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Short Form Return of Organization Exempt From Income Tax

2010

Open to Public Inspection

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

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions) All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

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

Department of the Treasury Internal Revenue Service

A For the 2010 calendar year, or tax year beginning, 2010, and ending, 20

B Check if applicable: Address change, Name change, Initial return, Termination, Amended return, Application pending. C Name of organization: TWO ANGELS FOUNDATION, INC. D Employer identification number: 20-3875772. E Telephone number: (720) 940-6078. F Group Exemption Number.

G Accounting method: X Cash, Accrual, Other (specify). H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: WWW.TWOANGELSFOUNDATION.ORG

J Tax-exempt status (check only one): X 501(c)(3), 501(c)(), 4947(a)(1) or, 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000 A Form 990-EZ or Form 990 return is not required through Form 990-N (e-postcard) may be required (see instructions) But if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. \$ 87,205.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I. X

Table with 21 rows and 3 columns. Rows include: 1 Contributions, gifts, grants, and similar amounts received (60,522); 2 Program service revenue; 3 Membership dues and assessments; 4 Investment income (22); 5a Gross amount from sale of assets other than inventory; 5b Less cost or other basis and sales expenses; 5c Gain or (loss) from sale of assets other than inventory; 6 Gaming and fundraising events; 6a Gross income from gaming; 6b Gross income from fundraising events; 6c Less direct expenses gaming and fundraising events; 6d Net income or (loss) from gaming and fundraising events (-4,187); 7a Gross sales of inventory, less returns and allowances; 7b Less cost of goods sold; 7c Gross profit or (loss) from sales of inventory; 8 Other revenue; 9 Total revenue (56,357); 10 Grants and similar amounts paid (43,830); 11 Benefits paid to or for members; 12 Salaries, other compensation, and employee benefits (0); 13 Professional fees and other payments to independent contractors (639); 14 Occupancy, rent, utilities, and maintenance; 15 Printing, publications, postage, and shipping (2,054); 16 Other expenses (5,305); 17 Total expenses (51,828); 18 Excess or (deficit) for the year (4,529); 19 Net assets or fund balances at beginning of year (41,981); 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year (46,510).

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Part II Balance Sheets. (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

Table with 3 columns: Description, (A) Beginning of year, (B) End of year. Rows include Cash, savings, and investments; Land and buildings; Other assets; Total assets; Total liabilities; Net assets or fund balances.

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? ATTACHMENT 8
Describe what was achieved in carrying out the organization's exempt purposes

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

Table with 3 columns: Description, Amount, Line Number. Rows include Fundraiser (Golf Tournament), Fundraiser (5K), Fundraiser (Wine Tasting), Other program services, and Total program service expenses.

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated

Check if the organization used Schedule O to respond to any question in this Part IV

Table with 5 columns: (a) Name and address, (b) Title and average hours per week devoted to position, (c) Compensation, (d) Contributions to employee benefit plans & deferred compensation, (e) Expense account and other allowances.

Part V Other Information (Note the statement requirements in the instructions for Part V)
Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O.
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions).
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T.
a Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?
b If "Yes," has it filed a tax return on Form 990-T for this year (see instructions)?
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N.
37a Enter amount of political expenditures, direct or indirect, as described in the instructions.
b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
b If "Yes," complete Schedule L, Part II and enter the total amount involved.
39 Section 501(c)(7) organizations Enter
a Initiation fees and capital contributions included on line 9
b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955
b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T
41 List the states with which a copy of this return is filed
42a The organization's books are in care of DAWN MOHATT Telephone no 720-940-6078
Located at 15801 W. 66TH PLACE ARVADA, CO ZIP + 4 80007
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.
c At any time during the calendar year, did the organization maintain an office outside of the U S? If "Yes," enter the name of the foreign country
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
c Did the organization receive any payments for indoor tanning services during the year?
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

	Yes	No
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?		X
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R must be completed instead of Form 990-EZ		X
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this part VI

	Yes	No
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
49a Did the organization make any transfers to an exempt non-charitable related organization?		X
b If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

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

f Total number of other employees paid over \$100,000

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

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors receiving over \$100,000

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A. Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here
 Signature of officer: Dawn Mohatt Date: 5/6/11
 Type or print name and title: Dawn Mohatt President

Paid Preparer Use Only
 Print/Type preparer's name: Marim E Delaney Preparer's signature: [Signature] Date: 5/5/11
 Check if self-employed PTIN: P00342848
 Firm's name: BRINKERHOFF REVENIG & CORRIGAN P.C. Firm's EIN: 84-1035533
 Firm's address: 1873 S. BELLAIRE STREET, SUITE 1000 DENVER, CO 80222 Phone no: 303-757-8000

