

Form **990**

Department of the Treasury  
Internal Revenue Service

### Return of Organization Exempt From Income Tax

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

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

**2011**

Open to Public Inspection

**A For the 2011 calendar year, or tax year beginning 07/01/11, and ending 06/30/12**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <p style="text-align: center;"><b>DENVER INNER CITY PARISH, INC.</b></p> Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p><b>1212 MARIPOSA STREET</b></p> City or town, state or country, and ZIP + 4 <p><b>DENVER CO 80204</b></p>	<b>D</b> Employer identification number <p style="text-align: center;"><b>84-0525768</b></p>
	<b>F</b> Name and address of principal officer: <p><b>DAVE KLEINKOPF</b>  <b>1050 17TH ST., STE 1500</b>  <b>DENVER CO 80265</b></p>	<b>E</b> Telephone number <p style="text-align: center;"><b>303-629-0636</b></p>
	<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) <input type="checkbox"/> t (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	<b>G</b> Gross receipts \$ <b>2,253,449</b>
	<b>J</b> Website: <b>WWW.DICP.ORG</b>	<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
	<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <b>u</b>	<b>H(c)</b> Group exemption number <b>u</b> <b>L</b> Year of formation: <b>1960</b> <b>M</b> State of legal domicile: <b>CO</b>

#### Part I Summary

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <p style="text-align: center;"><b>PROVIDE COMMUNITY SERVICES TO LOW INCOME INDIVIDUALS</b></p>			
	<b>2</b> Check this box <input type="checkbox"/> <b>u</b> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>11</b>	
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>11</b>	
	<b>5</b> Total number of individuals employed in calendar year 2011 (Part V, line 2a)	<b>5</b>	<b>50</b>	
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>350</b>	
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0</b>	
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 21	<b>7b</b>	<b>0</b>	
<b>Revenue</b>		Prior Year	Current Year	
	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>1,638,276</b>	<b>1,972,126</b>	
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>328,247</b>	<b>184,787</b>	
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>3,110</b>	<b>-1,658</b>	
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>62,822</b>	<b>64,921</b>	
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>2,032,455</b>	<b>2,220,176</b>	
<b>Expenses</b>				
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>26,119</b>	<b>23,554</b>	
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>0</b>	<b>0</b>	
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>1,071,458</b>	<b>1,175,270</b>	
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>0</b>	<b>0</b>	
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>u</b> <b>192,437</b>			
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>827,895</b>	<b>1,082,138</b>	
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>1,925,472</b>	<b>2,280,962</b>	
	<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>106,983</b>	<b>-60,786</b>	
<b>Net Assets or Fund Balances</b>		Beginning of Current Year	End of Year	
	<b>20</b> Total assets (Part X, line 16)	<b>1,152,040</b>	<b>1,071,342</b>	
	<b>21</b> Total liabilities (Part X, line 26)	<b>132,691</b>	<b>112,779</b>	
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>1,019,349</b>	<b>958,563</b>	

#### Part II Signature Block

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

<b>Sign Here</b>	Signature of officer <p style="text-align: center;"><b>DONALD TODD CLOUGH</b></p> Type or print name and title	Date <p style="text-align: center;"><b>CEO/EXECUTIVE DIRECTOR</b></p>
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <p><b>STEPHEN P. HASKINS</b></p>	Preparer's signature Date Check <input type="checkbox"/> if self-employed PTIN <p><b>P00335207</b></p>
	Firm's name } <b>HASKINS &amp; ASSOCIATES, P.C.</b> <b>6855 S HAVANA ST STE 580</b> Firm's address } <b>CENTENNIAL, CO 80112-3868</b>	Firm's EIN } <b>84-1352448</b> Phone no. <b>303-779-5034</b>

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission:

PROVIDE COMMUNITY SERVICES TO LOW INCOME INDIVIDUALS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 596,899 including grants of \$ ) (Revenue \$ )

LA-ACADEMIA-A PRIVATE SCHOOL SERVING AT-RISK YOUTH-PROVIDES QUALITY CLASSROOM WORK EMPHASIS ON RESPONSIBILITY AND HIGH EXPECTATIONS. SIXTY-FIVE YOUTH WERE ENROLLED. EXPENSES INCLUDED \$49,246 OF NONCASH CONTRIBUTIONS.

