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Form **990**

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

Open to Public Inspection

Department of the Treasu. Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

<u> </u>	For t	ne 2011 calendar year, or tax year beginning 2	APR 1, 2011 and	ending M	AR 31, 20:	12
В	Check i applica	C Name of organization			D Employer iden	itification number
		DENVER AREA BDUC. TELI	BCOMM. CONSORT.			
Ē					1 84-	-0943036
┌	Initia	4 22 4	elivered to street address)	Room/suite		
Ē	Term	P.O. BOX 6060	,		303	35322852
⊢					G Gross receipts \$	1,550,547.
<u> </u>	Appl Book Perk				H(a) Is this a grou	
		F Name and address of principal officer: UCL			for affiliates?	
_		P.O. BOX 6060, BOULDER,		1 222	H(b) Are all affiliates	
_) ◀ (insert no.) 4947(a)(1)	or 527	,	h a list. (see instructions)
	_	he: WWW.DARTC.ORG			H(c) Group exemp	
			ssociation Other >	L Year	of formation; 198.	M State of legal domicile: CO
	_	Summary	077	AATTON	7 P A	
Сометлалсе	1	Briefly describe the organization's mission or mos	t significant activities: SISIS	SCHEDU	PR 0	
Ē	2	Check this box if the organization disc	ontinued its operations or dispo	sed of more	than 25% of its ne	t assets.
8	3	Number of voting members of the governing body	—		l l	3 3
9	4	Number of independent voting members of the go	overning body (Part VI, line 1b)			4 2
ğ	5	Total number of individuals employed in calendar	year 2011 (Part V, Ine 2a)			5 0
₹	6	Total number of volunteers (estimate if necessary)			F	6 0
Activities &	7 a	Total unrelated business revenue from Part VIII, c				7a -4,273.
_	ь	Net unrelated business taxable income from Form	1 990-T, line 34			₇₆ -5,866.
	Γ				Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)				0.
쿭	9	Program service revenue (Part VIII, line 2g)			0	1,995.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4	4, and 7d)		64,194	
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8d			480,154	
	12	Total revenue - add lines 8 through 11 (must equa			544,348	
	13	Grants and similar amounts paid (Part IX, column			129,993	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	/:F		0.
塑	15	Salarles, other compensation, employee benefits		<i>j</i>	112,802	131,650.
Expenses	16a	Professional fundraising fees (Part IX, column (A),		1) O	0.
8	ь	Total fundraising expenses (Part IX, column (D), lin	19 25) 🔊 JUN 2 &		2.00	
<u>iii</u>	17	Other expenses (Part IX, column (A), lines 11a-11d			2 152,603	165,369.
	18	Other expenses (Part IX, column (A), lines 11a-11c Total expenses. Add lines 13-17 (must equal Part Revenue less expenses. Subtract line 18 from line	IX, column (A), line 25)	وسناه والمناف	395,398	
	19	Revenue less expenses. Subtract line 18 from line	12 " 060 11 1		148,950	
28					glasing of Current Yes	
醫	20	Total assets (Part X, line 16)			4,330,970	
nd Balances	21	Total liabilities (Part X, line 26)			30,354	
E S		Net assets or fund balances. Subtract line 21 from	line 20		4,300,616	
Pa	त्सा	Signature Block				
Unde	er pena	ulties of perjury, I declary/that I have examined this return,	, including accompanying schedules	s and stateme	ents, and to the best of	my knowledge and belief, it is
		t, and complete. Declaration of preparer (other than office				· ·
		N . X V.			1./ 6	115/2012
Sigr	1	Signature of Officer			Date	
Her	•	ADAM MILLER, SECRETARY	•			
		Type or print name and title				
		Print/Type preparer's name	Preparer's signature		ate Check	PTIN
Paid		RICHARD SCORESBY	Middle Screeky	2	6/4/12 seren	p00573067
Prep	arer	Firm's name CBIZ MHM, LLC			Firm's EIN	34-1854260
Use	Only	Firm's address 8181 B TUFTS AVE				
		DENVER, CO 80237			Phone no.	720.200.7000
May	the II	S discuss this return with the preparer shown abo	ove? (see instructions)			X Yes No
	1 01-2			ons.		Form 990 (2011)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part IV Checklist of Required Schedules

	•		Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	Х	<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			l
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			l
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	205	
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Pa	rt IV Checklist of Required Schedules (continued)			
	·	}	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			•
	United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21	X	<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	1		
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			ļ
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1		
	Schedule J .	23	L_	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			ļ
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	ļ	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	İ		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	}		
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			1
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	ļ
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			1
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?	!		
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	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," complete Schedule R, Part V, line 2	35b	<u> </u>	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			

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and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Note. All Form 990 filers are required to complete Schedule O