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

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

Name of the organization: **TWO ANGELS FOUNDATION, INC.** Employer identification number: **20-3875772**

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 a 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)**.
- 7 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)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 9 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	<input type="checkbox"/>	<input type="checkbox"/>
(ii) A family member of a person described in (i) above?	<input type="checkbox"/>	<input type="checkbox"/>
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	<input type="checkbox"/>	<input type="checkbox"/>

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2010

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	35,414.	32,428.	48,722.	56,519.	60,522.	233,605.
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.	35,414.	32,428.	48,722.	56,519.	60,522.	233,605.
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).						19,538.
6 Public support. Subtract line 5 from line 4						214,067

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	35,414.	32,428.	48,722.	56,519.	60,522.	233,605.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8.	28.	21.	17.	22.	96.
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						233,701.
12 Gross receipts from related activities, etc (see instructions)				12		
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	91.60%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	0.00%
16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b.						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6.						
10a 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						
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)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2010. 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 - 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here The organization qualifies as a publicly supported organization ▶

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

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions)

ATTACHMENT 1SCHEDULE A, PART II - EXCESS CONTRIBUTIONS

(NOT OPEN TO PUBLIC INSPECTION)

<u>CONTRIBUTOR NAME</u>	<u>TOTAL CONTRIBUTION</u>	<u>LESS 2% OF LINE 11 (F)</u>	<u>EXCESS CONTRIBUTION AMOUNT</u>
ACTIVE.COM	10,170.	4,674.	5,496.
ANSCHUTZ FAMILY FOUNDATION	5,000.	4,674.	326.
EKS&H	10,000.	4,674.	5,326.
GINN MILL	8,594.	4,674.	3,920.
UNO AND LAVONNE MARKIN	5,268.	4,674.	594.
DOUG WILLS	8,550.	4,674.	3,876.
TOTAL	<u>47,582.</u>		<u>19,538.</u>

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total events	
		GOLF TOURNAMENT (event type)	POKER (event type)	2. (total number)	(add col (a) through col (c))	
Revenue	1	Gross receipts	39,116.	13,645.	13,272.	66,033.
	2	Less. Charitable contributions	28,567.	9,615.	1,190.	39,372.
	3	Gross income (line 1 minus line 2)	10,549.	4,030.	12,082.	26,661.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	14,752.			14,752.
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	4,392.	4,376.	7,328.	16,096.
	10	Direct expense summary Add lines 4 through 9 in column (d)				(30,848.)
	11	Net income summary Combine line 3, column (d), and line 10				-4,187.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))	
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes _____ % No	Yes _____ % No	Yes _____ % No	
	7	Direct expense summary Add lines 2 through 5 in column (d)				()
	8	Net gaming income summary Combine line 1, column d, and line 7				

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If "No," explain _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain _____

- 11** Does the organization operate gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity operated in

a The organization's facility	13a	%
b An outside facility	13b	%
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ _____

Address ▶ _____

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c** If "Yes," enter name and address of the third party

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (ii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

Name of the organization

TWO ANGELS FOUNDATION, INC.

Employer identification number

20-3875772

OTHER ASSETS

PART II BALANCE SHEET

OTHER ASSETS OF \$14 ARE FUNDS DUE TO THE FOUNDATION AS OF DECEMBER 31,
2010.

ATTACHMENT 1

FORM 990EZ, PART I - INVESTMENT INCOME

DESCRIPTION	AMOUNT
INTEREST INCOME	22.
TOTAL	22.

ATTACHMENT 2

FORM 990EZ, PART I - EXCLUDED CONTRIBUTIONS

DESCRIPTION	AMOUNT
GOLF TOURNAMENT	28,567.
5K RACE	710.
WINE TASTING	480.
POKER	9,615.
TOTAL	39,372.

ATTACHMENT 3

FORM 990EZ, PART I - FUNDRAISING EVENTS AND ACTIVITIES

DESCRIPTION	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
-------------	---------------	-----------------	------------

Name of the organization

TWO ANGELS FOUNDATION, INC.