4b (Code: ) (Expenses \$ 561,034 including grants of \$ 23,554 ) (Revenue \$ )

SUMMER DAY CAMP, SUMMER LUNCH PROGRAMS, SENIORS AND PROJECT RENEW - FIELD TRIPS, RECREATIONAL ACTIVITIES AND CULTURAL PROGRAMS FOR SENIORS, YOUTH AND CHILDREN AND OTHER ACTIVITIES TO BENEFIT THE COMMUNITY. THERE ARE OVER SEVEN HUNDRED AND FIFTY PARTICIPANTS IN VARIOUS PROGRAMS. EXPENSES INCLUDED \$56,432 OF NONCASH CONTRIBUTIONS.

4c (Code: ) (Expenses \$ 409,543 including grants of \$ ) (Revenue \$ )

EMERGENCY FAMILY SERVICES - THREE DAY SUPPLY OF EMERGENCY FOOD ASSISTANCE AND FOOD AND GIFT BASKETS DURING THE HOLIDAYS. APPROXIMATELY TEN THOUSAND INDIVIDUALS WERE SUPPLIED FOOD ASSISTANCE DURING THE YEAR. A FOOD BANK COLLABORATIVE PROJECT ALLOWED FOR THE STORAGE OF FOOD FOR FOUR ORGANIZATIONS. PROGRAM EXPENSES INCLUDED OVER \$318,404 IN NONCASH CONTRIBUTIONS.

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 410,197 including grants of \$ ) (Revenue \$ )

4e Total program service expenses u 1,977,673

**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	<b>X</b>	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	<b>X</b>	
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		<b>X</b>
4	<b>Section 501(c)(3) organizations.</b> 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		<b>X</b>
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		<b>X</b>
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		<b>X</b>
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		<b>X</b>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		<b>X</b>
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		<b>X</b>
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		<b>X</b>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<b>X</b>	
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		<b>X</b>
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		<b>X</b>
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		<b>X</b>
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<b>X</b>	
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		<b>X</b>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	<b>X</b>	
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		<b>X</b>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<b>X</b>
14a	Did the organization maintain an office, employees, or agents outside of the United States?		<b>X</b>
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		<b>X</b>
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		<b>X</b>
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		<b>X</b>
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 (see instructions)		<b>X</b>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	<b>X</b>	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		<b>X</b>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		<b>X</b>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>21</b> 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 1? If "Yes," complete Schedule I, Parts I and II		<b>X</b>
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	<b>X</b>	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		<b>X</b>
<b>24a</b> 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		<b>X</b>
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		<b>X</b>
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		<b>X</b>
<b>26</b> 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		<b>X</b>
<b>27</b> 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		<b>X</b>
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		<b>X</b>
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		<b>X</b>
<b>c</b> 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		<b>X</b>
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	<b>X</b>	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		<b>X</b>
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		<b>X</b>
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		<b>X</b>
<b>33</b> 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		<b>X</b>
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		<b>X</b>
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		<b>X</b>
<b>b</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		<b>X</b>
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		<b>X</b>
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		<b>X</b>
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	<b>X</b>	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

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

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]

Section A. Governing Body and Management

Table with columns for question number, description, and Yes/No responses. Includes questions 1a, 1b, 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, and 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with columns for question number, description, and Yes/No responses. Includes questions 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, and 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed u NONE
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: u DENVER INNER CITY PARISH 1212 MARIPOSA STREET DENVER CO 80204