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Par	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			I
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			l
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			•
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			•
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	$oxed{oldsymbol{ol}}}}}}}}}}}}}}}}}}$
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b_	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			1
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			•
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			١
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	_	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			,,
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		╁
	Organizations that may receive deductible contributions under section 170(c).	_		†
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		+-
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	70		
	to file Form 8282? If "Yes." Indicate the number of Forms 8282 filed during the year	7c		<u> </u>
	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e]	Ī
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f	<u> </u>	\vdash
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		\vdash
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	[1
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_[:		1
11	Section 501(c)(12) organizations. Enter:			1
а	Gross income from members or shareholders	_[
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1
	amounts due or received from them)	_		1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-[1
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	
	Note. See the instructions for additional information the organization must report on Schedule O.			1
	Enter the amount of reserves the organization is required to maintain by the states in which the			1
	organization is licensed to issue qualified health plans	-[1
	Enter the amount of reserves on hand	 		 "
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	X
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	l	1

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DENVER AREA EDUC. TELECOMM. CONSORT. 84-0943036 Form 990 (2011) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response to any question in this Part VI X

Sec	tion A. Governing Body and Management					
			_		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a				
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	2			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with	any other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under th	e direc	t supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			3_		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?		5_		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or approximately appr	point	one or			
	more members of the governing body?			7a		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockh	olders, or			v
_	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following		v	
a	The governing body?			8a	Х	<u>x</u>
ь	Each committee with authority to act on behalf of the governing body?			8b_		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	cnea :	at the	9		х
Sec	organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Re	01/00/1	- Code l	9		
000	tion D. 1 onoics (this dection b requests information about policies not required by the internal re	everia	- 00de./		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	100	X
	If "Yes," did the organization have written policies and procedures governing the activities of such ch	napter	s. affiliates.			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	р.с.	-,	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y befo	re filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	•	-			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	flicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," d	escribe			
	in Schedule O how this was done			12c	Х	
13	Did the organization have a written whistleblower policy?			13		X
14	Did the organization have a written document retention and destruction policy?			14		X
15	Did the process for determining compensation of the following persons include a review and approve	al by ir	dependent		1	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent v	vith a]	
	taxable entity during the year?			16a	X	
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluation					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nizatio	n's			Х
500	exempt status with respect to such arrangements? tion C. Disclosure			16b		
<u>360</u> 17	List the states with which a copy of this Form 990 is required to be filed NONE					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Sect	on 501(c)(3)s only)	availah		
.0	for public inspection. Indicate how you made these available. Check all that apply.	(OeCl	on so regists only)	uvallati	4C	
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	nflict	of interest policy ar	d finar	ncial	
	statements available to the public during the tax year.	············	otoroot policy, ai	J iii lai	Jul	
20	State the name, physical address, and telephone number of the person who possesses the books are	nd rec	ords of the organiza	tion: ▶	•	
	HAZEL J. BOLSOVER - 303-532-2852					
	655 SOUTH SUNSET STREET, SUITE A, LONGMONT, CO 80	501				
132006		_		F	000	20044

