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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

		enue Service	Not	e. The foundation may be able	to use a copy of this	eturn to s	atisfy sta	te reporting	requirements		
For	calend	dar year 2010, or tax y	year begir	nning , a	and ending						
G	Check	all that apply	Initial re	— —	turn of a former pu	olic char	-	change	Final ret	um	
		foundation	-					A Emp	loyer identific		nber
		'ITUTE FOR C RDERS	CHILDE	REN'S MENTAL					-14919		(O of the instructions)
			nber if mail	is not delivered to street addre	ss)	Room/s	uite	D relet	mone number	(see page	0 of the instructions)
		S EDMONDS 1			,	C200		C If exe	mption applica	tion is pend	ling, check here
С	ity or tov	wn, state, and ZIP code						D 1. Fo	oreign organiza	tions, chec	k here 🕨 🗌
_	<u>URO</u>			CO 80045				2. Fo	oreign organiza	tions meeti	ng the
H			_	n 501(c)(3) exempt private				85	5% test, check	here and at	tach computation
Щ		n 4947(a)(1) nonexem			le private foundatio				ate foundation on 507(b)(1)(A)		terminated under
		rket value of all assets		J Accounting method.	X Cash	Accrual					–
	ina or y ine 16)	rear (from Part II, col. (Other (specify) (Part I, column (d) must	bo on each back \		•		foundation is i r section 507(b		_
	art I	Analysis of Revenu			(a) Revenue and					χ. χ. χ.	(d) Disbursements
•	****	-		d) may not necessarily equal	expenses per		Net in	estment	(c) Adjus		for charitable
		•		ge 11 of the instructions))	books		inco	me	inco	me	purposes (cash basis only)
	1	Contributions, gifts, grar	nts, etc., red	erved (attach schedule)	268,8	18					
	2	Check ▶ ☐ If the fo	undation is	not required to attach Sch. B							
	3	Interest on savings a	and tempo	rary cash investments	55,2			55,294			
	4	Dividends and intere	st from se	curities	11,0	28		11,028			
	5a	Gross rents								······································	
ue	b	Net rental income or			144 6	71	•		:	•••••	
ē	6a b	Net gain or (loss) from sale o		144,621	144,6	Z 1					
Revenue	7	Gross sales price for all asse Capital gain net inco			<u> </u>		1.	44,621		······································	
	8	Net short-term capita	•	artiv, ille 2,	······································			11,021		0	
	9	Income modifications	•	•							
	10a	Gross sales less returns	& allowand	es [
	b	Less. Cost of goods	sold								
	С	Gross profit or (loss)	(attach so	· · · · · · · · · · · · · · · · · · ·							
	11	Other income (attach) STMT 1	-10,0	_		10,023			
_	12	Total. Add lines 1 th			469,7		2	00,920		0	
nses	13 14	Compensation of office Other employee sala			150,0	30					
	1	Pension plans, empl			9,1	72					
ğ	16a	Legal fees (attach so	-							REC	, EIV/ED
Ш	Ь	Accounting fees (atta	-	ule) STMT 2	7	75			1_1		
Ž	၈ င	Other professional fees	(attach sch	edule)					151	Non	
Öpperating and Administrative Expe] 17	Interest			7,7			7,708	إننا	NOV	
nis.	18			e instructions) STMT 3	8	55		845		H// V// D	[8]
Ē	19		nedule) and	depletion STMT 4	·				11(
Ą	20 21	Occupancy Travel, conferences,	and maat		12,2	2.8					
2	21 22	Printing and publicat		ings .					<u> </u>		<u> </u>
8	23	Other expenses (att sch)		5 STMT 6	7,2	77					·
Ë	24	Total operating and	•	•	, , ,			-			
E S		Add lines 13 through			188,0	15		8,553		0	
Ö	25	Contributions, gifts, g		i	129,1	11					129,111
	120			nts. Add lines 24 and 25	317,1	26		8,553		0	129,111
	27	Subtract line 26 from									
	a		•	es and disbursements	152,6	12	······				
	b	Net investment inco		=			1	92,367			
	<u>_</u>	Adjusted net incom-	e (π negat	ive, enter -U-)	<u> </u>					0	

F	orm 990	-PF (2010) INSTITUTE FOR CHILDREN'S MENTAL	84-149197	<u>'1</u>	Page 2
•	Part	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
	ran, A	Balance-Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	330,319	293,859	293,862
	2	Savings and temporary cash investments	193,298	193,706	193,706
	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶	Ĭ		
	4	Pledges receivable ▶			
	_	Less: allowance for doubtful accounts ▶	Ī	1	
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	"	disqualified persons (attach schedule) (see page 15 of the			
		Instructions)			
	7	Other notes and loans receivable (att schedule)			
	•	Less: allowance for doubtful accounts	†	•	
CD.					<u>.</u>
Assets	8	Inventories for sale or use			
158	9	Prepaid expenses and deferred charges			
•		Investments—U.S. and state government obligations (attach schedule)	2 102 062	2 274 204	2 520 242
	b	Investments—corporate stock (attach schedule) SEE STMT 7	2,183,963	2,374,294	2,529,343
	С	Investments—corporate bonds (attach schedule)			
	11	trivestments—land, buildings, and equipment basis		;	
		Less accumulated depreciation (attach sch.)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment. basis	1	-	
		Less accumulated depreciation (attach sch.)			
	15	Other assets (describe ► SEE STATEMENT 8)	10,000	8,333	8,333
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	2,717,580	2,870,192	3,025,244
	17	Accounts payable and accrued expenses			
ဟ	18	Grants payable			
ë	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iat	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
9		and complete lines 24 through 26 and lines 30 and 31.			
ၓၟ	24	Unrestricted			
Ē	25	Temporarily restricted			
Ba	26	Permanently restricted			
헏		Foundations that do not follow SFAS 117, check here ▶ X			
Assets or Fund Balances		and complete lines 27 through 31.		:	
ō	27	Capital stock, trust principal, or current funds			
its	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
šše	29	Retained earnings, accumulated income, endowment, or other funds	2,717,580	2,870,192	
Ä	30	Total net assets or fund balances (see page 17 of the			