**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.

Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DAVID KLEINKOPF CO-CHAIR	5.00	X		X			0	0	0	
(2) FLORA JEWELL-STERN CO-CHAIR	5.00	X		X			0	0	0	
(3) BRUCE THUMM SECRETARY	2.00	X		X			0	0	0	
(4) SHARON WORLEY TREASURER	5.00	X		X			0	0	0	
(5) CRAIG PENA DIRECTOR	1.00	X					0	0	0	
(6) ANDREW ROMERO DIRECTOR	2.00	X					0	0	0	
(7) JUDGE JACK SMITH DIRECTOR	6.00	X					0	0	0	
(8) H. PAUL COHEN DIRECTOR	2.00	X					0	0	0	
(9) JOY STEWART DIRECTOR	2.00	X					0	0	0	
(10) FRANK DEBICK DIRECTOR	1.00	X					0	0	0	
(11) DAVID THOMAS DIRECTOR	1.00	X					0	0	0	
(12) DONALD TODD CLOUGH CEO/EXE DIRECTOR	40.00			X			80,000	0	0	
(13)										
(14)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes sub-totals for lines 1b, 1c, and 1d.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization u 0

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total line for independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization u 0



**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	<b>81,428</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b>	<b>1,890,698</b>				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ .....		<b>684,059</b>				
	<b>h Total.</b> Add lines 1a-1f .....	<b>u</b>	<b>1,972,126</b>				
	<b>Program Service Revenue</b>	<b>2a</b> STUDENT AND PROGRAM FEES .....	Busn. Code	<b>129,934</b>	<b>129,934</b>		
<b>b</b> RENTAL INCOME .....			<b>29,064</b>	<b>29,064</b>			
<b>c</b> MISCELLANEOUS INCOME .....			<b>25,789</b>	<b>25,789</b>			
<b>d</b> .....							
<b>e</b> .....							
<b>f</b> All other program service revenue .....							
<b>g Total.</b> Add lines 2a-2f .....		<b>u</b>	<b>184,787</b>				
<b>Other Revenue</b>		<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....	<b>u</b>	<b>5,585</b>			<b>5,585</b>
	<b>4</b> Income from investment of tax-exempt bond proceeds .....	<b>u</b>					
	<b>5</b> Royalties .....	<b>u</b>					
	<b>6a</b> Gross rents .....	(i) Real	(ii) Personal				
		<b>b</b> Less: rental exps. ....					
		<b>c</b> Rental inc. or (loss) .....					
	<b>d</b> Net rental income or (loss) .....	<b>u</b>					
	<b>7a</b> Gross amount from sales of assets other than inventory .....	(i) Securities	(ii) Other				
		<b>b</b> Less: cost or other basis & sales exps. ....		<b>7,243</b>			
		<b>c</b> Gain or (loss) .....		<b>-7,243</b>			
		<b>d</b> Net gain or (loss) .....	<b>u</b>	<b>-7,243</b>	<b>-7,243</b>		
	<b>8a</b> Gross income from fundraising events (not including \$ ..... of contributions reported on line 1c). See Part IV, line 18 .....	<b>a</b>		<b>90,951</b>			
		<b>b</b> Less: direct expenses .....	<b>b</b>	<b>26,030</b>			
		<b>c</b> Net income or (loss) from fundraising events .....	<b>u</b>	<b>64,921</b>			
	<b>9a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>a</b>					
<b>b</b> Less: direct expenses .....		<b>b</b>					
<b>c</b> Net income or (loss) from gaming activities .....		<b>u</b>					
<b>10a</b> Gross sales of inventory, less returns and allowances .....	<b>a</b>						
	<b>b</b> Less: cost of goods sold .....	<b>b</b>					
	<b>c</b> Net income or (loss) from sales of inventory .....	<b>u</b>					
Miscellaneous Revenue		Busn. Code					
<b>11a</b> .....							
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> All other revenue .....						
<b>e Total.</b> Add lines 11a-11d .....	<b>u</b>						
<b>12 Total revenue.</b> See instructions. ....	<b>u</b>	<b>2,220,176</b>	<b>177,544</b>	<b>0</b>	<b>5,585</b>		