01-23-12

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

(A)	(B)			_ ((C)			(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos heck	more	than	one	Reportable	Reportable	Estimated
	hours per	box	, unle cer an	ss pe id a d	rson irecto	is bot or/trus	h an	compensation	compensation from related	amount of other
	week (describe	-					Ĺ	from the	organizations	compensation
	hours for	diac				B		organization	(W-2/1099-MISC)	from the
	related	20	15te			ausat		(W-2/1099-MISC)	,	organization
	organizations	l trus	ᇣ		986	mg m				and related
	in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Juner			organizations
(1) NANCY SANDERS	<u> </u>	-	<u> </u>	l°	~	± 5	Œ			
VICE PRESIDENT, DIRECTOR	2.00	X		Х				0.	0.	0.
(2) JOE PEZZIILLO										
TREASURER, DIRECTOR	2.00	X		Х				0.	0.	0.
(3) JOHN SCHWARTZ										
PRESIDENT, DIRECTOR	5.50	Х		Х				13,992.	0.	3,991.
(4) ADAM MILLER		:						10.405		1 005
SECRETARY	4.80	-		Х	<u> </u>	 	_	10,407.	0.	1,837.
(5) PATRICIA DWYER	6.50			x				0 045	0.	1 5/0
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rart	VII Section A. Officers, Directors, Tru		nplo	oyee			ligh	est						
	(A)	(B)			(C Pos	C) Ition			(D)	(E)			(F)	
	Name and title	Average hours per		not c	heck	more	than		Reportable	Reportable			timate	
		week					ıs bot or/trus		compensation from	compensatio from related			other	Oi
		(describe	ctor						the	organizations			pensa	tion
		hours for	or din	, s			ated		organization	(W-2/1099-MIS	SC)		om th	
		related organizations	trustee or director	frustee		 **	npeus		(W-2/1099-MISC)			_	anizat d relat	
		ın Schedule	dual t	Institutional 1	_	m log	S S C O	 =					anızatı	
		O)	Individual	Instit	Officer	Keyer	Highest compensated employee	Fem						
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			<u> </u>	L			Ļ		22 244		_		7 2	76
	Sub-total								33,244.		0.		7,3	0.
	Total from continuation sheets to Part Vi	II, Section A							33,244.		0.		7,3	
	Total (add lines 1b and 1c) Total number of Individuals (including but n	ot limited to th		liete		how	a) w/	20 F		000 of reportabl			7 7 3	, , ,
	compensation from the organization	iot illilited to ti	1030	11310	JU QI	004	C) WI	10 11	eceived more than \$100	,,000 or reportable				C
													Yes	No
3 [Old the organization list any former officer,	director, or tru	uste	e, ke	у ег	nplo	yee	, or	highest compensated e	mployee on				
lı	ne 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4 F	For any individual listed on line 1a, is the su	ım of reportab	le co	omp	ensa	ation	n and	d otl	her compensation from	the organization			:	
а	and related organizations greater than \$15	0,000? <i>If</i> "Yes,	" co	mple	ete S	Sche	edule	e <i>J f</i>	for such individual			4		X
	Old any person listed on line 1a receive or a							elat	ed organization or indivi	dual for services			1	37
	endered to the organization? If "Yes," com	plete Schedul	<u>e J 1</u>	or s	uch	pers	son					5		X
	on B. Independent Contractors		de:-	I					hat recovered as and the co	\$100 000 of		otio- f	·	
	Complete this table for your five highest co he organization. Report compensation for	-									والعطا	auOII I	10111	
	(A)	ine calendar y	cai	CIIGI	ng v	VILII	O1 W	101111	(B)	year.		(0		
	Name and business	address	N	INC	3			•	Description of s	ervices	С	ompe	nsatio	n
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2 T	otal number of independent contractors (i	ncludina but n	ot lu	mite	d to	tho	se lis	sted	above) who received m	ore than			·	
	100,000 of compensation from the organi				0		0		and the second of the second o					
- 				_								Form	agn (2011)

Page **9**

Total revenue Related or overnort function Received Campagns 1a		21.6 3	. 11	Statement of Rever	iue					
2 a MOBILE CITIZEN INCOME Business Code 900099 1,995. 1,995.				,				Related or exempt function	Unrelated business	excluded from tax under sections 512,
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2 a MOBILE CITIZEN INCOME Business Code 900099 1,995. 1,995.	S D				1a-1f \$					
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Description Description					(i) Real	(II) Personal				
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assets other than inventory 1,093,309,		l _			F	<u> </u>				
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Miscellaneous Revenue Business Code 11 a K-1 EBS SUPPORT SERVIC 561000 -665. b K-1 FREE SPEECH MEDIA 512100 -3,608. c K-1 PUBLIC TV 517919 -33,402. d All other revenue -37,675. 12 Total revenue. See instructions 574,741. -41,274.					-	13,302.	_9 867	_9 867	:	
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132009 01.22.12		12	-					-41.274	-4.273	620,288.
	1320			. s.ai i ovenae. Oce matractions		<u> </u>				

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	olete columns (B), (C), and (D)				
	Check if Schedule O contains a respons				
	not ınclude amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21	152,950.	152,950.		
2	Grants and other assistance to individuals in		-		
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,	i			
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16		<u>-</u>		·····
4	Benefits paid to or for members	_			
5	Compensation of current officers, directors,				
	trustees, and key employees	45,226.		45,226.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	72,651.	43,951.	28,700.	
8	Pension plan accruals and contributions (include	2 2		2 5 5 2	
	section 401(k) and section 403(b) employer contributions)	3,573. 3,809.		3,573. 3,809.	
9	Other employee benefits	3,809.		3,809.	
0	Payroll taxes	6,391.		6,391.	
1	Fees for services (non-employees).				
а	Management	2 042	2 002	750	
b	Legal	3,843.	3,093.	750.	
C	Accounting	2,500.		2,500.	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17	16 706		16 706	
f	Investment management fees	16,796.	25 467	16,796.	
g		40,469.	35,467.	5,002.	
12	Advertising and promotion		1,773.	16 7/1	
3	Office expenses	22,254.	5,513. 5,393.	16,741.	
4	Information technology	5,480.	5,393.	07.	
5	Royalties	7,845.		7 0/5	
6	Occupancy		7,697.	7,845.	
7	Travel	22,617.	1,091.	14,920.	
8	Payments of travel or entertainment expenses				
_	for any federal, state, or local public officials	4,574.	4,028.	546.	
9	Conferences, conventions, and meetings	4,3/4.	4,020.	240.	
20	Interest	-			
1	Payments to affiliates	3,036.	-	3,036.	
2	Depreciation, depletion, and amortization	4,546.		4,546.	
23	Insurance Other expanses Itemize expanses not equated	4,540.		4,540.	······
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	EQUIPMENT	12,012.	12,012.		
b	PROGRAM LICENSE	7,211.	7,211.		
С	RESEARCH AND DEVELOPMEN	6,141.	3,869.	2,272.	
d	DUES & SUBSCPRITION	3,475.	3,175.	300.	
e	All other expenses	797.	777.	20.	
5	Total functional expenses. Add lines 1 through 24e	449,969.	286,909.	163,060.	C
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
			i	j.	