Employer identification number

20-3875772

ATTACHMENT 3 (CONT'D)FORM 990EZ, PART I - FUNDRAISING EVENTS AND ACTIVITIES

<u>DESCRIPTION</u>	<u>GROSS REVENUE</u>	<u>DIRECT EXPENSES</u>	<u>NET INCOME</u>
GOLF TOURNAMENT	10,549.	19,144.	-8,595.
5K RACE	8,340.	5,895.	2,445.
WINE TASTING	3,742.	1,433.	2,309.
POKER	4,030.	4,376.	-346.
TOTALS	<u>26,661.</u>	<u>30,848.</u>	<u>-4,187.</u>

ATTACHMENT 4FORM 990EZ, PART I - OTHER EXPENSES

SUPPLIES	1,163.
WEB PAGE	434.
FILING FEES	20.
DUES AND SUBSCRIPTIONS	195.
BOARD OF TRUSTEES	1,216.
VOLUNTEER RECOGNITION	113.
INSURANCE	
BANK FEES	1,908.
ADVERTISING	256.
TOTAL	<u>5,305.</u>

ATTACHMENT 5FORM 990EZ, PART I - OTHER CHANGES IN FUND BALANCESINCREASES IN FUND BALANCES

PRIOR PERIOD ADJUSTMENT

TOTAL

ATTACHMENT 6FORM 990EZ, PART II - CASH, SAVINGS AND INVESTMENTS

<u>DESCRIPTION</u>	<u>BEGINNING OF YEAR</u>	<u>END OF YEAR</u>
CASH	41,937.	46,496.
TOTALS	<u>41,937.</u>	<u>46,496.</u>

Name of the organization TWO ANGELS FOUNDATION, INC.	Employer identification number 20-3875772
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ATTACHMENT 7FORM 990EZ, PART II - OTHER ASSETS

<u>DESCRIPTION</u>	<u>BEGINNING OF YEAR</u>	<u>END OF YEAR</u>
OTHER ACCOUNTS RECEIVABLE	44.	14.
TOTALS	<u>44.</u>	<u>14.</u>

ATTACHMENT 8FORM 990EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

TO RAISE MONEY FOR MAKE-A-WISH FOUNDATION, MUSCULAR DYSTROPHY ASSOCIATION AND OTHER SIMILAR NON-PROFITS AND ALSO TO DIRECTLY FUND PURPOSES THAT BENEFIT PHYSICALLY DISABLED CHILDREN.

ATTACHMENT 9FORM 990EZ, PART III - OTHER PROGRAM SERVICES

<u>DESCRIPTION</u>	<u>GRANTS AND ALLOCATIONS</u>	<u>EXPENSES</u>
FUNDRAISER (POKER TOURNAMENT) TO RAISE MONEY TO PURCHASE ADAPTIVE EQUIPMENT FOR PHYSICALLY DISABLED CHILDREN		4,376.
TOTALS		<u>4,376.</u>

ATTACHMENT 10

FORM 990EZ, PART I - GRANTS AND SIMILAR AMOUNTS

IN EXCESS OF \$5000

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

RECIPIENT NAME AND ADDRESS

GRANTS PAID

VARIOUS

SEE ATTACHED

NONE

PURCHASED ADAPTIVE EQUIPMENT FOR DISABLED CHILD.

43,830.

TOTAL CONTRIBUTIONS PAID

43,830.

FORM 990EZ, PART IV - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT. AND OTHER ALLOWANCES</u>
DAWN MOHATT 15801 W. 66TH PLACE ARVADA, CO 80007	PRESIDENT 30.00	0.	0.	0.
ROGER MOHATT 15801 W. 66TH PLACE ARVADA, CO 80007	CHAIRMAN OF THE BOARD 5.00	0.	0.	0.
CARRIE HOOPER 8420 W. 81ST DRIVE ARVADA, CO 80005	BOARD MEMBER 10.00	0.	0.	0.
STEVE HOOPER 8420 W. 81ST DRIVE ARVADA, CO 80005	BOARD MEMBER 5.00	0.	0.	0.
JULIE MACKIN 12537 ELIOT STREET BROOMFIELD, CO 80020	TREASURER 15.00	0.	0.	0.
JOHN MACKIN 12537 ELIOT STREET BROOMFIELD, CO 80020	BOARD MEMBER 10.00	0.	0.	0.
MATT PASCAL 8005 SUNRISE CIR	BOARD MEMBER 5.00	0.	0.	0.