**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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	23,554	23,554		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	80,000	56,000	16,000	8,000
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	867,912	729,875	18,793	119,244
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	129,935	103,966	12,818	13,151
10 Payroll taxes	97,423	77,951	9,611	9,861
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	8,000		8,000	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	50,767	49,295	1,073	399
12 Advertising and promotion				
13 Office expenses	78,993	47,313	9,933	21,747
14 Information technology	13,892	11,114	1,389	1,389
15 Royalties				
16 Occupancy	204,852	202,108	1,829	915
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	48,800	44,701	3,828	271
23 Insurance	18,454	17,339	551	564
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.)				
a <b>FOOD AND RELATED SUPPLIES</b>	339,768	339,443	325	
b <b>PROGRAM SUPPLIES</b>	177,029	177,029		
c <b>FIELD TRIPS &amp; ACTIVITIES</b>	52,017	52,017		
d <b>OTHER EXPENSES</b>	45,696	13,188	15,612	16,896
e All other expenses	43,870	32,780	11,090	
25 Total functional expenses. Add lines 1 through 24e	2,280,962	1,977,673	110,852	192,437
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	1	Cash—non-interest bearing	38,589	1	17,850
	2	Savings and temporary cash investments	80,733	2	3,294
	3	Pledges and grants receivable, net	36,111	3	100,000
	4	Accounts receivable, net	9,397	4	9,045
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	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		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1,656,477		
	10b	Less: accumulated depreciation	983,289	10c	673,188
	11	Investments—publicly traded securities	286,954	11	215,276
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	52,689
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	1,152,040	16	1,071,342	
<b>Liabilities</b>	17	Accounts payable and accrued expenses	77,227	17	94,586
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	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	55,464	25	18,193
	26	<b>Total liabilities.</b> Add lines 17 through 25	132,691	26	112,779
	<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
27		Unrestricted net assets	414,385	27	591,598
28		Temporarily restricted net assets	604,964	28	366,965
29		Permanently restricted net assets		29	
<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>					
30		Capital stock or trust principal, or current funds		30	
31		Paid-in or capital surplus, or land, building, or equipment fund		31	
32		Retained earnings, endowment, accumulated income, or other funds		32	
33	<b>Total net assets or fund balances</b>	1,019,349	33	958,563	
34	<b>Total liabilities and net assets/fund balances</b>	1,152,040	34	1,071,342	

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,220,176
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,280,962
3	Revenue less expenses. Subtract line 2 from line 1	3	-60,786
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,019,349
5	Other changes in net assets or fund balances (explain in Schedule O)	5	
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	958,563

**Part XII Financial Statements and Reporting**

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
2d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

Name of the organization

DENVER INNER CITY PARISH, INC.

Employer identification number

84-0525768

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

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

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
a Type I b Type II c Type III—Functionally integrated d Type III—Other
e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
(ii) A family member of a person described in (i) above?
(iii) A 35% controlled entity of a person described in (i) or (ii) above?

Table with 2 columns: Yes, No. Rows: 11g(i), 11g(ii), 11g(iii)

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

Table with 7 main columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization in col. (i) listed in your governing document?, (v) Did you notify the organization in col. (i) of your support?, (vi) Is the organization in col. (i) organized in the U.S., (vii) Amount of support. Sub-columns for Yes/No for (iv) and (vi).

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

Schedule A (Form 990 or 990-EZ) 2011

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,040,945	1,059,169	1,274,045	1,638,276	1,972,126	6,984,561
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3	1,040,945	1,059,169	1,274,045	1,638,276	1,972,126	6,984,561
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,662,649
<b>6</b> Public support. Subtract line 5 from line 4						5,321,912

**Section B. Total Support**

Calendar year (or fiscal year beginning in) <b>u</b>	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>7</b> Amounts from line 4	1,040,945	1,059,169	1,274,045	1,638,276	1,972,126	6,984,561
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,194	205	9	3,110	5,585	10,103
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>11 Total support.</b> Add lines 7 through 10						6,994,664

**12** Gross receipts from related activities, etc. (see instructions) 12 275,738

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

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	76.09 %
<b>15</b> Public support percentage from 2010 Schedule A, Part II, line 14	<b>15</b>	83.10 %

**16a 33 1/3% support test—2011.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

**b 33 1/3% support test—2010.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

**17a 10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

**b 10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

**18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Section A. Public Support

Table with 7 columns: (a) 2007, (b) 2008, (c) 2009, (d) 2010, (e) 2011, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business under section 513; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2007, (b) 2008, (c) 2009, (d) 2010, (e) 2011, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.)