Part X Balance Sheet (A) Beginning of year End of year 30,287. 47,137. 1 1 Cash · non-interest-bearing 1,310,411. 472,392. 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 2,845. 4 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 7 Notes and loans receivable, net 4,039. 8 Inventories for sale or use 9,330. 1,678. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 74,380. 67,759. basis Complete Part VI of Schedule D 10a 9,657 6,621. 10b 10c b Less: accumulated depreciation 3,027,966. 2,275,475. 11 11 investments - publicly traded securities 200,000. 200,000. 12 12 Investments - other securities. See Part IV, line 11 502,908. 484,520. 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 554. 554. 15 15 Other assets. See Part IV, line 11 4,330,970. 4,255,404. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 30,354. 40,240. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 37,960. 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 78,200. 30,354. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here

X
and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 4,300,616. 4,177,204. 27 27 Unrestricted net assets 28 Temporarily restricted net assets 28 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here

and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 4,177,204. 4,255,404. 4,300,616. 33 33 Total net assets or fund balances 4,330,970. Total liabilities and net assets/fund balances

Form 990 (2011)

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

3b

Form 990 (2011)

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Employer identification number Name of the organization DENVER AREA EDUC. TELECOMM. CONSORT. 84-0943036 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area □ Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure 2d listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
 - (i) Revenues included in Form 990, Part VIII, line 1

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

- (ii) Assets included in Form 990, Part X
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- Revenues included in Form 990, Part VIII, line 1
- Assets included in Form 990, Part X

Schedule D (Form 990) 2011

132051 01-23-12

		REA EDUC.							43036	
3	Using the organization's acquisition, accession	n, and other record	ıs, cnec	k any of the	tollowing tha	it are a si	ignificant u	ise of its	collection	tems
	(check all that apply):		. —							
a	Public exhibition	d			hange progra	ams				
b	Scholarly research	е	· L	Other						
С	Preservation for future generations									
4	Provide a description of the organization's college	•		-	-			se in Parl	XIV.	
5	During the year, did the organization solicit or r					er sımılar	assets	_	,	
-	to be sold to raise funds rather than to be main								<u>Yes</u>	No_
Par	t IV Escrow and Custodial Arrange		ete if the	e organizatio	n answered	"Yes" to	Form 990,	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Part									
1a	Is the organization an agent, trustee, custodiar	n or other intermed	diary for	contribution	ns or other as	sets not	ıncluded	_	-	
	on Form 990, Part X?	-							Yes	∟ No
b	If "Yes," explain the arrangement in Part XIV ar	nd complete the fo	llowing	table:						
									Amount	
С	Beginning balance						1c			
đ	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on For	m 990, Part X, line	21?				-		Yes	☐ No
	If "Yes," explain the arrangement in Part XIV.									
Par	*****	he organization an	swered	"Yes" to Fo	rm 990, Part	IV, line 1	0.			
		(a) Current year		rior year	(c) Two yea		(d) Three ye	ears back	(e) Four y	ears back
1a	Beginning of year balance	, ,	, ,		1					
	Contributions	-			ļ					
	Net investment earnings, gains, and losses						•			***************************************
	Grants or scholarships									
	Other expenditures for facilities			·						······
-										
	and programs					+				
	Administrative expenses									······································
_	End of year balance		4		<u> </u>					
2	Provide the estimated percentage of the current	nt year end baland	•	g, column (a	a)) neid as:					
a	Board designated or quasi-endowment		_%							
	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
_	The percentages in lines 2a, 2b, and 2c should			_						
3a	Are there endowment funds not in the possess	sion of the organiza	ation the	at are held a	ind administe	ered for ti	he organiz	ation	_	
	by:									es No_
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations li	•							3ь	
4	Describe in Part XIV the intended uses of the o									
Par	······································									
	Description of property	(a) Cost or o			or other		ccumulate	d	(d) Book	value
		basis (investr	nent)	basis	(other)	dep	preciation			
1a	Land	ļ								
b	Buildings									
c	Leasehold improvements					ļ				
d	Equipment			7	4,380.		67,75	59.	6	,621.
e	Other			L						
Total	Add lines to through to (Column (d) must age	al Carre 000 Bord	Vactor	mm /D) lima 1	10/011				6	.621.