2,717,580 2,870,192 of the instructions) Analysis of Changes in Net Assets or Fund Balances Part 即 1 Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with 2,717,580 end-of-year figure reported on prior year's return) 152,612 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 3 2,870,192 4 4 Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶ 5 2,870,192 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6

2,717,580

2,870,192

Form 990-PF (2010)

Net

Total liabilities and net assets/fund balances (see page 17

Part IV Capital Gains a	nd Losses for Tax on Investme	ent Income			
	e the kind(s) of property sold (e g , real estate, house, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acqui (mo , day, yr	
1a ALLEN ARBITRAGE	LP		P	12/01/	10 12/31/10
b ALLEN ARBITRAGE	LP		P	01/01/0	04 12/31/10
d					
<u>e</u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		est or other basis expense of sale) Gain or (loss) plus (f) minus (g)
<u>a</u> 126,648					126,648
<u>b</u> 17,973					<u> 17,973</u>
С					
d					
e	(1)		(04/00		<u> </u>
Complete only for assets showing	g gain in column (h) and owned by the fo				(Col (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	, ,	xcess of col (i) r col (j), if any		ut not less than -0-) or ses (from col (h))
a					126,648
b					17,973
_c					
_d					
_ e		Double Co. 7			
2 Capital gain net income or (net ca	apital loss) If gain, also enter in If (loss), enter -0- in	Part I, line /			144,621
3. Not about torm conital gain or /los			j	2	144,021
	ss) as defined in sections 1222(5) and (6 , column (c) (see pages 13 and 17 of the	•	1		
If (loss), enter -0- in Part I, line 8	column (c) (see pages 13 and 17 of the	instructions).)	3	126,648
	nder Section 4940(e) for Reduc	ed Tax on N	let Investment Inco		120,040
If section 4940(d)(2) applies, leave th	foundations subject to the section 4940 is part blank. tion 4942 tax on the distributable amount				Yes X No
If "Yes," the foundation does not qua	lify under section 4940(e). Do not compl	ete this part.			
	each column for each year; see page 18	of the instruction	ns before making any en	tries.	7.1
(a) Base period years	(b) Adjusted qualifying distribution	Not w	(c) alue of noncharitable-use ass		(d) Distribution ratio
Calendar year (or tax year beginning	"")			(60)	(b) divided by col (c))
2009		,511	2,649,9 2,633,0		0.099440 0.051142
2008		, 658 , 000	2,585,		0.031142
2007		,500	2,135,		0.043786
2006		,598	1,921,		0.043700
2005	<u> </u>	, 370	1, 741,	707	0.070372
2 Total of line 1, column (d)				2	0.313346
-	5-year base period—divide the total on last been in existence if less than 5 years	= =		3	0.062669
4 Enter the net value of noncharital	ble-use assets for 2010 from Part X, line	5		4	2,914,231
E. Multimbuling 4 hading 2				_	182,632
5 Multiply line 4 by line 3				. 5	
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)	٠		6	1,924
7 Add lines 5 and 6				7	184,556
8 Enter qualifying distributions from				<u>8</u>	129,111
If line 8 is equal to or greater than	n line 7, check the box in Part VI, line 1b	, and complete	ınat paπ using a 1% tax r	are. See the	

Form	990-PF (2010) INSTITUTE FOR CHILDREN'S MENTAL 84-1491971			P	<u>age 4</u>
Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the in	nstructions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.	1			
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)	1			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1		3,	<u>847</u>
	here ▶ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
	Part I, line 12, col (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			_0
3	Add lines 1 and 2	3		3,	847
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		3,	847
6	Credits/Payments:	1			
a	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 4,509	1			
b	Exempt foreign organizations—tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld				
7	Total credits and payments. Add lines 6a through 6d	7		4,	<u>509</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			<u>662</u>
<u> 11</u>	Enter the amount of line 10 to be: Credited to 2011 estimated tax ▶ 662 Refunded ▶	11			
Pa	rt VII-A Statements Regarding Activities		1 1		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19		ا ا		٠,
	of the instructions for definition)?		1b		<u> X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
_	published or distributed by the foundation in connection with the activities.	N/A	.		1
C	Did the foundation file Form 1120-POL for this year?	. N/A	1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$				
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	-			
е	on foundation managers \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Х
_	If "Yes," attach a detailed description of the activities.	•	-		 ^
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	1	х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•	5		Х
	If "Yes," attach the statement required by General Instruction T.	•			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			. 1	
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?		6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part	XV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the				
	ınstructions) ▶ CO				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				·
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page				
	27)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10		X
		Fo	rm 99 0)-PF	(2010)

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Pá	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	}]
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		<u>X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	<u> X</u>	L.,
	Website address ► WWW.CHILDRENSMENTALDISORDERS.ORG		·	_
14	The books are in care of ▶ STEPHEN A EDMONDS Telephone no. ▶ 303-7	24-	495	5
	13001 E 17TH PLACE, ROOM C2000B	_		
	Located at ▶ AURORA	٠.	• •	. —
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041—Check here			▶ ∐
	and enter the amount of tax-exempt interest received or accrued during the year		г.:	
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority	1	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	Ĺ	X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter			
-	the name of the foreign country	<u> </u>		<u> </u>
Pé	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	т	V	
4	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
ıa	During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	'	•	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)		•	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		•	
_	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? N/A	16	Į,	[
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2010?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		1	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and	1		
	6e, Part XIII) for tax year(s) beginning before 2010?			
	If "Yes," list the years ▶ 20 , , 20 , , 20 .	1		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	1	1	
	all years listed, answer "No" and attach statement—see page 22 of the instructions.)	2b	ļ	X
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶ 20 , 20 , 20 , 20 , 20 ,			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
þ	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or		} :	l
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			l
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			l
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	a.	† ·	1
4-	foundation had excess business holdings in 2010) N/A	3b	+	X
4a h	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Plid the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a	<u> </u>	 ^- -
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	46	ţ	Х
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?		0-PF	_
	r,	55		(=0.0)