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

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, Value, Percentage. Row 15: Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2010 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, Value, Percentage. Row 17: Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2010 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

u 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. u Attach to Form 990. u See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

Employer identification number

DENVER INNER CITY PARISH, INC.

84-0525768

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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?, 6 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?

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 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, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year u, 4 Number of states where property subject to conservation easement is located u, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year u, 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year u \$, 8 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)?, 9 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 conservation easements.

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.

Table with 2 columns: u \$. Rows include: 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, (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: a Revenues included in Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.



**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other .....
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIV and complete the following table:
- |  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance .....             | <b>1c</b> |
| <b>d</b> Additions during the year .....     | <b>1d</b> |
| <b>e</b> Distributions during the year ..... | <b>1e</b> |
| <b>f</b> Ending balance .....                | <b>1f</b> |
- 2a** Did the organization include an amount on Form 990, Part X, line 21?  Yes  No
- b** If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance .....					
<b>b</b> Contributions .....					
<b>c</b> Net investment earnings, gains, and losses .....					
<b>d</b> Grants or scholarships .....					
<b>e</b> Other expenditures for facilities and programs .....					
<b>f</b> Administrative expenses .....					
<b>g</b> End of year balance .....					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment **u** .....
  - b** Permanent endowment **u** .....
  - c** Temporarily restricted endowment **u** .....
- The percentages in lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes           | No |
|--|---------------|----|
| <b>(i)</b> unrelated organizations ..... | <b>3a(i)</b>  |    |
| <b>(ii)</b> related organizations .....  | <b>3a(ii)</b> |    |
- b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Yes  No

**4** Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land .....		<b>16,000</b>		<b>16,000</b>
<b>b</b> Buildings .....		<b>1,376,193</b>	<b>856,505</b>	<b>519,688</b>
<b>c</b> Leasehold improvements .....		<b>146,895</b>	<b>62,049</b>	<b>84,846</b>
<b>d</b> Equipment .....		<b>117,389</b>	<b>64,735</b>	<b>52,654</b>
<b>e</b> Other .....				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) .....			<b>u</b>	<b>673,188</b>

**Part VII Investments—Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.)	<b>u</b>	

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.)	<b>u</b>	

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	<b>u</b>

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) <b>PAYROLL TAXES PAYABLE</b>	<b>15,666</b>	
(3) <b>SECURITY DEPOSITS</b>	<b>2,527</b>	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	<b>u</b> <b>18,193</b>	

2. 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 FIN 48 (ASC 740).

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

<b>1</b>	Total revenue (Form 990, Part VIII, column (A), line 12)	<b>1</b>	<b>2,220,176</b>
<b>2</b>	Total expenses (Form 990, Part IX, column (A), line 25)	<b>2</b>	<b>2,280,962</b>
<b>3</b>	Excess or (deficit) for the year. Subtract line 2 from line 1	<b>3</b>	<b>-60,786</b>
<b>4</b>	Net unrealized gains (losses) on investments	<b>4</b>	
<b>5</b>	Donated services and use of facilities	<b>5</b>	
<b>6</b>	Investment expenses	<b>6</b>	
<b>7</b>	Prior period adjustments	<b>7</b>	
<b>8</b>	Other (Describe in Part XIV.)	<b>8</b>	
<b>9</b>	Total adjustments (net). Add lines 4 through 8	<b>9</b>	
<b>10</b>	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	<b>10</b>	<b>-60,786</b>

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	<b>2,367,176</b>
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains on investments	<b>2a</b>	
<b>b</b>	Donated services and use of facilities	<b>2b</b>	<b>147,000</b>
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	<b>147,000</b>
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	<b>2,220,176</b>
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIV.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	<b>2,220,176</b>

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	<b>2,427,962</b>
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	<b>147,000</b>
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	<b>147,000</b>
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	<b>2,280,962</b>
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIV.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	<b>2,280,962</b>

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

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**SCHEDULE G  
(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding  
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
**u** Attach to Form 990 or Form 990-EZ. **u** See separate instructions.