FORM 990EZ, PART IV - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES

NAME AND ADDRESS

TITLE AND AVERAGE
HOURS PER WEEK
DEVOTED TO POSITION

COMPENSATION

CONTRIBUTIONS
TO EMPLOYEE
BENEFIT PLANS

EXPENSE ACCT.
AND OTHER
ALLOWANCES

ERIE, CO 80516

STEF PASCAL
8005 SUNRISE CIR
ERIE, CO 80516

GREG WHISLER
1373 HIGHWAY 52
WIGGINS, CO 80654

DOUG MOORE
2868 W. 115TH DR
WESTMINSTER, CO 80234

KIM WILLIS
14314 COTTAGE WAY
BROOMFIELD, CO 80020

KATHLEEN HUSS
16847 W. 62ND PL.
ARVADA, CO 80403

MICHELLE COWGILL
6770 VIOLET WAY
ARVADA, CO 80007

SECRETARY
5.00

BOARD MEMBER
5.00

BOARD MEMBER
5.00

BOARD MEMBER
5.00

BOARD MEMBER
10.00

BOARD MEMBER
5.00

0. 0. 0.

0. 0. 0.

0. 0. 0.

0. 0. 0.

0. 0. 0.

0. 0. 0.

FORM 990EZ, PART IV - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT. AND OTHER ALLOWANCES</u>
BETH HUTCHINSON 30611 HOLLINGS WAY GOLDEN, CO 80403	BOARD MEMBER 10.00	0.	0.	0.
SHALENE MADDEN 8310 COORS ST ARVADA, CO 80005	BOARD MEMBER 5.00	0.	0.	0.
<u>GRAND TOTALS</u>		<u>0.</u>	<u>0.</u>	<u>0.</u>

TWO ANGELS FOUNDATION
Angels Gift list - 2010

Angel #	Last Name	First Name	Address	City	Relation	Age	Application Date	Item Requi	Diagnosis	2010 Gifts	Date Received	Vendor
152	Dale	Daniel	11523 Sagedwood Lane	Parker, CO 80138	none	15	5/15/2009	Freedom C	spastic diplegia & CP	1,548.82	3/1/2010	Freedom Concepts
153	Lewis	Ashley	11648 Community Cente	Northglenn, CO 80233	Beth's patient	14	6/16/2009	Freedom C	CP	1,952.41	3/15/2010	Freedom Concepts
158	McGarry	Emily	1565 Masters Ct	Superior, CO 80027	none	7	5/27/2009	handpedal	Arthrognosis	1,495.00	4/15/2010	ATG Rehab
162	Warden	Noah	9152 Garland St	Westminster, CO 80021	Beth's patient	9	10/15/2009	platform swing		584.07	3/12/2010	Southpaw
164	Werner Weing	Kaymen	1463 S Dudley St	Lakewood, CO 80232	support group	6	10/27/2009	Buddy Bike	Intractable Epilepsy	1,791.48	6/12/2010	Buddy Bike
166	Weinell	Morghann	10189 Oak St	Westminster, CO 80021	Kerry's patient	9	12/16/2009	Rifton Rami	CP	1,342.59	6/30/2010	ATG Rehab
167	Hartford	Maddie	3340 25th St	Boulder, CO 80304	Frederick	7	12/8/2009	Freedom C	CP	3,000.00	7/5/2010	Freedom Concepts
168	Catlin	Tanner	5466 Hoyt Dr	Arvada, CO 80002	NWSC	7	12/4/2009	Rifton Bike	CP	1,262.65	6/1/2010	ATG Rehab
169	Hendershott	Brandon	1320 W 134th Place	Westminster, CO 80234	PT at Legacy HS	17	11/5/2009	Rifton Wra	Shaken Baby	1,554.16	5/12/2010	ATG Rehab
170	Chavez	Lana	5754 S Depew Circle	Littleton, CO 80123	none	5	3/2/2010	Rifton Rust	Recombinant 8 Syndrom	1,506.40	7/13/2010	ATG Rehab
171	Morgan	Shianna	8941 McCoy Pl	Westminster, CO 80031	Kerry's patient	12	4/14/2010	Freedom C	Traumatic Brain injury	5,034.40	8/15/2010	ATG Rehab
172	Bresci	Alexus	10852 Bluejay Lane	Northglenn, CO 80233	Beth's patient	6	3/30/2010	Arntke	CP	1,981.00	9/15/2010	ATG Rehab
173	Luchtenburg	Brianna	9915 Bruce Lane	Northglenn, CO 80260	Kerry's patient	16	5/20/2010	rifton bike	Sturge-weber syndrome	1,651.40	10/15/2010	ATG Rehab
174	Nazemi	Soley	5372 Brookside Dr	Broomfield, Co 80020	Beth's patient	16	5/17/2010	FC tandem	CP	4,917.80	10/15/2010	ATG Rehab
176	Rasul	Marwa	6942 E 131st Dr	Thornton, CO 80602	Beth's patient	8	6/2/2010	Adaptive bi	Autism	1,919.00	11/1/2010	ATG Rehab
177	Johnson	Cameron	944 Milo Circle, Unit B	Lafayette, CO 80026	Beth's patient	15	6/6/2010	adaphive bi	uncertain	1,678.40	11/15/2010	ATG Rehab
178	Wright	Emma	PO Box 1126, 151 Emilic	Frederick, CO 80530	Nickie's patient	13	6/22/2010	Rifton bike	CP	1,609.40	10/31/2010	ATG Rehab
179	Hylton	Jennifer	1631 S Cathay St	Aurora, CO 80017	Christa Blanche	6	3/9/2010	adaptive bi	Infatle spasms	1,049.66	8/31/2010	ATG Rehab
180	Maldoff	Emma	1233 Button Rock Dr	Longmont, CO 80504	Beth's patient	10	7/6/2010	rifton bike	CP	3,018.40	10/22/2010	ATG Rehab
181	Echevarria	Manny	244 S Marcliffe Dr, Apt 6	Valparaiso, IN 46385	referred from Rifton	3	7/7/2010	rifton bike	metalmine myopathy	2,289.28	11/15/2010	Rifton
182	Smith	Alexander	14767 High St	Thornton, CO 80602	Kerry's patient	7	7/1/2010	rifton range	CP	1,502.60	11/24/2010	ATG Rehab
183	The Joshua Sc	The Joshua Sch	2303 E Dartmouth	Englewood, CO 80113	PT at the Joshua school		10/14/2010	rifton tnke & swing		1,142.60	12/15/2010	ATG Rehab
										43,829.52		