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Pi	rt VII-BStatements Regarding Activities for Which Form	4720 May Be F	lequired (con	<u> </u>			
5a	During the year did the foundation pay or incur any amount to						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	. 🗆 '	res X No			
	(2) Influence the outcome of any specific public election (see section 4955), c	r to carry on,				-	
	directly or indirectly, any voter registration drive?		_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	res X No	ı	1	
	(3) Provide a grant to an individual for travel, study, or other similar purposes	?	_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	res 🗓 No	ı	1	
	(4) Provide a grant to an organization other than a charitable, etc., organization	n described in	_				
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the in	structions)	🔲 '	res X No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational				1	
	purposes, or for the prevention of cruelty to children or animals?			res X No	ł		
þ	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	der the exceptions of	lescribed in				
	Regulations section 53.4945 or in a current notice regarding disaster assistance	ce (see page 22 of th	e instructions)?	N/A	5b		
	Organizations relying on a current notice regarding disaster assistance check	here		▶ 🗌			
C	If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax					
	because it maintained expenditure responsibility for the grant?		N/A 🗌	res 🗌 No		1	
	If "Yes," attach the statement required by Regulations section 53.4945-5(d)						
6а	Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums	_				
	on a personal benefit contract?			res 🛚 X No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit conti	ract?		6b	X	
	If "Yes" to 6b, file Form 8870.			_			
7a	At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	. L'	res X No			
b	If Yes, did the foundation receive any proceeds or have any net income attribu			N/A	7b	-	
P	rt VIII Information About Officers, Directors, Trustees, F	oundation Man	agers, Highly	Paid Employ	ees,		
	and Contractors						
1	ist all officers, directors, trustees, foundation managers and their compens	sation (see page 22	of the instruction				
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account,		
SE	E STATEMENT 9						
-				1			
	· · · · · · · · · · · · · · · · · · ·				İ		
					l		
					<u> </u>		
2	Compensation of five highest-paid employees (other than those included	on line 1 — see pag	e 23 of the instru	ctions).			
	If none, enter "NONE."			_			
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		ense account, allowances	
NC	NE .						
•					<u> </u>		
					<u> </u>		
_							
ota	number of other employees paid over \$50,000					0	

	84-1491971	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	Managers, Highly Paid Emp	loyees,
3 Five highest-paid independent contractors for professional services (see page 23 of the	e instructions). If none, enter "NONE	n
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inform organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ation such as the number of	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see page 24 of	f the instructions)	- <u>-</u> -
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and		Amount
1 N/A		
· · · · · · · · · · · · · · · · · · ·		
2		
All other program-related investments See page 24 of the instructions		
3		

Form **990-PF** (2010)

Total. Add lines 1 through 3

For	1990-PF (2010) INSTITUTE FOR CHILDREN'S MENTAL 84-1491971		Page 8
P	Minimum Investment Return (All domestic foundations must complete this part. Fore	<u>eign</u> fo <u>t</u>	ındations,
	see page 24 of the instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	1	
а	Average monthly fair market value of securities	1a	2,443,849
b	Average of monthly cash balances	1b	505,594
C	Fair market value of all other assets (see page 25 of the instructions)	1c	9,167
ď	Total (add lines 1a, b, and c)	1d	2,958,610
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	1	
2	Acquisition indebtedness applicable to line 1 assets	2	0 050 (10
3	Subtract line 2 from line 1d	3	2,958,610
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see page 25 of		44 270
	the instructions)	4	44,379
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,914,231
6	Minimum Investment return. Enter 5% of line 5	6	145,712
P	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	perating	
	foundations and certain foreign organizations check here		145 710
1	Minimum investment return from Part X, line 6	1	145,712
2a	Tax on investment income for 2010 from Part VI, line 5 2a3,847		
b	Income tax for 2010. (This does not include the tax from Part VI.)	l _ l	2 045
С	Add lines 2a and 2b	2c	3,847
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	141,865
4	Recoveries of amounts treated as qualifying distributions	4	1.41 0.65
5	Add lines 3 and 4	5	141,865
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	l <u>.</u> l	1/1 065
	line 1	7	141,865
P	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		_
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	<u>129,111</u>
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	TUTO COO	1 2	

Form **990-PF** (2010)

3b

5

Amounts set aside for specific charitable projects that satisfy the

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Suitability test (prior IRS approval required)

Cash distribution test (attach the required schedule)

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years.