OMB No. 1545-0047

**2011**

Open To Public  
Inspection

Name of the organization

**DENVER INNER CITY PARISH, INC.**

Employer identification number

**84-0525768**

**Part I Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a**  Mail solicitations
- b**  Internet and email solicitations
- c**  Phone solicitations
- d**  In-person solicitations
- e**  Solicitation of non-government grants
- f**  Solicitation of government grants
- g**  Special fundraising events

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
<b>Total</b>							

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>LA ACADEMIA AUC</u>	<u>MISC PROGRAM SP</u>	<u>NONE</u>	(add col. (a) through col. (c))
		(event type)	(event type)	(total number)	(col. (c))
Revenue	1 Gross receipts	81,133	9,818		90,951
	2 Less: Charitable contributions				
	3 Gross income (line 1 minus line 2)	81,133	9,818		90,951
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	17,498	8,532		26,030
	10 Direct expense summary. Add lines 4 through 9 in column (d)				26,030
11 Net income summary. Combine line 3, column (d), and line 10				64,921	

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

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

9 Enter the state(s) in which the organization operates gaming activities: \_\_\_\_\_  
 a Is the organization licensed to operate gaming activities in each of these states? 9a  Yes  No

b If "No," explain: \_\_\_\_\_  
 \_\_\_\_\_

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

b If "Yes," explain: \_\_\_\_\_  
 \_\_\_\_\_

11 Does the organization operate gaming activities with nonmembers?  Yes  No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No

13 Indicate the percentage of gaming activity operated in:

a The organization's facility	<b>13a</b>	%
b An outside facility	<b>13b</b>	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name **u** .....

Address **u** .....

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No

b If "Yes," enter the amount of gaming revenue received by the organization **u** \$ ..... and the amount of gaming revenue retained by the third party **u** \$ .....

c If "Yes," enter name and address of the third party:

Name **u** .....

Address **u** .....

16 Gaming manager information:

Name **u** .....

Gaming manager compensation **u** \$ .....

Description of services provided **u** .....

Director/officer       Employee       Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year **u** \$ .....

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

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**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

**u** Attach to Form 990.

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Name of the organization

**DENVER INNER CITY PARISH, INC.**

Employer identification number

**84-0525768**

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed **u**

1	(a) Name and address of organization or government	(b) 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
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u** \_\_\_\_\_
- 3 Enter total number of other organizations listed in the line 1 table **u** \_\_\_\_\_



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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 <b>DIRECT SERVICES</b>	<b>675</b>	<b>23,554</b>			
2					
3					
4					
5					
6					
7					

**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

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**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2011**

Department of the Treasury  
Internal Revenue Service

**U** Complete if the organizations answered "Yes" on Form  
990, Part IV, lines 29 or 30.  
**U** Attach to Form 990.

**Open To Public  
Inspection**

Name of the organization

**DENVER INNER CITY PARISH, INC.**

Employer identification number

**84-0525768**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	<b>X</b>	<b>3</b>	<b>220,307</b>	<b>MARKET VALUE</b>
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other <b>u</b> ( <b>FOOD</b> )	<b>X</b>	<b>302</b>	<b>304,579</b>	<b>WHOLESALE</b>
26 Other <b>u</b> ( <b>PROGRAM SUPPLIE</b> )	<b>X</b>	<b>380</b>	<b>159,173</b>	<b>THRIFT SHOP VALUE</b>
27 Other <b>u</b> ( )				
28 Other <b>u</b> ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		<b>X</b>
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?		<b>X</b>
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		<b>X</b>
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		