Company	Last	First	Second	Annual		Wine		Golf	Poker	Address	City
				Fund	Tasting	5K	Tasting				
	Pascal	Matt	Stef	\$	100.00					8005 Sunrise Cir	Erie, CO 80516
	Cowgill	Jim	Michelle	\$	50.00					6770 Violet Way	Arvada, CO 80007
	Hooper	Steve	Carrie	\$	20.00					8420 W 81st Dr	Arvada, CO 80005
	Huss	Brian	Kathleen	\$	100.00					16847 W 62nd Pl	Arvada, CO 80403
	Madden	Jay	Shalene	\$	10.00					8310 Coors St	Arvada, CO 80005
Arbonne	Kronback	Jenny		\$	50.00					12125 S Shady Pine Ct	Parker, CO 80134
The Allstate Foundation				\$	1,000.00					2775 Sanders Road, Suite Northbrook, IL 60062	Northbrook, IL 60062
	Broadbuss	Gary	Cindy	\$	75.00					1153 Hideout Way	Henderson, NV 89052
	Hutchinson	Ross	Beth	\$	75.00					30611 Hollings Way	Golden, CO 80403
	Mohatt	Roger	Dawn	\$	25.00					15801 W 66th Place	Arvada, CO 80007
	Downs	Holly		\$	40.00					3041 S Josephine	Denver, CO 80210
	Cowgill	Steve	Emily	\$		150.00				8426 W 97th Place	Westminster, CO 80021
Pepsico Foundation Matching Gifts Program				\$	220.00					PO Box 7636	Princeton, NJ 08543-76
	Schiffelbeil	Jim	Bubbles	\$	100.00					7352 Driftwood SE	Ada, MI 49301
	Burnham	Michael	Ruth	\$	10.00					1200 Glencoe ST	Denver, CO 80220
	Harris	Howard	Marny	\$	50.00					3601 Arapahoe Ave., Unit Boulder, CO 212	Boulder, CO 212
	Handley	Don	Laurie	\$	100.00					23810 Poindexter Rd	Lee's Summit, MO 6408
	Tingle	Charles	Juli	\$	75.00					12962 W 80th Place	Arvada, CO 80005
	Farnan	Amy	Irene	\$	50.00					1223 Race St. #202	Denver, CO 80206
	Fieselman	Ralph	Ann	\$	50.00					8205 W 10th Ave	Lakewood, CO 80214
	Jones	David	Ann	\$	100.00					16746 W. 62nd Pl	Golden, CO 80403
	Stitt	Bob	Joan	\$	10.00					6002 Devinney Way	Arvada, CO 80004
	Hose	Steve	Lorn	\$		60.00				9846 W Victoria Dr	Littleton, CO 80128
	Wilke	Dominic	Sherrri	\$		60.00				13453 W 62nd Pl	Arvada, CO 80004
	Capeless	Christine	Kelli	\$	100.00					790 Washington St., #14C	Denver, CO 80203
	Schneider	Brian	Susan	\$	100.00					535 97th Ave NE	Bellevue, WA 98004
	Steidl	Mike		\$				150.00		3603 Godding Hollow Pkwy	Erie, CO 80516
	Willis	Kim		\$		25.00				14314 Cottage Way	Broomfield, CO 80020
	Schmedes-	Heidi		\$		120.00				465 South Quail Street	Lakewood, CO 80224
	Henson-Gi	Leslie		\$		60.00				14681 Vine St	Thornton, CO 80602
	Markin	Uno	LaVonne	\$	50.00					1021 Wyndham Dr.	Harrisonburg, VA 22801
	Brophy	Lesley	Debbie	\$	25.00					501 Bellaire St	Denver, CO 80220
	Kelly	Bob	Barb	\$	25.00					2691 S Kearney St	Denver, CO 80222
American Autot Slaes & Haupt	Green	Mark		\$		60.00				4800 W Colfax Ave.	Denver, CO 80204
	Brown	Janet		\$	25.00					6184 S Van Gordon Way	Littleton, CO 80127
	Piccone	Tony	Candy	\$	100.00					5900 S Clarkson St	Littleton, CO 80121
	Mackin	John	Julie	\$	50.00					14101 W 86th Place	Arvada, CO 80005
	Brown	Karan		\$	25.00					12537 Elliot St	Westminster, CO 80020
	Markin	Uno	LaVonne	\$	350.00			150.00		8312 S Garland Cir	Littleton, CO 80128
	Quintero	David	Lara	\$	250.00					1021 Wyndham Dr.	Harrisonburg, VA 22801
Nebraskan's for Two At Mackin	Jim	Jodi		\$						Box 458	APC, AE 09751
Anonymous on AR	Mackin	Jim	Jodi	\$	300.00			150.00		5905 W Blue Hill Road	Ayr, NE 68925
Honeyman Envelope a	Honeyman	Dave	Jane	\$	26.34					5905 W Blue Hill Road	Ayr, NE 68925
	Horn	Todd		\$	50.00					P O Box 16347	Denver, CO 80216
				\$						4000 E. Quincy Ave	Englewood, CO 80113