Pa	rt XIII Undistributed Income (see page 26 of	the instructions)	<u> </u>		
1	Distributable amount for 2010 from Part XI,	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
_	line 7				141,865
2	Undistributed income, if any, as of the end of 2010.				
a	Enter amount for 2009 only	,			·····
	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2010 ⁻ From 2005				
a	From 2006	,			
0	France 0007				
C 	From 2007 From 2008				
u	From 2009 130,546			,	
+	Total of lines 2s through s	130,546			
4	Qualifying distributions for 2010 from Part XII,	130,540			<u></u>
•	line 4: ▶ \$ 129,111				
а	Applied to 2009, but not more than line 2a				
	Applied to undistributed income of prior years	-			
-	(Election required—see page 26 of the instructions)	[
c	Treated as distributions out of corpus (Election	1		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	i
	required—see page 26 of the instructions)				
d	Applied to 2010 distributable amount				129,111
	Remaining amount distributed out of corpus				· · · · · · · · · · · · · · · · · · ·
5	Excess distributions carryover applied to 2010	12,754			12,754
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:	,		ŕ	
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	117,792			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed .	-			
d	Subtract line 6c from line 6b. Taxable				
	amount—see page 27 of the instructions				
е	Undistributed income for 2009 Subtract line	}			
	4a from line 2a. Taxable amount—see page	ŀ			
	27 of the instructions				
f	Undistributed income for 2010 Subtract lines				
	4d and 5 from line 1. This amount must be			;	_
	distributed in 2011			:	0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)		// 1111111		
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the				,
	instructions)	<u> </u>			
9	Excess distributions carryover to 2011.	117 700			
40	Subtract lines 7 and 8 from line 6a	117,792	• • • • • • • • • • • • • • • • • • • •		
10	Analysis of line 9.	•			
a	Excess from 2006	1		:	
þ	Excess from 2007	·			
C	Excess from 2008	·			
d	•	1			
е	Excess from 2010	L	t	T	

Pe	rt XIV Private Operating Fou	ındations (see pa	age 27 of the inst	ructions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling or					
_	foundation, and the ruling is effective for			•		
ь	Check box to indicate whether the foundation		_	ibed in section 49	942(j)(3) or 4942	(i)(5)
2a	Enter the lesser of the adjusted net	Tax year	1	Prior 3 years		
	income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	investment return from Part X for			1.1		·
	each year listed					
ь	85% of line 2a		_			
c	Qualifying distributions from Part XII,					
·	line 4 for each year listed					
a	Amounts included in line 2c not used directly		 			
d	•]	
_	for active conduct of exempt activities		<u> </u>		+	
е	Qualifying distributions made directly			}		
	for active conduct of exempt activities.					
_	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:		1			
а	"Assets" alternative test—enter:					
	(1) Value of all assets			ļ. <u>-</u>		
	(2) Value of assets qualifying under					
_	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public		·			
	and 5 or more exempt					
	organizations as provided in				1	
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization .					
	(4) Gross investment income			<u>L</u>		
Pe	ert XV Supplementary Inform	•	•		ad \$5,000 or more	in assets at
	any time during the y		3 of the instruction	ons.)	-	<u> </u>
1	Information Regarding Foundation Mar	_				
а	List any managers of the foundation who					
	before the close of any tax year (but only	if they have contribut	ed more than \$5,000).	. (See section 507(d)(2).)	
	SEE STATEMENT 10		<u> </u>			
Ь	List any managers of the foundation who				e portion of the	
	ownership of a partnership or other entity	 of which the foundat 	tion has a 10% or grea	ater interest		
	N/A					
2	Information Regarding Contribution, G		-			
			•	ble organizations and o		
	unsolicited requests for funds If the foun			8 of the instructions) to	individuals or	
	organizations under other conditions, con		-			
а	The name, address, and telephone numl	per of the person to wi	nom applications shou	ıld be addressed:		
	N/A					
			<u> </u>			
þ	The form in which applications should be N/A	submitted and inform	ation and materials th	ey should include:		
c	Any submission deadlines					
	N/A	auch as by seems-	ioni arona, chertebi- 4	iolds kinds of matter to	ens or other	
d	Any restrictions or limitations on awards,	such as by geograph	icai areas, criafitable 1	ICIUS, KIIIUS OI INSTITUTIO	nio, Ui Uillel	
	factors: N/A					
	TA \ \L					

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year NONE EXEMPT UNIV OF CO FOUNDATION 4740 WALNUT ST SUPPORT RESEARCH OF MENTAL ILLNESS 125,000 BOULDER CO 80301 MHA OF COLORADO NONE EXEMPT SUPPORT RESEARCH OF MENTAL ILLNESS 2,000 1385 S COLORADO BLVD #610 DENVER CO 80222 NONE UNIV OF CO MEDICAL SCHOOL EXEMPT 13001 E 17TH PLACE SUPPORT RESEARCH OF MENTAL ILLNESS 1,861 AURORA CO 80045 NAMI COLORADO FOUNDATION NONE EXEMPT 1100 FILLMORE STREET SUPPORT RESEARCH OF MENTAL ILLNESS 250 DENVER CO 80206 129,111 Total ▶ 3a Approved for future payment N/A ▶ 3b Total

Page 12

F	art XVI-A	Analysis of Income-Producing Act	ivities	<u> </u>					
=		ounts unless otherwise indicated	T	d business income	d by section 512, 513, or 514 (e)				
	ū		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of		
1	Program sei	vice revenue.					the instructions)		
	a				ļ				
	b				ļ				
	c								
	d				ļ				
	e				-				
	f								
		d contracts from government agencies							
		dues and assessments			1.4	55.004			
		avings and temporary cash investments		<u> </u>	14	55,294			
		nd interest from securities			14	11,028			
5		come or (loss) from real estate:	<u> </u>		-		<u></u>		
		anced property			+				
_		t-financed property	 						
		come or (loss) from personal property							
		ment income			14	144,621			
_	•	s) from sales of assets other than inventory			14	144,021			
9		or (loss) from special events			 				
	Other reven	or (loss) from sales of inventory			 				
		N ARBITRAGE ORD BUS INC			14	9,351			
		N ARBITRAGE SEC 988 LOSS	-		$\frac{14}{14}$	-19,374			
		WARDINAGE SEC 700 BOSS			 	13/3/1			
	e								
12		ld columns (b), (d), and (e)		(200,920	С		
		ne 12, columns (b), (d), and (e)	<u> </u>		<u> </u>	13	200,920		
		in line 13 instructions on page 29 to verify calculation	ns)	• •					
	art XVI-B	Relationship of Activities to the Ac		ent of Exempt P	urpose	es			
	Line No.	Explain below how each activity for which income							
	▼	accomplishment of the foundation's exempt purpo							
_		instructions.)							
_	N/A								
_									
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_					-				
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84-1491971