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under 2. FIN 48 (ASC 740)

132053 01-23-12

	dule D (Form 990) 2011 DENVER AREA EDUC. TELECOMM.				3036 Page 4
	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Finan		ements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		
4	Net unrealized gains (losses) on investments		4		
5	Donated services and use of facilities		5		
6	Investment expenses		6		
7	Prior period adjustments .		7	_	
8	Other (Describe in Part XIV.)		8		
9	Total adjustments (net). Add lines 4 through 8		9		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	19	10		
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Reve	nue per F	Return	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a]	
b	Donated services and use of facilities	2b]	
С	Recoveries of prior year grants	2c		1	
d	Other (Describe in Part XIV.)	2d		1	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b		1 1	
c	Add lines 4a and 4b	40		4 _c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	
*******	1 XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Expe	enses per		
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				 .
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b		1 1	
	Other losses	2c		1	
C	Other (Describe in Part XIV.)	2d		1	
d	,	20		-	
_	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	-
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-	
	Other (Describe in Part XIV.)	4b		4.1	
_	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	
	t XIV Supplemental Information	 			
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III • 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl				

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

DENVER AREA EDUC. TELECOMM. CONSORT.

Part | General Information on Grants and Assistance

OMB No 1545-0047

Open to Public Inspection

Employer identification number 84-0943036

	to substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	he grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	tion X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II County and Other Assistance to Consuments and Other in the United States.	ocedures for moni	toring the use of grant	funds in the United	States.	\" Logonian octoria	# 000 min 1 + 100	W line 21 for any
_	\$5,000. Check this	s box if no one recipien	t received more that	an \$5,000. Part II.	can be duplicated if a	es (o roilli seo, rait additional space is nee	ded
(a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUBLIC COMMUNICATORS, INC. P.O. BOX 44099							
DENVER, CO 80201-4099	51-0173482	501(C)(3)	105,450.	0			MEDIA
ADVOCACY FUND / NEW MEDIA VENTURES							
SAN FRANCISCO, CA 94129	94-2282759	501(C)(3)	7,000.	0			MEDIA
ONE COLORADO 1245 EAST COLFAX #204 DENVER, CO 80218	27-1332464	501(C)(4)	15,000.	0			PUBLIC EDUCATION AND ADVOCACY
	84-1320586	R 0 1 (7) (4)	2. 0.00	c			VEO LOUHDAM UNE MOTHEDIMA
CU FOUNDATION - CU ENVIRONMENTAL CENTER - 4740 WALNUT STREET -							THE TOTAL OF STREET
BOULDER, CO 60301		(5) (3) (5)					Contraction of contraction
2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations listed in the line 1 table	ind government of slisted in the line	lsuoi	isted in the line 1 table				3.
۱,	, see the Instruct	ions for Form 990.					Schedule I (Form 990) (2011)

CONSORT.	
TELECOMM.	
R AREA EDUC.	
AREA	
DENVER	l
990) (2011)	
dule I (Form	

Page 2

84-0943036

Schedule | (Form 990) (2011)

DENVER AREA EDUC. ILLUCIAL: Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed

IN THE CASE OF APPLICANTS WITH WHOM THE ORGANIZATION HAS A FORMAL GRANT AGREEMENT, THE AGREEMENT OUTLINES WHEN THE PAYMENTS ARE TO BE MADE AND

USUALLY REQUIRES THE GRANTEE TO SUBMIT, IN DETAIL, HOW THEY USED THE

FUNDS IN A NARRATIVE OF THE WORK. THE REPORTS ARE THEN REVIEWED BY ONE

OR MORE STAFF MEMBERS OR CONTRACT CONSULTANTS; AND IF THERE IS ANY

DISCREPANCY, THE FINAL PAYMENT WOULD NOT BE MADE UNTIL THE PROBLEM HAS

132102 01-27-12

Schedule I (Form 990) 2011	DENVER	AREA	EDUC.	TELECOMM.	CONSORT.	84-0943036	Page 2
Schedule I (Form 990) 2011 Part IV Supplemental Inf	ormation				<u> </u>		
BEEN CORRECTED.					-		
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SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

2011

Open To Public Inspection

Name of the organization

DENVER AREA EDUC. TELECOMM. CONSORT.

