Disclosures	arrangements? .	· · · · · · · · · · · · · · · · · · ·	<u> </u>			•				, <u>u</u>		
17		tates with which a	conv of this Form	990 is reniur	ed to be filed	I ► NONE						•		
18				-		of applicable), 990, a			(501/c)		:	 able fo		
10	inspection	n Indicate how yo website	u make these ava	ılable. Check	all that apply	' .	anu s	750-1	(301(0)	(J)S Offing	r) avaii	able ic	n pu	JUIC
19	Describe	ın Schedule O wh	ether (and if so, h			es its governing docu	ıment	ts, co	nflict of	f interest	policy,	and f	ınan	icial
20		ts available to the	•	one number	of the nerson	who possesses the	hook	re ann	t record	ts of the	Otdani.	ation		
ZŲ		DE J. DALLEN				81621 970-9						.a.1011. 		

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Form 990 (2009)

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations'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 employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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 compensate any current officer, director, or trustee. (A) (D) **(E)** (F) (B) (c) Average hours per week Position (check all that apply) Estimated amount of other compensation from the Name and Title Reportable compensation from the organization (W-2/1099-MISC) Reportable compensation from related organizations (W-2/1099-MISC) Officer Individual trustee Institutional Key employee employee Highest compensated director organization and related organizations trustee WALLACE J. DALLENBACH DIRECTOR 0. 0 0 0.

TEEA0107L 11/10/09

Part VII Section A. Officers, Directors, Trus (A)	(B)				c)			(D)	(E)	(F)
Name and Title			Position (check all that a					compensation from	Reportable compensation from related organizations	Estimated amount of other compensation
		dividua	strutio	Officer	y emp	ghest o	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related
	per week	al trust	Institutional trustee		employee	Highest compensated employee				organizations
		8	stee			nsated				
	-		\vdash		_					
	ļ <u></u>									
	-					_				
	-		_							
1 b Total	l		<u> </u>	<u> </u>	<u> </u>	L	<u> </u>	0.	0.	0
2 Total number of individuals (including but not limite	d to tho	se lı	stec	abo	ove)	wh	o re	ceived more than	\$100,000 in report	able compensation
from the organization 0				_						Yes No
3 Did the organization list any former officer, director	or trust	ee, l	key	emp	oloye	ee,	or h	ghest compensat	ed employee	
on line 1a? If 'Yes,' compléte Schedule J for such in 4 For any individual listed on line 1a, is the sum of re	ndıvıdua	aL		•	•	-				. 3 X
the organization and related organizations greater t	han \$15	50,00	00?	If 'Y	es'	com	plet	e Schedule J for	such .	4 X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sci	ompens	atio	n fro	om a	any erso	unre	elate	ed organization foi	services	5 X
Section B. Independent Contractors	_									
1 Complete this table for your five highest compensation from the organization.	ed inde	pend	dent	con	trac	tors	tha	it received more t	han \$100,000 of	
(A) Name and business addres	s	_						(B) Description ((C) Compensation
				-						
2 Total number of independent contractors (including \$100,000 in compensation from the organization \$		lımı	ted	to th	ose	list	ed a	above) who receiv	ed more than	

Pa	t VIII Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
5 S	1a Federated campaigns 1a 63,750.				_
NA T	b Membership dues 1b				
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	c Fundraising events. 1c	[
	d Related organizations 1d	1			
	e Government grants (contributions) . 1e				
82					
툿빍	f All other contributions, gifts, grants, and similar amounts not included above				
	g Noncash contribus included in lns 1a-1f. \$	1			
Š	h Total. Add lines 1a-1f	63,750.			
-	Business Code	03,730.			
PROGRAM SERVICE REVENUE					
₫					
삥	b				
Ž	c				
3	a				
&	e				
8	f All other program service revenue				
<u> </u>	g Total. Add lines 2a-2f				
	3 Investment income (including dividends, interest and	2 070	2 070		
ļ	other similar amounts).	3,978.	3,978.		
- 1	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
J	(i) Real (ii) Personal				
	6a Gross Rents			1	
	b Less rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)				
	7a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory				
	b Less; cost or other basis				
	and sales expenses				ł
	c Gain or (loss)				
- 1	d Net gain or (loss)				
J.E	8a Gross income from fundraising events (not including \$				
É	of contributions reported on line 1c).	1			
2	See Part IV, line 18 . a				J
OTHER REVEN	b Less: direct expenses . b				
0	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities. See Part IV, line 19				
-	b Less direct expenses . b	1			}
	c Net income or (loss) from gaming activities .				
- 1	· · ·	-			
	10 a Gross sales of inventory, less returns and allowances				
	b Less cost of goods sold . b				
	c Net income or (loss) from sales of inventory .				
	Miscellaneous Revenue Business Code				
	11a	· · · · · · · · · · · · · · · · · · ·	·		· · · · · · · · · · · · · · · · · · ·
	b				
l	c				
	d All other revenue		-		
	e Total. Add lines 11a-11d				1
	12 Total revenue. See instructions	67,728.	3,978.	0.	0.
	in the second control of the second control				