Part 2		Informat Exempt			ansfers To	and	Transaction	ns and	d Relati	ionships	s With	Nonci	naritabl	B		_
1 Dic					e in any of the	e folk	owing with any	other org	anization	described	1				Yes	No
	_						zations) or in s							1		
	anization		((-/(-/	J	, 		,					1		
-			rtina found	ation to a no	ncharitable ex	emr	ot organization of	nf•						1		
		on the repo	inting lound	ation to a no	inchantable ex	Cilip	n organization (<i>.</i>					İ	1a(1)		Х
٠,	Cash		••	•					•				· .	1a(2)		X
	Other as					•						•		I a(Z)	-	
	ner transa												l	4	:	v
٠,					organization								•	1b(1)		X
(2)	Purchas	es of asset	s from a no	ncharitable	exempt organı	ızatıc	on .						• •	1b(2)		<u>X</u>
(3)	Rental c	f facilities,	equipment,	or other ass	ets									1b(3)		X
(4)	Reimbu	rsement arr	angements	١.										1b(4)		X
(5)	Loans o	r Ioan guara	antees											1b(5)		X
(6)	Perform	ance of ser	vices or me	embership o	r fundraising s	olicit	ations							1b(6)		X
c Sh	aring of fa	acılıtıes, equ	upment, ma	ailing lists, o	ther assets, or	r pai	d employees						Į	1c		_X_
d If t	he answe	r to any of t	he above is	s "Yes," com	plete the follo	wing	schedule. Colu	ımn (b) s	hould alv	vays show	the fair	market				
		-			-	_	ng foundation. I						et			
		-		_			(d) the value of									
(a) L:		(b) Amour			of noncharitable					on of transfe				arrange	ements	
N/A		(-,		(, , , , , , , , , , , , , , , , , , ,	· · ·		-	 	· - ·							
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				•	tnan section 5	01(0	:)(3)) or in sect	on 52/?							es 🔽	J NO
b 11 °		plete the fo		nedule.		.		Т		(.) 5						
/		Name of org	anization		(b) Type	e of o	rganization	-		(c) D	escription	n of relatio	nsnip			
N/.	<u>A</u>							 								
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													. —			
	Under pe	nauties of per	jury, I declare	that I have ex	camined this retu	urn, in	cluding accompa	nying sche	dules and	statements,	, and to th	ne best of	my knowled	ige and	d	
Sign	belief, it is	correc	and comple	Declaration	n of preparer (9ti	her th	an taxpayer or fid	uciary) is t	based on a	III informatio	n of whic	h preparei	r has any kr	iowled	ge	
Here	N Z	Trush	11/20	m			X/	/ או או	11	E.	XECU	TIVE	DIRE	CTC)R	
nere	Sign	ature of office	er or trustee				Dat	77		Title						
	Ť	/pe preparer's		·			Preparer's sign	ature	1Λ Λ	11	20	$\overline{}$	Date			$\overline{\Box}$
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Use Only	1	name 🕨 _		IBROWN,	LLP	<u> </u>	CITTON	2000				PTIN			5713	
	Firm's	address 🕨					, SUITEV	∠∪∪∪					▶43-			
<u></u>			DENVE	ER, CO	80264-	-2() O T					Phone no	<u> 303</u>		<u>8-1</u>	
													F	00		(0040)

Schedule B **Schedule of Contributors** (Form 990, 990-EZ or 990-PF) ▶ Attach to Form 990, 990-EZ, or 990-PF. Department of the Treasury Internal Revenue Service Employer identification number Name of the organization INSTITUTE FOR CHILDREN'S MENTAL 84-1491971 DISORDERS Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

\$

during the year

Schedule I	B (Form 990, 990-EZ, or 990-PF) (2010)		Page ⊥ of ∠ of Part
	ITUTE FOR CHILDREN'S MENTAL		ployer_identification_number
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
.1.	VIERRA FAMILY FOUNDATION 77 GLENMOOR DR ENGLEWOOD CO 80113	\$ 50,000	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No. 2	Name, address, and ZIP + 4 RICHARD SAUNDERS 1530 E OXFORD LANE ENGLEWOOD CO 80113	\$ 25,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	NANCY GARY 13 VILLAGE ROAD ENGLEWOOD CO 80113	\$ <u>.</u> 25,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	PATTY & DONALD COOK 56 CHARLOU CIRCLE ENGLEWOOD	\$ 25,00 <u>0</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	SCHWAB CHARITABLE FUND 211 MAIN STREET SAN FRANCISCO CA 94105	\$ <u>2</u> 5,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	KERN FAMILY FOUNDATION 31 ALBION PLACE CASTLE ROCK CO 80104	\$ 50,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

	3 (Form 990, 990-EZ, or 990-PF) (2010)		Page 2 of 2 of Part I
	rganization		Employer identification number
	ITUTE FOR CHILDREN'S MENTAL		34-1491971
Part I	Contributors (see instructions)		
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
7	PATRICIA R. SOMERVILLE 400 S. STEELE STREET, #2 DENVER CO 80209	\$ 5 , 0 3 5	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b) ·	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
8	BLAIR RICHARDSON 1490 LAFAYETTE STREET SUITE 400 DENVER CO 80218	\$25,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ <u>. </u>	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
NO.	Name, address, and 21r + 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution)

DAA

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

► See separate instructions.

Attach to your tax return.

Attachment Sequence No.