**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No. 1545-0047

**2011**

Open to Public  
Inspection

**DENVER INNER CITY PARISH, INC.**

Employer identification number

**84-0525768**

**FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT**

**OTHER PROGRAMS:**

**COLLEGEVIEW - PROVIDES PROGRAMS AT THE COLLEGE VIEW RECREATION CENTER.**

**APPROXIMATELY 4,000 INDIVIDUALS PARTICIPATED IN THE ACTIVITIES.**

**SPIRITUAL DEVELOPMENT INCLUDES PASTORAL CARE, COMMUNITY WORSHIP, BIBLE  
STUDY, PRISON MINISTRY AND VACATION BIBLE SCHOOL.**

**FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990**

**FORM 990 REVIEWED BY THE FINANCE COMMITTEE BEFORE THE FORM IS FILED.**

**FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL**

**EXECUTIVE DIRECTOR'S COMPENSATION IS REVIEWED AND APPROVED BY THE BOARD OF  
DIRECTORS.**

**FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION**

**GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS ARE AVAILABLE UPON  
REQUEST**

## Federal Asset Report

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
<b>Other Depreciation:</b>									
1	1995 FORD CLUB WAGON	12/20/01	9,180			9,180	5 MO S/L	9,180	0
2	1995 FORD CLUB WAGON	2/22/02	9,180			9,180	5 MO S/L	9,180	0
3	VEHICLE	6/30/08	6,793			6,793	5 MO S/L	4,077	0
	Sold/Scrapped: 7/01/11								
4	MINI BUS	8/07/08	7,200			7,200	5 MO S/L	4,200	1,440
5	TRUCK	8/20/08	2,000			2,000	5 MO S/L	1,133	400
6	BUILDING	11/01/63	43,221			43,221	40 MO200DB	43,221	0
7	BUILDING IMPROVEMENTS CDA	1/01/84	87,922			87,922	20 MO S/L	85,723	0
8	BUILDING IMPROVEMENTS CDA	1/01/85	36,738			36,738	20 MO S/L	35,821	0
9	BUILDING IMPROVEMENTS CDA	1/01/87	97,532			97,532	20 MO S/L	94,285	0
10	BUILDING IMPROVEMENTS	1/01/81	176,436			176,436	20 MO S/L	176,436	0
11	BUILDING IMPROVEMENTS	1/01/82	170,256			170,256	20 MO S/L	170,256	0
12	BUILDING IMPROVEMENTS	1/01/83	41,484			41,484	20 MO S/L	41,484	0
13	BUILDING IMPROVEMENTS	1/01/84	18,333			18,333	20 MO S/L	17,877	0
14	BUILDING IMPROVEMENTS	1/01/85	4,000			4,000	20 MO S/L	3,800	0
15	BUILDING IMPROVEMENTS	1/01/87	3,388			3,388	20 MO S/L	3,280	0
16	BUILDING IMPROVEMENTS	1/01/97	3,063			3,063	20 MO S/L	2,155	153
17	ROOF	2/01/98	18,644			18,644	20 MO S/L	12,505	932
18	LEASEHOLD IMPROVE 1212	6/30/04	31,998			31,998	20 MO S/L	12,000	1,600
19	LEASEHOLD IMPROVE 1212	12/31/04	7,829			7,829	20 MO S/L	2,542	391
20	LEASEHOLD IMPROVE 1212	6/30/05	92,446			92,446	20 MO S/L	27,732	4,622
21	LEASEHOLD IMPROV 910	6/30/05	4,385			4,385	20 MO S/L	1,314	219
22	LEASEHOLD IMPROV 910	6/30/06	336,730			336,730	20 MO S/L	84,185	16,837
23	LEASEHOLD IMPROV 910	6/30/06	71,350			71,350	20 MO S/L	17,840	3,568