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

Employer identification number 84-0943036

Schedule L (Form 990 or 990-EZ) 2011

1 (-))		سديد استكارات			(h) D	- 6 4				(c) Con	rected		
(a) Na	me of disqu	alfiled pers	son 		(b) Description	ot transa	ection			Yes	No		
						_							
					·-···								
					. <u>-</u>								
										ļ			
	_												
	f tax impose	ed on the o	organization	managers or disqualifi	ed persons during the	year un	der						
section 4958								> \$					
3 Enter the amount of	it tax, it any,	on line 2,	above, reim	bursed by the organiza	ation			> \$	-				
Part II Loans to	and/or F	From Int	arastad l	Parenne									
					h 00 F 000 F	7 0-41	/ line 00	١_					
(a) Name of intere			to or from	on Form 990, Part IV,		1	/ <u>, iine 30</u>) In	(f) Ap	proved	(0) \	/rıtten		
person and purp		the orga		(c) Original principal amount	(d) Balance due		ault?	by bo	ard or		ment?		
		То	From	1		Yes	No	Yes	No	Yes	No		
			110111			163	140	163	110	163	110		
		 				 			 				
									 				
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				nterested Persons.									
tal	·····			nterested Persons.									
art III Grants o	r Assista	nce Ber	nefiting Ir	Interested Persons. of on Form 990, Part IV, line 27. (b) Relationship between interested person and the organization (c) Amount an assistant									
Complete I	the organiz	ation ansv	vered 'Yes'							t and type of stance			
(a) Name of in	terested per	rson											
								_					
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	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz	
		person and the organization	transaction	(ransaottor)	Yes	nues? No
EBS	SUPPORT SERVICES	KEY EMPLOYEES	154,843.	REIMBURSEME		Х
Par		al information for responses to question	s on Schedule L (see	instructions).		
EBS	SUPPORT SERVICES LLC	IS OWNED BY FIVE MEM	BERS WHICH	ARE ALL		
NON	PROFIT ORGANIZATIONS.	DAETC IS A MEMBER O	F EBS SUPPO	RT SERVICES	LLC	
AND	HAS AN 11.14% INTERES	T. EBS SUPPORT SERV	ICES WAS CR	EATED FOR T	HE	
PUR	POSE OF LEASING PERSON	NEL AND PROVIDING SH	ARED ADMINI	STRATIVE		
SER	VICES TO ITS MEMBERS.	THE APPOINTED MANAG	ER OF EBS S	UPPORT SERV	ICES	<u> </u>
IS_	THE PRESIDENT/CEO OF DA	AETC. THREE KEY EMP	LOYEES OF E	BS SUPPORT		
SER	VICES DEVOTE PART OF THE	HEIR TIME TO DAETC B	USINESS: J	OHN SCHWART	Z,	
ADA	M MILLER, AND PATRICIA	DWYER. DAETC REIMB	URSES EBS S	UPPORT SERV	ICES	<u> </u>
OR	THE COST OF THE LEASE		OYEES. THE	i !		
OMA	UNT LISTED ABOVE INCLU	DES ALL COMPENSATION	AND BENEFI	TS PAID TO		
гне	SE KEY EMPLOYEES. THE	AMOUNT LISTED ABOVE	ALSO INCLU	DES SALARY	AND	
BEN	EFITS FOR OTHER SHARED	EMPLOYEES AS WELL A	S REIMBURSE	MENT FOR SU	СН	
ITE	MS AS SHARED OFFICE SPA	ACE, EQUIPMENT, AND	OTHER OPERA	TING EXPENS	ES.	
гот	AL AMOUNT PAID TO EBS S	SUPPORT SERVICES:	154,843	· · · · · · · · · · · · · · · · · · ·		
K	EY EMPLOYEE COMPENSATION	ON	45,226			
0	THER EMPLOYEE SALARIES		72,466	<u>-</u>		
E	MPLOYEE BENEFIT & PAYRO	OLL TAX	13,773			
0	THER OPERATING EXPENSE		15,533			
ח	ENIT		7 0/15			