Part IX | Statement of Functional Expenses

	Section 501(c)(3 All other organizations must comp		ations must complete a e not required to comple		(D).
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	50,557.	50,557.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	61,300.	61,300.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16		,		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
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)	·			
	a Management				
	Legal				
	Accounting	912.		912.	
	d Lobbying				
	Prof fundraising svcs. See Part IV, In 17				
	Investment management fees				
	a Other			<u> </u>	
•	Advertising and promotion		· - · · - · ·		
13	· · · · · · · · · · · · · · · · · · ·	21.		21.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	• •				
18					
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).				
á	ADMINISTRATIVE	17,052.		17,052.	
ı	MISCELLANEOUS	4,293.		4,293.	
(PRINTING AND PUBLICATIONS	3,695.		3,695.	
•	BANK CHARGES	40.		40.	_
•	;				
1	All other expenses				
	Total functional expenses. Add lines 1 through 24f	137,870.	111,857.	26,013.	0.
	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				
	campaign and randraising solicitation	<u></u>			

			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	10,507.	1	67,735
	2	Savings and temporary cash investments	673,677.	2	552,308
	3	Pledges and grants receivable, net .		3	
1	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	18,000.	5	18,000
	6	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	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
5	9	Prepaid expenses and deferred charges		9	
1	10 a	Land, buildings, and equipment: cost or other basis. 10a 15,072.			
		Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b	15,072.	10 c	15,072
1	11	Investments – publicly-traded securities		11	
1	12	Investments – other securities See Part IV, line 11		12	
1	13	Investments – program-related. See Part IV, line 11 .	,	13	
1	14	Intangible assets		14	
1	15	Other assets See Part IV, line 11		15	
1	16	Total assets Add lines 1 through 15 (must equal line 34)	717,256.	16	653,115
1	17	Accounts payable and accrued expenses		17	
1	18	Grants payable		18	
1	19	Deferred revenue		19	
2	20	Tax-exempt bond liabilities .		20	
<u> </u>	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
T		of Schedule L		22	
E 2	23	Secured mortgages and notes payable to unrelated third parties .		23	
2	24	Unsecured notes and loans payable to unrelated third parties		24	
12	25	Other liabilities Complete Part X of Schedule D .		25	
2	26	Total liabilities. Add lines 17 through 25.	0.	26	0
N L		Organizations that follow SFAS 117, check here > X and complete lines			
Ĕ		27 through 29 and lines 33 and 34.			
\$ 2	27	Unrestricted net assets	717,256.	27	653,115
§ 2	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
R		Organizations that do not follow SFAS 117, check here ▶ and complete			
F.		lines 30 through 34.			
F 3	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
: :	32	Retained earnings, endowment, accumulated income, or other funds		32	
ZCES :	33	Total net assets or fund balances.	717,256.	33	653,115
e i		Total liabilities and net assets/fund balances .	717,256.	34	653,115

TEEA0111L 01/30/10

Form 990 (2009) COLORADO 500 CHARITY FUND 84-09867	27	Pa	ige 12
Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990. X Cash 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		<u>X</u>
b Were the organization's financial statements audited by an independent accountant?	2b		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?	i, 2c		
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	i		
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:	ļ		
Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required au	dit 3h		

BAA

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)