	D	ISORDE		LLDREN'S ME	NTAL ——————			
	ess or activity to which this f		T () N					
	NDIRECT DEPR			perty Under Secti	on 170			
F				ty, complete Part		u complete P	art I	
1	Maximum amount (see			ty, complete ran	v belote you	u complete i	1	500,000
2	Total cost of section 17		•	e instructions)			2	300,7000
3	Threshold cost of secti		•	•	tructions)		3	2,000,000
4	Reduction in limitation.		· ·				. 4	
5	Dollar limitation for tax yea			•	d filing separately, :	see instructions	5	
6		a) Description			Cost (business us		lected cost	
								1
								7
7	Listed property. Enter t	he amount	from line 29			7]
8	Total elected cost of se	ection 179 p	roperty. Add amount	ts in column (c), lines	6 and 7		8	
9	Tentative deduction. E	nter the sm	aller of line 5 or line	8			9	
10	Carryover of disallowed	d deduction	from line 13 of your	2009 Form 4562			10	-11 1-11
11	Business income limita	tion. Enter	the smaller of busine	ess income (not less th	nan zero) or line	5 (see instruction	ns) 11	
12	Section 179 expense d	leduction. A	dd lines 9 and 10, bu	ut do not enter more th	nan line 11		12	
13	Carryover of disallowed	d deduction	to 2011. Add lines 9	and 10, less line 12	. •	13		
Note	: Do not use Part II or P							
Pi	ert II Special D	<u>epreciati</u>	<u>on Allowance a</u>	nd Other Deprec	iation (Do no	ot include list	ed property	.) (See instructions)
14	Special depreciation al	lowance for	qualified property (o	ther than listed prope	rty) placed in ser	vice		
	during the tax year (see	e instruction	ns)				14	
15	Property subject to sec	. 15						
16	Other depreciation (inc				<u> </u>		16	
<u>P</u>	art III MACRS D	epreciati	ion (Do not incl	ude listed propert		ructions.)		
		 		Section				
17	MACRS deductions for	-	· ·			•	17	0
<u>18</u>	If you are electing to group			the tax year into one or m				
	30	SCHOIL B-F	(b) Month and year	(c) Basis for depreciat		1	Ciation System	
	(a) Classification of prop	perty	placed in service	(business/investment i only–see instructions	use (C) Hoodicity	(e) Convention	(f) Method	(g) Depreciation deduction
<u>19a</u>	3-year property							
<u> </u>	5-year property							
<u> </u>	7-year property					-		
<u>d</u>								
	15-year property							
<u>_f</u>	20-year property				05 :-		0.4	
_9	25-year property				25 yrs.	100	S/L S/L	
h	Residential rental property				27.5 yrs.	MM MM		
	Nonresidential real		<u></u> -		27.5 yrs. 39 yrs.	MM	S/L S/L	
'	property				39 yıs.	MM	S/L	
	<u> </u>	tion C—As	sets Placed in Serv	ice During 2010 Tax	Year Using the			
 20a	±	1.0.1 0 7.0		loo buring love rux	Tour Company	Tatornative Bepi	S/L	<u> </u>
	12-year				12 yrs.		S/L	
	40-year				40 yrs.	ММ	S/L	
**********	rt IV Summary	(See ins	tructions)		1 4 0 γιο.	I IVIIVI	<u> </u>	
21	Listed property. Enter a		· -				21	T
22	Total. Add amounts fro			ines 19 and 20 in colu	mn (a), and line	 21. Enter here	·	
	and on the appropriate						22	
23	For assets shown above	-					····	
	portion of the basis attr				- · -	23		
For I	Paperwork Reduction A			ctions.			-	Form 4562 (2010)

DAA

INSTITUTE FOR CHILDREN'S MENTAL Form 4562 (2010) .