EKS&H	Willis Kirm	\$	150 00		14314 Cottage Way	Broomfield, CO 80020
www.mapmakertravel.com	Cowgill Jim	\$	2,500 00		7979 E Tufts Ave Suite 4f	Denver, CO 80237
	Lindholm Bert		150 00		15791 W 3rd Pl	Golden, CO 80401
	Dopheide Molly	\$	100 00		220 Auger Ave	Fort Leavenworth, KS 66
	McMurtry Whitney	\$	25 00		6325 E Vassar Ave	Denver, CO 80222
	Zertuche Jennifer			\$ 500 00	12345 W Colfax Ave	Lakewood, CO 80215
1st Bank	Kathleen				16847 W 62nd Pl	Arvada, CO 80403
Options Healthcare Grt Huss	Jimmy	\$	50 00		5038 West 44th Ave	Denver, CO 80212
Edgewater Jeep Repair	Keith	\$	2,000 00		9643 Autumnwood Place	Highlands Ranch, CO 8
JJJ Foundation	Allen Cheryl	\$	25 00		nadinefremgen@hotmail.com	
	Smith Nadine	\$	20 00		9197 West 6th Ave, Suite	Lakewood, CO 80215
ATG Rehab	Longo Michele	\$	79 36		1700 W Bellevue Ave	Littleton, CO 80120
The Crazy Merchant	Genova Connie	\$	37 80		5807 W 116th Place	Westminster, CO 80020
3rd grade class at West Lathers	Pam	\$			PO box 16347	Denver, CO 80216
Honeyman Envelope e	Honeyman Dave				535 97th Ave NE	Bellevue, WA 98004
	Schneider Brian				9185 W Cedar Dr , Unit 4	Lakewood, CO 80226
	Mohatt Gary				8005 Sunrise Cir	Erie, CO 80516
	Pascal Matt	\$	200 00		465 South Quail Street	Lakewood, CO 80224
	Schmedes Heidi				12410 W Auburn Ave	Lakewood, CO 80228
	Wills Doug				16847 W 62nd Pl	Arvada, CO 80403
Options Healthcare Grt Huss	Kathleen				10710 Westminster Blvd	Westminster, CO 80020
Benders Bar & Grill	Wayne and Angie				9195 Wadsworth Pkwy	Westminster, CO 80021
The Wave Car Care C	Palinckx Wayne and Angie				8005 Sunrise Cir	Erie, CO 80516
	Mohatt Roger and Dawn				17785 Cottonwood Drive	Parker, CO 80134
	Pascal Matt				11651 W 64th Ave , Unit	Arvada, CO 80004
	Lanphier Rob				PO Box 2040	Broomfield, CO 80038
FuNuGyz	Paul				milehighpowergolf@hotmail.com	
Accelerate Physical Th	O'Brian Karen	\$	1,220 00		8426 W 97th Place	Westminster, CO 8021
Broomfield Community	Smith Karen	\$	250 00		2041 Lanmar Street	Denver, CO 80205
Mile High Power Golf	Nick "The Hammer" Herrera	\$	4,000 00		12537 Eliot St	Westminster, CO 80020
	Cowgill Steve	\$			9768 W 97th Pl	Westminster
	Svenson Bob	\$			5618 W 116th Place	Westminster
The Ginn Mill	Mackin John	\$	50 00		1200 Glencoe St	Denver
	Manning Craig and Tricia	\$	50 00		113 Regents Place	Ponte Vedra Beach
	Bamber, Sean and Casey	\$			9088 Murphy Gulch Roac	Littleton
	Burnham, Michael and Ruth	\$			15801 W 66th Place	Arvada
	Bermudez, Luis and Jalene	\$	100 00		P O Box 1215	Garden City
	NFG (Network for Good)	\$	47 64		8205 W 10th Ave	Lakewood
	Graesser, Tom	\$	25 00		23810 Poindexter Rd	Lee's Summit
	Mohatt, Roger and Dawn	\$	25 00		7352 Driftwood SE	Ada
	Dick, Gary and Raylene	\$	25 00		10709 W 107th Cir	Westminster
	Frieselman, Ralph and Irene	\$	50 00		2250 W 153rd Pl	Broomfield
	Handley, Don and Laurie	\$	100 00		13860 W Warren Ave	Lakewood
	Schiffelbein, Jim and Bubbles	\$	50 00		5900 S Clarkson ST	Littleton
	Fitzgibbons, Pat and Jo Anne	\$	50 00		4338 Sawmill Ct	Castle Rock
	Anschutz Family Foundation	\$	2,500 00		305 Newland St	Lakewood
	Willis, Ralph and Patty	\$	50 00		708 Cosby St	Liberty
	Mohatt, John and Samrda	\$	50 00		12537 Eliot Street	Broomfield
	Brown, Janet	\$	40 00		9768 W 97th Pl	Westminster
	Spero, Gerald and Ann Marie	\$	20 00		1485 Rosedale St	Castle Rock
	Fuchser, Fay and Helen	\$	50 00			
	Stiens, Tammy	\$	169 00			
	Schmedes-Shook, Heidi	\$	250 00			
	Urbalejo, Karry	\$	40 00			
	Mackin, John and Julie	\$	20 00			
	Manning, Craig and Tricia	\$	40 00			
	Crawford, William	\$	25 00			
	Buckner, Chuck and Katte	\$	30 00			