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Total

nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name of the organization Employer identification number COLORADO 500 CHARITY FUND 84-0986727 Part I | Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) X 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 9 June 30, 1975. See **section 509(a)(2).** (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that 11 describes the type of supporting organization and complete lines 11e through 11h Type III - Functionally integrated Type III- Other Type II С 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 (ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organizations (v) Did you notify the organization in col (i) of your support? (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (i) Name of Supported Organization (ii) EIN (iv) Is the (vi) Is the (vii) Amount of Support 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) ► (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.'). 108,544 594,433 63,750 97.937 105,208 969,872. Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf 0. 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. 105,208 63,750 969,872 97,937 108,544 594,433 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 shown on line 11, column (f) 0. Public support. Subtract line 5 969,872. from line 4 Section B. Total Support Calendar year (or fiscal year (c) 2007 (d) 2008 (e) 2009 (f) Total (a) 2005 (b) 2006 beginning in) 63,750 97,937 105,208 969,872 108,544 594,433 Amounts from line 4 Gross income from interest. dividends, payments received on securities loans, rents, royalties and income form 5,768 5,886. 3,978 30,650. 7,002 8,016 similar sources Net income from unrelated business activities, whether or not the business is regularly 0. carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in 0. Part IV.) Total support. Add lines 7 through 10 1,000,522. 12 Gross receipts from related activities, etc (see instructions) 0. 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 96.9% 14 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) 15 97.2% 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 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. 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 BAA Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 COLORADO 500 CHARITY FUND 84-0986727 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal yr beginning in) (a) 2005**(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, 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 nurnose 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 c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6.) Section B. Total Support (c) 2007 (d) 2008(f) Total Calendar year (or fiscal yr beginning in) (a) 2005 **(b)** 2006 (e) 2009 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 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.) 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 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 % 16 16 Public support percentage from 2008 Schedule A, Part III, line 15 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)). 17 % 18 Investment income percentage from 2008 Schedule A, Part III, line 17... 18 % 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

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A	(Form	990 or	990-EZ	2009	CO	LORA	DO_	500	CHA	RITY	FUND)			84-0	<u>98672</u>	7	Pa	age 4
Schedule A	Supp	lemer	ital In	format	tion.	Com	plet	e this	par	t to p	rovide	the e	explanation	ons rec	uired b	y Part	II, line	10;	
	rait	i, iiiie	1/a (, ולו	and	Part	111,	ime	12. F	TOVIG	e any	otriei	audition	ar inior	mation	. See	instruc	ions.	
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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, lines 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer Identification number

CO]	LORADO 500 CHARITY FUND			84-098672	7
Pai	rt I Organizations Maintaining Dono	r Advised Eunds or Oth	or Similar Funds o		
1 41	the organization answered 'Yes' t	o Form 990 Part IV line	er Similar Funus O	r Accounts Comp	iete ii
	the organization answered Tes t	(a) Donor advised		(b) Funds and other	accounts
1	Total number at end of year	(a) Donor advised	Turius	(b) Fullus and other	accounts
2	Aggregate contributions to (during year)				
2	Aggregate contributions to (during year) Aggregate grants from (during year)				
	Aggregate value at end of year				
-		<u> </u>			
5	Did the organization inform all donors and doi funds are the organization's property, subject	nor advisors in writing that the to the organization's exclusive	e assets held in donor a e legal control?	dvised Yes	i No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private beni	the benefit of the donor or do	ing that grant funds man nor advisor or for any o	y be ther . Ye s	i ∏No
Pai	rt II Conservation Easements Comple		swered 'Yes' to Fo	rm 990, Part IV. II	ne 7.
	Purpose(s) of conservation easements held b				
-	Preservation of land for public use (e.g., i	-	_ ' ' ' '	nistorically important la	and area
	Protection of natural habitat	, and a product of	\blacksquare	ified historic structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization last day of the tax year.	on held a qualified conservati	on contribution in the fo	orm of a conservation of	easement on the
				Held at the En	d of the Year
ä	Total number of conservation easements			2a	
ı	Total acreage restricted by conservation ease	ments .		2b	
(Number of conservation easements on a certi	fied historic structure included	l ın (a)	2c	
(d Number of conservation easements included i	in (c) acquired after 8/17/06		2 d	
3	Number of conservation easements modified,	transferred, released, extingu	iished, or terminated by	the organization during	ng the tax
	year ►				
4	Number of states where property subject to co	onservation easement is locat	ed >		
5	Does the organization have a written policy re	garding the periodic monitoring	ng, inspection, handling	of violations,	s □ No
6	and enforcement of the conservation easeme Staff and volunteer hours devoted to monitori during the year >		conservation easement	∴ ∐ Ye s s	, Пи
7	Amount of expenses incurred in monitoring, in during the year ►	nspecting, and enforcing cons	ervation easements	\$	_
8	Does each conservation easement reported o	n line 2(d) above satisfy the r	equirements of section		
Ī	170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?			∐ Yes	; ∐ No
9	In Part XIV, describe how the organization report include, if applicable, the text of the footnote conservation easements.	s conservation easements in its to the organization's financial	revenue and expense sta statements that describ	itement, and balance shoes the organization's	eet, and accounting for
Pai	rt III Organizations Maintaining Colle	ctions of Art. Historical	Treasures, or Othe	er Similar Assets	
	Complete if the organization ans	wered 'Yes' to Form 990), Part IV, line 8.		
16	a If the organization elected, as permitted unde treasures, or other similar assets held for pub the text of the footnote to its financial statemi	ilic exhibition, education, or re	search in furtherance o	nd balance sheet works of public service, provid	s of art, historical le, in Part XIV,
_				alance about wedge of	aut biota-i-sal
	b If the organization elected, as permitted unde treasures, or other similar assets held for pub amounts relating to these items:	lic exhibition, education, or re	search in furtherance o	f public service, provid	le the following
	(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 a amounts required to be reported under SFAS	art, historical treasures, or other			e following
	a Revenues included in Form 990, Part VIII, line	e 1		. ►\$	
	Assets included in Form 990, Part X			►\$	