PE	nt V _		erty (Include				ther v	ehicles	s, certa	in con	nputer	s, and	prope	rty use	ed for	
		entertainme	nt, recreation	, or amus	ement o the sta	i.) ndard m	nileage i	ate or de	eductina	lease e	xpense.	complet	te only 2	4a.		
		24b, columns (a	ehicle for which y i) through (c) of S	ection A, al	of Sect	ion B, a	nd Secti	on C if a	pplicable		4-6	<u> </u>			-	
			-Depreciation			on (Cau	T						_			
<u>24a</u>	Do you ha	ave evidence to supp				-	Yes	No_		lf "Yes,"		vidence	written?		Yes	<u>No</u>
Time	(a) of property	(b) Date placed	(c) Business/	(d	-	Basi	(e) s for depr	eciation	(f) Recover		(g) lethod/		(h) Depreciat	ion	(i Elected se	-
	ehicles first)	in service	investment use percentage	Cost or otl	ner basis		iness/inv	estment	period	′ I	nvention		deductio		C0	st
 25	Special	depreciation allow	range for qualifier	l listed prop	erty plac	ed in se	_	-			т-					
23	•	rear and used mor									. 2	5				
26		used more than				000		<u>,</u>		·	· <u>· · · · · · · · · · · · · · · · · · ·</u>	- 1				
	Порож	acca more man														
			%													
			%												<u> </u>	
27	Property	used 50% or less	s in a qualified bu	isiness use:						_					· · · · · · · · · · · · · · · · · · ·	
										1						
			%							S/L	-				Į.	
			<u>%</u>				04	4		S/L					1	
28		ounts in column (f					21, pa	ge 1		••	_2	8]		29	·	
29	Add am	ounts in column (i), line 26. Enter r				dian an	Hop of	Vehicles			•				
Com	nlata thia	section for vehicle	ne used by a sole								d nerso	n If vou	provided	t vehicle	25	
		yees, first answer														
<u> ye</u>	di Cilipio	yees, mat answer	are questione in	00011011 0 10		a)		b)	(0	:)	(d)	(e)	(1	•
30	Total bu	siness/investmen	t miles driven du	ring	Vehi	cie 1	Veh	ııcle 2	Vehi	cle 3	Veh	icle 4	Vehi	cle 5	Vehi	cle 6
		(do not include o		•											<u>.</u>	
31	Total commuting miles driven during the year															
32	32 Total other personal (noncommuting) miles							Ţ .								
	driven														ļ	
33	Total m	les driven during t	the year Add line	es							1					
	30 throu	_										т	+	Γ'		
34		e vehicle avaılable	for personal use		Yes	No	Yes	No.	Yes	No	Yes	No	Yes	No	Yes	No
	-	off-duty hours?						 	 		 	-	 			
35		vehicle used prin			ļ										1	
20		owner or related	•		<u> </u>			+	 		<u> </u>	+	 		<u> </u>	
<u>36</u>	is anou	er vehicle availab	Section C—Qu		Employ	are Who	Provid	le Vehic	les for II	ee hy T	heir Em	nlovees	<u>. </u>		<u> </u>	
Ansı	ver these	questions to dete														
		owners or related								•						
37		maıntain a wrıtten			its all pe	rsonal u	se of ve	hıcles, ır	ncluding	commu	ing, by				Yes	No
	your em	ployees?														ļ
38		maıntain a wrıtten														
	employe	ees? See the instr	uctions for vehic	es used by	corporat	e officer	s, direct	tors, or 1	% or mo	re owne	ers					
39		treat all use of vel					•						•			
40	-	provide more thar				ain info	mation	from you	ır employ	ees ab	out the					
		ne vehicles, and r														
41		meet the requiren											٠			l
	The second second	your answer to 37		1 is "Yes,"	do not co	ompiete	Section	B for the	e covere	a venici	es.				<u> </u>	
<u> </u>	art VI	<u>Amortizatio</u>	<u>n</u>	Γ		1			_	1	T	(e)) [
		(a)		Date amo			Amortiz	(c) able amo	unt	Code s	-	Amortiz	zation	Amortiz	(f) ation for th	ns vear
		Description of cos	ts	beg beg			AMORIUZ	anio alli0	win	~~~ 8	30.1011	period percen				,
42	Amortiz	ation of costs that	begins during vo	our 2010 tax	vear (se	e instru	ctions).								_	
<u> </u>	7 11 11 11 11 12	<u></u>	. Dogino during ye													-
				<u></u>						<u> </u>						
43	Amortiz	ation of costs that	began before yo	ur 2010 tax	year								43		1	,667
44	Total. A	idd amounts in co	lumn (f) See the	instructions	for whe	re to rep	ort						44		1	<u>,667</u>
DAA									-						orm 450	62 (2010

	Adjusted Net Income		Charitable Purpose	_	Charitable Purpose		_
	Net Investment	inting Fees	Adjusted Net	axes	Adjusted Net	W.	
Federal Statements	PF, Part I, Line 11 - Other Revenue per Books \$ 9,351 -19,374 \$ -10,023	990-PF, Part I, Line 16b - Accounting Fees	Net Investment \$	Form 990-PF, Part I, Line 18 - Taxes	Net Investment \$ 845	\$45	
	Statement 1 - Form 990-PF, Part I, Line 11 - Other Income Revenue per Books Ne 9,351 \$ 9,351 \$ -19,374 \$ -10,023 \$	Statement 2 - Form 990-PF	**************************************	Statement 3 - Form 9	Total	\$ 855	
32124 INSTITUTE FOR CHILDREN'S MENTAL 84-1491971 FYE: 12/31/2010	Description ALLEN ARBITRAGE ORD BUS INC ALLEN ARBITRAGE SEC 988 LOSS TOTAL	SAS	Description INDIRECT ACCOUNTING FEES TOTAL		Description FOREIGN TAXES FROM DIVIDEND INV STATE TAX	TOTAL	

			_		<u></u>			 	
		- - e -						 	
		Adjusted Net		:		ŀ	0		4-5
		Adju			:	justed Ner			
		ent	❖	\$		Adjusted Net Income) - - -		
		Net Investment Income				ا ا با	ა ა 0		
	:	Net Ir				Investme			
		ar on	₩	0		Net Investment Income			
	tion	Current Year Depreciation			iţion	1	\$ 199		
	precia	Cur	₩	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	- Amortization	Current Year Amortization	1,667		
ts	19 - De	Life	5	7	23 - An	Curre			
Federal Statements	Statement 4 - Form 990-PF, Part I, Line 19 - Depreciation				Form 990-PF, Part I, Line 23	- File	15 \$ \$		
tate	Part I	g			Part I	i			
<u>a</u> S	90-PF,	- Method			90-PF,	Prior Year Amortization	15,000		
ede-	orm 9		200DB 200DB	200DB	orm 9	Amo			
	1t 4 - F				1 1		\$ 000		
NTAL	itemer	Prior Year Depreciation	7,604	3,432	Statement 5	Cost Basis	25,000		
S ME	St	Prior Depre			Sta				
OREN	otion	'	04 \$ 41	32	3		/01 \$ \$		
CHILL	Description	Cost Basis	7,604	3,432		Date Acquired	1/01/01		
FOR			LNI	_		'			
TUTE			01 \$ 01 \$ UIPME 02	ITURE 09 .					
INSTI 1971 1/31/2(Date Acquired	ER EQUI 6/30/01 ER EQUI 7/01/02	E FURNITURE 7/01/09 TOTAL \$			TOTAL		
32124 INSTITUTE FOR CHILDREN'S MENTAL 84-1491971 FYE: 12/31/2010		Date Acquired	COMPUTER EQUIPMENT 6/30/01 \$ COMPUTER EQUIPMENT 7/01/02	OFFICE TC			PATENT T(
1 6 3		١ ٤	5 5	Ö	I	1 5	Z		