Niederhoff, Barbara	\$	25 00			
Hampe, Jane	\$	25 00			
Lawrence, Jeremy and Sara	\$	100 00	1525 S Bellaire St	Denver	
Brubaker, Mike and Cathy	\$	75 00			
Hackhoff Wedul, Anke	\$	20 00			
Grochocki, Frank & Leslie	\$	100 00	14681 Vine Street	Thornton	
Biggood, Jan	\$	50 00			
Ashcroft, Ted	\$	50 00			
Christianson, Shelley	\$	25 00			
Oakes, Ellen	\$	75 00			
Osterbauer, Maggie	\$	10 00			
Schneider, Brian and Kelli	\$	200 00	1633 Ruhland Ave	Manhattan Beach	
Peterson, Tara	\$	10 00	1634 Elm St	Denver	
Mortell, Jake and Lisa	\$	25 00			
Figurski, Melissa	\$	500 00			
Cocok, Katie	\$	10 00			
PASCO	\$	500 00			
Mohatt, Roger and Dawn	\$	25 00	Personal Assistance Sen Lakewood		
1stBank	\$	84 76	15801 W 66th Place	Arvada	
Meikel John Elementary	\$	385 00	12345 W Colfax Ave	Lakewood	
Enderle, Becky	\$	100 00			
Reifschneider, Mel and Connie	\$	20 00	7970 N Wade Springs Dr, Tucson		
Jha, Arun	\$	20 00	1553 Bison Run Dr	Windsor	
Monson, Diane	\$	100 00	434 S Wright St, Apt 10	Lakewood	
Moore, Doug and Leslie	\$	513.43	3420 E Briarwood Ave	Centennial	
Moore, Doug and Leslie	\$	472 00	2868 W 115th Dr	Westminster	
Whisler, Greg and Andrea	\$	5 00	2868 W 115th Dr	Westminster	
Glenn Mike	\$		1373 Highway 52	Wiggins	
Hartman Ray	\$		\$ 125 00 11722 W 83rd Lane	Arvada, CO 80005	
Honeyma Mike	\$		\$ 125 00 12961 Clarkson Circle	Thornton, CO 80241	
Hunter Douglas	\$	500 00	\$ 125 00 P O Box 16347	Denver, CO 80216	
Nelson, Craig and Vonnie	\$	50 00			
Ahearn, Dale	\$		3918 Simms Ct	Wheat Ridge	
Baca, Brandon			75 00 2711 East 138th Place	Thornton	
Benham Brent			125 00 14971 Vine St	Thornton	
Baldwin, Lola			125 00 8090 Youngfield St	Arvada,	
Brungard, Tyler			125 00 13324 Franklin Street	Thornton	
Burchell, Grant & Cynthia			300 00 13324 Franklin Street	Thornton	
Carlson, Mike			200 00 1890 Golden Eagle Ct	Broomfield	
Clark, Paul			125 00 11146 Elati St	Northglenn	
Conner, Justin			125 00 6230 E 133rd Place	Thornton	
Cowgill, Steve and Emily			250 00 8426 West 97th Place	Westminster	
Cowgill, Steve and Emily			250 00 8426 West 97th Place	Westminster	
Crider, Jessica			50 00 1992 E 102nd Circle	Thornton	
Driscoll, Mike			125 00 11146 Elati St	Northglenn	
Eisenberg, Bryan			250 00 16461 Avalanche Run	Broomfield	
Ergle, Barb			125 00		
Greve, Jennifer			75 00		
Grochocki, Frank & Leslie			125 00 14681 Vine Street	Thornton	
Karr, Sarah			150 00 1992 E 102nd Circle	Thornton	
Kelim Matt	\$	125 00			
Lo Asia	\$	125 00			