Schedule D (Form 990) 2009 COLORADO 500		ani and Tona	84-098	
Part III Organizations Maintaining Coll	ections of Art, Histo	oricai i reasures, or	Other Similar Ass	ets (continuea)
3 Using the organization's acquisition accession items (check all that apply).	n and other records, che	eck any of the following t	hat are a significant us	e of its collection
a Public exhibition	d Loan	or exchange programs		
b Scholarly research	e [_] Other	, 		
c Preservation for future generations				
4 Provide a description of the organization's co Part XIV.	•	•		se in
5 During the year, did the organization solicit o assets to be sold to raise funds rather than to	r receive donations of a be maintained as part	rt, historical treasures, o of the organization's col	r other similar lection?	☐ Yes ☐ No
Part IV Escrow and Custodial Arranger 9, or reported an amount on For	nents Complete if o	organization answer		
1a Is the organization an agent, trustee, custodi included on Form 990, Part X?	an, or other intermedian	y for contributions or oth	er assets not	☐ Yes ☐ No
b If 'Yes,' explain the arrangement in Part XIV				
	·			Amount
c Beginning balance			1 c	
d Additions during the year .			1 d	
e Distributions during the year			1 e	
f Ending balance			1f]	
2a Did the organization include an amount on Fo	orm 990, Part X, line 21	7	;	Yes No
b If 'Yes,' explain the arrangement in Part XIV				
Part V Endowment Funds Complete if of		7	· 1	
(a) Currer	t year (b) Prior yea	r (c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance				
b Contributions .				ļ <u> </u>
c Net Investment earnings, gains, and losses .				
d Grants or scholarships				
e Other expenditures for facilities and programs				
f Administrative expenses .				
g End of year balance				
2 Provide the estimated percentage of the year	end balance held as			
a Board designated or quasi-endowment ▶				
b Permanent endowment ►	}			
c Term endowment ► %				
3a Are there endowment funds not in the posses organization by:	ssion of the organization	that are held and admii	nistered for the	Yes No
(i) unrelated organizations				3a(i)
(ii) related organizations		• •		3a(ii)
b If 'Yes' to 3a(II), are the related organizations			•	3b
4 Describe in Part XIV the intended uses of the				
Part VI Investments—Land, Buildings,			line 10.	
Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		45.000		45 454
e Other .	L	15,072.		15,072.
Total. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part X,	column (B), line 10(c).)		15,072.
BAA			Sched	lule D (Form 990) 2009

Schedule D (Form 990) 2009 COLORADO 500 CHAR		84-0986727 Page
Part VII Investments-Other Securities See F		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
		······································
		
Total. (Column (b) must equal Form 990 Part X, col. (B) line 12.)		
Total. (Column (b) must equal Form 990 Part X, col. (B) line 12.) Part VIII Investments—Program Related (See	Form 990 Part X line 1	3) N/A
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
· · · · · · · · · · · · · · · · · · ·		
		