32124 INSTITUTE FOR CHILDREN'S MENTAL 84-1491971 FYE: 12/31/2010		Federal Statements		· _ ·	
<i>σ</i> η	Statement 6 - Form 990-PF, Part I, Line 23 - Other Expenses	art I, Line 23 - Other Expe	<u>suses</u>		
Description	Total	Net Investment	Adjusted Net	Charitable Purpose	
EXPENSES BANK FEES FRAMING INSURANCE MEMBERSHIPS MISCELLANEOUS EXPENSE PAYROLL FEE WEBSITE HOSTING & DOMAINS TOTAL	\$ 1,627 425 635 635 1,324 1,242 1,242 258 \$ 5,610	\$	\$	φ w	
Stateme	Statement 7 - Form 990-PF, Part II, Li	Line 10b - Corporate Stock Investments	Investments		
Description ALLEN ARBITRAGE LP FIDELITY MAGELLAN	Beginning of Year \$ 2,169,646 14,317	End of Year \$ 2,359,903	Basis of Valuation MARKET MARKET	Fair Market Value \$ 2,520,567 8,776	
TOTAL	\$ 2,183,963	\$ 2,374,		\$ 2,529,343	
					
				- 2-9	

32124 INSTITUTE FOR CHILDREN'S MENTAL
84-1491971 Federal Statements

FYE: 12/31/2010

Statement 8 - Form 990-PF, Part II, Line 15 - Other Assets

Description		Beginning of Year	 End of Year		Fair Market Value
PATENT TO ALPHA 7-NICOTINIC RECEPTOR	\$	10,000	\$ 8,333	\$	8,333
TOTAL	\$ <u></u>	10,000	\$ 8,333	\$_	8,333

32124 INSTITUTE FOR CHILDREN'S MENTAL 84-1491971 FYE: 12/31/2010	Federal Statements	atements			<u> `-</u>	-
Statement 9 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.	0-PF, Part VIII, Line 1 -	List of Officers	s, Directors, Trus	tees, Etc.	<u> </u>	*
Name and Address	, Title	Average Hours	Compensation	Benefits	Expenses	
ROBERT FREEDMAN, MD 6432 E RADCLIFFE AVE ENGLEWOOD CO 80111		ı	0	0		 0
RICHARD SAUNDERS 1530 E OXFORD LANE ENGLEWOOD CO 80113	TRUSTEE	1.00	0	0		0
JEROME H. KERN 13001 E 17TH PLACE AURORA CO 80045	PRESIDENT	2.00	0	0		0
MARY ROSSICK KERN 13001 E 17TH PLACE AURORA CO 80045	TRUSTEE	1.00	0	0		0
TERRY BIDDINGER 13001 E 17TH PLACE AURORA CO 80045	TRUSTEE	1.00	0	0		0
STEPHEN BRETT 45 BELLEVUE DRIVE BOULDER CO 80302	TRUSTEE	1.00	0	0		0
DONALD COOK 56 CHARLOU CIRCLE ENGLEWOOD CO 80111	VICE PRES	1.00	0	0		0
GERALD GAINES 40679 NORTH 107TH STREET SCOTTSDALE AZ 85262	TRUSTEE	1.00	0	0		0
NANCY GARY, MD 13 VILLAGE ROAD ENGLEWOOD CO 80113	TRUSTEE	1.00	0	0		0
BLAIR RICHARDSON	TREASURER	1.00	0	0	 თ	0

 1	-					
		₀	0	0	0	
		Expenses				6
	ıstees,	Benefits	0	0	0	0
Ø	Statement 9 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, <u>Etc. (continued)</u>	Compensation	0	0	150,000	0
Federal Statements	Line 1 - List of O	Average Hours	1.00	1.00	40.00	1.00
	<u>m 990-PF, Part VIII, Etc.</u>	Title	TRUSTEE	TRUSTEE	EXEC DIR	TRUSTEE
32124 INSTITUTE FOR CHILDREN'S MENTAL 84-1491971 FYE: 12/31/2010	Statement 9 - For	Name and Address A AVE #1	DRIVE > 80110	A RIVE 80110	ONDS R PLACE 80111	RS 80113
32124 INSTITUT 84-1491971 FYE: 12/31/2010		A 1991 E ALAMEDA P DENVER CO 80209	FRED VIERRA 77 GLENMOOR DRIVE ENGLEWOOD CO 80110	ROXANNE VIERRA 77 GLENMOOR DRIVE ENGLEWOOD CO 80110	STEPHEN A EDMONDS 13678 E WEAVER PLACE CENTENNIAL CO 80111	JEANNE SAUNDERS 1530 E OXFORD LANE ENGLEWOOD CO 80113

32124 INSTITUTE FOR CHILDREN'S MENTAL

84-1491971

Federal Statements

-FYE: 12/31/2010 -- -- -- --

Statement 10 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	_	Amount
RICHARD SAUNDERS - 2002	\$	150,014
RICHARD SAUNDERS - 2006		101,000
RICHARD SAUNDERS - 2007		50,000
RICHARD SAUNDERS - 2008		25,000
RICHARD SAUNDERS - 2009		25,150
RICHARD SAUNDERS - 2010		25,000
JEROME AND MARY ROSSICK KERN - 1999		877,975
JEROME AND MARY ROSSICK KERN - 2002		50,000
JEROME KERN - 2004		50,000
GERALD GAINES - 2005		50,000
GERALD GAINES - 2007		25,000
GERALD GAINES - 2008		25,000
GERALD GAINES - 2010		25,000
ROXANNE AND FRED VIERRA - 2002		25,000
ROXANNE AND FRED VIERRA - 2003		25,000
ROXANNE AND FRED VIERRA - 2004		30,000
ROXANNE AND FRED VIERRA - 2005		50,000
ROXANNE AND FRED VIERRA - 2006		25,000
ROXANNE AND FRED VIERRA - 2007	_	50,000
TOTAL	\$	1,684,139