RENT

7,845

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

DENVER AREA EDUC. TELECOMM. CONSORT. 84-0943036
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE CORPORATION IS ORGANIZED AND WILL BE OPERATED EXCLUSIVELY FOR
"CHARITABLE, SCIENTIFIC AND EDUCATIONAL" AND "SOCIAL WELFARE" PURPOSES
WITHIN THE MEANING OF SECTIONS 501(C)(3) AND 501(C)(4), RESPECTIVELY,
OF THE INTERNAL REVENUE CODE. TO THIS END, THE NONPROFIT SHALL
UNDERTAKE ACTIVITIES TO:
SUPPORT THE PROVISION OF QUALITY AND DIVERSE INSTRUCTIONAL MEDIA
CONTENT AND CAPABILITIES TO EDUCATORS AND STUDENTS, INCLUDING, BUT NOT
LIMITED TO, DATA SERVICES AND INSTRUCTIONAL VIDEO;
FOSTER OPEN, HONEST AND OUTSPOKEN MEDIA THAT HELP USERS TO BE A POPULAR
DEMOCRATIC CHECK ON BOTH GOVERNMENT POWER AND CONCENTRATED PRIVATE
PRIVILEGE;
EXPAND THE DISSEMINATION OF MEDIA, AND POINTS OF VIEW CARRIED BY THEM,
THAT OFFER DISSENTING, ALTERNATIVE, OR CRITICALLY CONSTRUCTIVE
INFORMATION AND CONCEPTS TO THE MARKETPLACE OF IDEAS IN BOTH LOCAL AND
GLOBAL CONTEXTS;
ENGAGE IN ADDITIONAL SOCIAL WELFARE, CHARITABLE, SCIENTIFIC, AND/OR
EDUCATIONAL ACTIVITIES AS ARE CONSISTENT WITH OPERATIONS THAT MAY BE
UNDERTAKEN BY ORGANIZATIONS DESCRIBED IN, AND THUS EXEMPT FROM TAXATION
UNDER, SECTION 501(C)(4) OF THE INTERNAL REVENUE CODE, AS NOW ENACTED

OR HEREAFTER AMENDED.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

THE ORGANIZATION COMMENCED PROVIDING DATA SERVICES FOR EDUCATIONAL AND NON-PROFIT ORGANIZATIONS. THIS SERVICE IS KNOWN AS MOBILE CITIZEN.

THE ORGANIZATION ALONG WITH 4 OTHER NON-PROFIT ORGANIZATIONS FORMED PUBLIC TV FINANCING, LLC TO IMPROVE THE DISSEMINATION OF PROGRESSIVE MEDIA.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

THE ORGANIZATION THROUGH ITS INVESTMENT IN AN UNRELATED ORGANIZATION

TAXABLE AS A PARTNERSHIP UNDERTOOK ACTIVITIES TO EXPAND THE

DISSEMINATION OF MEDIA, AND POINTS OF VIEW CARRIED BY THEM, THAT OFFER

DISSENTING, ALTERNATIVE, OR CRITICALLY CONSTRUCTIVE INFORMATION AND

CONCEPTS TO THE MARKETPLACE OF IDEAS IN BOTH LOCAL AND GLOBAL CONTEXTS.

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ -33,402.

FORM 990, PART VI, SECTION A, LINE 8B: THE ORGANIZATION DOES NOT HAVE A COMMITTEE WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11: THE 990 IS REVIEWED BY THE

ORGANIZATION'S ACCOUNTANTS, BUSINESS MANAGER, CFO AND AT LEAST ONE

CORPORATE OFFICER. ADDITIONALLY THE FORM IS PRESENTED TO THE BOARD MEMBERS

BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C: EACH RESPONSIBLE PERSON WHO IS A

DIRECTOR OR OFFICER HAS A DUTY TO DISCLOSE TO THE BOARD (OR TO ANY

COMMITTEE OF THE BOARD THAT IS CONSIDERING A DECISION TO WHICH THE CONFLICT

DENVER AREA EDUC. TELECOMM. CONSORT.

Employer identification number 84-0943036

APPLIED) THE MATERIAL FACTS OF ANY PROPOSED TRANSACTION OR ACTION OF THE ORGANIZATION IN WHICH SUCH RESPONSIBLE PERSON HAS ANY CONFLICTS.

EACH RESPONSIBLE PERSON WHO IS A STAFF MEMBER HAS A DUTY TO DISCLOSE TO THE BUSINESS MANAGER OF THE ORGANIZATION AND HIS/HER IMMEDIATE SUPERVISOR THE MATERIAL FACTS OF ANY PROPOSED TRANSACTION OF THE ORGANIZATION IN WHICH SUCH PERSON HAS ANY CONFLICT. IMPLEMENTATION OF THE CONFLICT OF INTEREST POLICY RELIES ON SUCH DISCLOSURE.

A RESPONSIBLE PERSON WHO FAILS TO FOLLOW THE PROTOCOLS ESTABLISHED IN THE CONFLICT OF INTEREST POLICY SHALL BE SUBJECTED TO MEANINGFUL DISCIPLINARY ACTION BY THE BOARD OF DIRECTORS UP TO AND INCLUDING REMOVAL FROM THE BOARD OR THEIR POSITION WITHIN THE ORGANIZATION.