Total. (Column (b) must equal Form 990, Part X, Col (B) line 13.) ► Part IX Other Assets (See Form 990, Part X,	line 15) N/A	
		(b) Book value
(a) De	scription	(b) Book value
		
		
		
Total. (Column (b) must equal Form 990, Part X, col (B), I		
Part X Other Liabilities (See Form 990, Part	X, line 25)	
(a) Description of Liability	(b) Amount	
Federal Income Taxes		
		
		
T-11 (0 1 - (1) 1 - (15 - (200 B (V + (201 B (C))))		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	note to the experience for	ancial statements that reports the examination's lightly

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Sch	edule D (Form 990) 2009 COLORADO 500 CHARITY FUND	<u>84-098</u>	36727	Page 4
Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements	_	N/A	
1	Total revenue (Form 990, Part VIII, column (A), line 12).			
2	Total expenses (Form 990, Part IX, column (A), line 25).			
3	Excess or (deficit) for the year Subtract line 2 from line 1			_
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net). Add lines 4 through 8		-	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			
Pai	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	N/A	
1	Total revenue, gains, and other support per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
á	a Net unrealized gains on investments.	1 1		
	Donated services and use of facilities	-1		
	Recoveries of prior year grants	-1		
	d Other (Describe in Part XIV)	ᅴ		
	Add lines 2a through 2d	2e		
	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		 -	
٠,	a Investments expenses not included on Form 990, Part VIII, line 7b.			
	Other (Describe in Part XIV)	-		
	Add lines 4a and 4b	4c		
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		
	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p		rn N/A	
1		1		
_	Amounts included on line 1 but not on Form 990, Part IX, line 25		_	
	a Donated services and use of facilities			
	Prior year adjustments.			
	C Other losses 2c	_		
	d Other (Describe in Part XIV)	_		
	e Add lines 2a through 2d.	2e		
	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
٠,	a Investments expenses not included on Form 990, Part VIII, line 7b			
	b Other (Describe in Part XIV)			
	C Add lines 4a and 4b	4c		
	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)	5		
-	rt XIV Supplemental Information			
L				
Com	iplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this	IV, lines	1b and 2b, F	art V,
	mation.	part to p	novide any a	daitional

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Schedule **D** (Form 990) 2009

Schedule D	(Form 990) 2009	COLORADO 500	CHARITY F	UND			84-0986727	Page 5
Part XIV	Supplemental	Intormation (co	ntınued)	· .				
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SCHEDULE I (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 2009

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

Open to Public Inspection

% ⊠ ☐ Yes **Employer identification number** 84-0986727 Part I | General Information on Grants and Assistance COLORADO 500 CHARITY FUND Name of the organization

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

י מוניו מונים כמוממום	1000 II (000 IIII)	יים סטשלה ושויטוי	2000				
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(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
VARIOUS 501 (C) (3) ORGANIZATIONS 39 CONTRIBUTIONS - SEE ATTACHED	VARIOUS		30,557.	0.0			
WALLY DALLENBACH JR. FOUNDATION- 13853 BALLANTYNE MEADOWS DRIVE - CHARLOTTE, NC 28277	27-1108110		20,000.	0.			
2 Enter total number of section 501(c)(3) and government organization	(3) and government o	rganizations .				A	2

Schedule I (Form 990) 2009

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

3 Enter total number of other organizations

Page 2 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. Schedule I (Form 990) 2009 Part III

}	,	1	I	1	- 1	1		ļ	!	ļ	!	!	!	ļ		!	!	
(f) Description of non-cash assistance							er additional information.								 			
(e) Method of valuation (book, FMV, appraisal, other)							t I, line 2, and any other		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			 					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(d) Amount of non-cash assistance							ion required in Par	 	1 1 1	 	 	 						
(c) Amount of cash grant	19,300.	42,000.					provide the information required in Part		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									
(b) Number of recipients	1	16							1	1								
(a) Type of grant or assistance	ASSISTANCE TO MINISTRIES	SCHOLARSHIPS					Part IV Supplemental Information. Complete this part to								 			

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Schedule I (Form 990) 2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

Open to Public Inspection

	Employer identification number
COLORADO 500 CHARITY FUND	84-0986727
FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS	
NO_REVIEW_WAS_OR_WILL_BE_CONDUCTED.	