Langstaff, Lori	40 00			
madden, Kieran	125 00	16786 W 62nd Pl	Golden	
May, Richard and Amy	75 00	16786 W 62nd Pl	Golden	
May, Richard and Amy	50 00	4284 W 118th Pl	Westminster	
Mikolaj, Paul and Kerry	125 00	9185 W Cedar Dr, Unit 4	Lakewood	
Mohatt, Gary	150 00	2868 W 115th Dr	Westminster	
Moore, Doug and Leslie	250 00			
Nagel, Gerald	250 00			
Painckx, Wayne	125 00	2650 S Vaughn Way	Aurora	
Pawlik, Robert	200 00			
Pon, Rob	50 00	12585 Eastlake Drive	Thornton	
San Nicolas, Andy	115 00			
Schade, Jason	200 00			
Shelton, Kelly	\$ 125 00	2848 W 115th Drive	Westminster, CO	
Steidl, Mike	\$ 125 00	3603 Weld County Rd	Erie, CO 80516	
Storie, Michael	\$ 125 00	4277 E 135th Ct	Thornton, CO 80241	
Storie, Lee and	\$ 250 00	15380 Kingston St	Brighton, CO 80602	
Shaner, Jay	50 00			
Shaner, Jay	75 00			
Stabrawa, Mark	125 00	14256 Piney River Road	Broomfield	
Sullivan, Scott and Allie	125 00	6357 Umber Cir	Arvada	
Thibault, Scott and Monica	250 00	401 E 11th Ave #10	Denver	
Thorson, Brian	250 00	11094 W 85th Place	Arvada	
Tingle, Charles and Juli	200 00	11094 W 85th Place	Arvada	
Vander, Christopher	125 00	2731 Spruce St	Denver	
Walker, Jerry	455 00	2731 Spruce St	Denver	
Walker, Jerry	255 00	532 Kim Drive	Ft Collins	
Williams, Kevin	300 00	532 Kim Drive	Ft Collins	
Williams, Kevin	100 00	11680 Ivy St	Thornton	
Woodard, Jason	175 00	7668 Youngfield St	Arvada	
Young, Steve and Heather	125 00	7668 Youngfield St	Arvada	
Young, Steve and Heather	310 00			
Arellano, Paul and Marlo	250 00	10442 W 84th Place	Arvada	
Various	1,090 00			
	\$ 1,249 67	35.00	210 00	15,974 00
	\$ 21,150 00	480 00	710.00	28,567 00
				9,615 00