FORM 990, PART VI, SECTION B, LINE 15: ALL SERVICES PERFORMED ARE FROM
SHARED EMPLOYEES OF AN ADMINISTRATIVE SERVICES COMPANY. THIS COMPANY HAS AN
OVERSIGHT COMMITTEE MADE UP OF BOARD MEMBERS OF NONPROFIT ORGANIZATIONS
THAT IT SERVES. THIS OVERSIGHT COMMITTEE HAS BEEN CHARGED BY THE NONPROFIT
ORGANIZATION BOARDS TO OVERSEE PERSONNEL MATTERS INCLUDING EXECUTIVE AND
STAFF COMPENSATION. STAFF PREPARED A SALARY BENCHMARKING REPORT FOR ALL
STAFF POSITIONS THAT DESCRIBED EACH POSITION AND COMPARED THE POSITION TO A
STATE NONPROFIT ORGANIZATIONS 2010 SALARY SURVEY. TOP POSITIONS WERE ALSO
COMPARED TO DATA IN GUIDESTAR'S COMPENSATION REPORT RELEASED IN SEPTEMBER
2010. IN ADDITION SALARIES WERE ALSO REPORTED ON FORM 990 FOR THE LAST
THREE YEARS. THIS REPORT AND SUPPORTING DOCUMENTATION WAS REVIEWED IN
DEPTH BY THE OVERSIGHT COMMITTEE WHICH SUMMARIZED ITS REVIEW TO ALL OF THE
BOARDS.

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization DENVER AREA EDUC. TELECOMM. CONSORT.	Employer identification number 84-0943036
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION M	AKES ITS
GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO	THE PUBLIC UPON
REQUEST.	
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED LOSSES ON INVESTMENTS:	-248,184.
	

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

Part #

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

Attach to Form 990.

Open to Public Inspection

OMB No 1545-0047

Employer identification, number 84-0943036

DENVER AREA EDUC. TELECOMM. CONSORT. Name of the organization

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets		(f) Direct controlling entity
Part is ldentification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	tions (Complete if the organization a	nswered "Yes" to Form 990, I	art IV, line 34 beca	use it had one or i	nore related tax-exer	ıpt
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section st	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 512(b)(13) controlled entity?
				-		
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	s for Form 990.				Schedule R (Schedule R (Form 990) 2011

Schedule R (Form 990) 2011 DENVER AREA EDUC. TELECOMM. CONSORT.

Page 2

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Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

(a)	(a)	(0	(P)	(e)		9	(a)	€	9	6	(E
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	trolling y	Predominant income (related, unrelated, excluded from tax under sections 512-514)		Share of total income	Share of end-of-year assets	Disproportionate allocations?	Code 20 of 8	General or managing partner?	Pero owr
								1			
Part IV Identification of Related Organizations Taxable as a Corporation organizations treated as a corporation or trust during the tax year)	ganizations Taxable a poration or trust durin	s a Corpo g the tax)		mplete if the or	ganizatior	or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related	to Form 990, Pa	rt IV, line 34	because it had	one or mo	ore related
(a) Name, address, and EIN of related organization	Z c		(b) Primary activity		(C) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income		(g) Share of end-of-year assets	(h) Percentage ownership
											_
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Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				_	Yes	2
1 During the tax year, did the organization engage in any of the following transaction:	s with one or more rel	transactions with one or more related organizations listed in Parts II-IV?	in Parts II-IV?		+	
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1 9	1	
b Gift, grant, or capital contribution to related organization(s)				1b		
c Gift, grant, or capital contribution from related organization(s)		•		10		
d Loans or loan guarantees to or for related organization(s)				19		
e Loans or loan guarantees by related organization(s)				1 e		
f Sale of assets to related organization(s)				7		
g Purchase of assets from related organization(s)				19	-	
h Exchange of assets with related organization(s)				1h		
i Lease of facilities, equipment, or other assets to related organization(s)				;=		
i pasa of facilities acilinment or other assate from related organization(s)				;	···· =	
k Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			*	<u> </u>	
l Performance of services or membership or fundraising solicitations by related organization(s)	ınızatıon(s)			=	-	
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)uoi			£		
n Sharing of paid employees with related organization(s)				1n		
• Beimhilireamant naid to related organization(s) for expanses						
				10	1-	
					_	
q Other transfer of cash or property to related organization(s)				19		
_				-	\dashv	ļ
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete th	is line, including covered	relationships and transaction thresholds.		ļ	
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved			
(1)						
(2)						
(4)						
(5)						
(9)						
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Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax	(e) Are all partners sec 501(c)(3) orgs?	(f) Share of total	(g) Share of end-of-year	(h) Disproportionate allocations?	(h) (i) (j) (k) Dispropor- Gode V-UBI General or Percentage Blooste amount in box 20 menaging ownership of Schedule K-1 Pertner?	General of managin	(k) owners	tage
INDEPENDENT SPECTRUM LLC - 41-2183115, P.O. BOX 6060, BOULDER CO 80306	RDUCATION		Under Section 512-514) ROYALTIES EXCLUDED FROM	X No	1588 631	486	X X	(Form 1065)	X X X X X X X X X X X X X X X X X X X	0 ×	9,10%
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