Schedule, O (F	orm 990) 2009					Page 2
Name of the organ	ization				Employer identification n	umber
COLORADO	500 CHARITY	FUND	 •		84-0986727	
			 			
			 			
			 		- -	
			 	- -		

2:11 PM , 05/25/11 **Accrual Basis**

Colorado 500 Charity Fund Transaction Detail By Account December 2009 through November 2010

Туре	Date	Num	Name	Amount	Balance
Charity Contributions					
Check	12/15/2009	1759	Wally Dallenbach Jr Foundation	10,000.00	10,000 0
Check	1/9/2010	1762	Darren Duroux	1,000 00	11,000 0
Check	1/25/2010	1769	samaritans Purse	1,000 00	12,000.0
Check	2/4/2010	1771	The Garden School	500 00	12,500 0
Check	4/8/2010	1774	Colorado Motorsports	500 00	13,000 0
Check	4/8/2010	1775	American Cancer Society	500 00	13,500 0
Check	4/27/2010	1777	Molly Memorial Education Fund	100 00	13,600 0
Check	5/10/2010	1779	Molly Memorial Education Fund	2,000 00	15,600 0
Check	5/24/2010	1780	Upper Image Embrodery	0 00	15,600 0
Check	5/24/2010	1781	Upper Image Embrodery	686 80	16,286 8
Check	6/13/2010	1788	Tri-City Resource	1,000 00	17,286 8
Check	6/13/2010	1789	church at Carbondale	750 00	18,036 8
Check	6/13/2010	1790	Ouray Community Center	1,000 00	19,036.8
Check	6/13/2010	1791	Youth Zone	500 00	19,536 8
Check	6/13/2010	1792	Riverbridge	1,000.00	20,536 8
Check	7/3/2010	1794	Jordan Farewell	1,000 00	21,536 8
Check	7/3/2010	1795	Basalt Chamber of Commerce	500 00	22,036 8
Check	7/3/2010	1796	Youth Zone	1,000 00	23,036 8
Check	7/22/2010	1799	Basalt High School	750 00	23,786 8
Check	8/22/2010	1800	Basalt Middle School	750 00	24,536 8
Check	8/22/2010	1801	Basalt Elementary School	750 00	25,286 8
Check	8/22/2010	1802	Ouray Ambulance	1,000 00	26,286 8
Check	8/22/2010	1803	Silverton Public School	1,000 00	27,286 8
Check	8/22/2010	1804	Colorado Mountain College- Davi	500 00	27,786 8
Check	8/22/2010	1805	Beta Chi Charity Donation	750.00	28,536 8
Check	8/22/2010	1806	Thomas Moore Sports Med	750 00	29,286 8
Check	8/22/2010	1807	Dream House for Kids	750 00	30,036 8
Check	8/22/2010	1808	Lake City Elementary	750 00	30,786 8
Check	8/22/2010	1809	Centennial Middle School	750 00	31,536 8
Check	8/22/2010	1810	Ouray Mountain Rescue	1,000 00	32,536 8
Check	8/22/2010	1811	Ouray Public School	1,000 00	33,536 8
Check	8/22/2010	1812	Lake City Medical Clinic	750 00	34,286 8
Check	8/22/2010	1813	Hinsdale County EMS	750 00	35,036 8
Check	8/22/2010	1814	Crested Butte Community School	1,000 00	36,036 8
Check	8/22/2010	1815	Crested Butte Mountain Bike Ass	750 00	36,786 8
Check	8/22/2010	1816	Crested Butte Ice Rink	750 00	37,536 8
Check	8/22/2010	1817	Crested Butte Search and Rescue	750 00	38,286 8
Check	8/22/2010	1818	Crested Butte Trail Riders	750 00	39,036 8
Check	8/22/2010	1819	Marble Charter School	500 00	39,536 8
Check	9/14/2010	1821	Basalt Chamber of Commerce	20.00	39,556 8
Check	9/20/2010	1822	Wally Dallenbach Jr Foundation	10,000 00	49,556 8
Check	10/20/2010	1828	American Motorcycle Association	1,000 00	50,556 8
Fotal Charity Contribution	ons		· -	50,556 80	50,556 8
			-		