24	BUILDING IMPROV 910	9/01/06	1,157			1,157	20 MO S/L	280	58
25	MASONARY WINDOWS 910 MTCH	6/30/07	62,384			62,384	30 MO S/L	8,316	2,079
26	MASONARY WINDOWS HIST DEN	6/30/07	187,155			187,155	30 MO S/L	24,956	6,239
27	BUILDING IMPROVEMENTS 910	10/17/07	8,450			8,450	20 MO S/L	1,551	423
28	BUILDING IMPROVEMENTS 910	6/30/08	3,565			3,565	20 MO S/L	534	178
29	IMPROVEMENTS 1212	6/30/10	1,622			1,622	20 MO S/L	81	81
30	LAND	11/01/63	16,000			16,000	0 -- Land	0	0
31	EQUIPMENT	1/01/78	1,242			1,242	5 MO S/L	1,242	0
	Sold/Scrapped: 7/01/11								
32	FILING CABINET	1/01/80	200			200	5 MO S/L	200	0
	Sold/Scrapped: 7/01/11								
33	FILING CABINET	6/01/80	200			200	5 MO S/L	200	0
	Sold/Scrapped: 7/01/11								
34	OFFICE FURNITURE	6/01/80	200			200	5 MO S/L	200	0
	Sold/Scrapped: 7/01/11								
35	STOVE	6/01/80	790			790	5 MO S/L	790	0
	Sold/Scrapped: 7/01/11								
36	FREEZER	6/01/80	100			100	5 MO S/L	100	0
	Sold/Scrapped: 7/01/11								
37	DESK AND CHAIR	6/01/80	298			298	5 MO S/L	298	0
	Sold/Scrapped: 7/01/11								
38	TELEPHONE	2/01/82	2,810			2,810	5 MO S/L	2,810	0
	Sold/Scrapped: 7/01/11								
39	TELEPHONE	1/01/84	312			312	5 MO S/L	312	0
	Sold/Scrapped: 7/01/11								
40	REFRIGERATOR	6/01/85	470			470	5 MO S/L	470	0
	Sold/Scrapped: 7/01/11								
41	FAX MACHINE	2/15/94	500			500	5 MO S/L	500	0
	Sold/Scrapped: 7/01/11								
42	2 COMPUTERS	6/15/94	500			500	5 MO S/L	500	0
	Sold/Scrapped: 7/01/11								
43	COPIER	10/15/94	1,500			1,500	5 MO S/L	1,500	0
	Sold/Scrapped: 7/01/11								
44	PRINTER	10/15/94	200			200	5 MO S/L	200	0
	Sold/Scrapped: 7/01/11								
45	DISHWASHER	10/27/94	350			350	5 MO S/L	350	0
	Sold/Scrapped: 7/01/11								
46	REFRIGERATOR	12/30/94	500			500	5 MO S/L	500	0
	Sold/Scrapped: 7/01/11								
47	COMPUTER EQUIPMENT	12/30/94	1,200			1,200	5 MO S/L	1,200	0
	Sold/Scrapped: 7/01/11								
48	LASER PRINTER	1/31/95	500			500	5 MO S/L	500	0
	Sold/Scrapped: 7/01/11								
49	WALK IN COOLER	7/28/95	4,297			4,297	5 MO S/L	4,297	0

## Federal Asset Report

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
50	COMPUTER LAB	8/15/95	22,067				22,067	5 MO S/L	17,652	0
	Sold/Scrapped: 7/01/11									
51	FREEZER	10/15/96	392				392	5 MO S/L	392	0
	Sold/Scrapped: 7/01/11									
52	100 CHAIRS	6/01/98	300				300	5 MO S/L	300	0
53	GLASS DOOR REFRIGERATOR	7/01/98	275				275	5 MO S/L	275	0
	Sold/Scrapped: 7/01/11									
54	COMPUTER	4/13/00	1,025				1,025	5 MO S/L	1,025	0
	Sold/Scrapped: 7/01/11									
55	COMPUTER KELLEY	1/18/00	861				861	5 MO S/L	861	0
	Sold/Scrapped: 7/01/11									
56	AIR CONDITIONER	5/31/00	4,032				4,032	15 MO S/L	2,982	269
57	COMPUTER EQUIPMENT	6/22/00	1,789				1,789	5 MO S/L	1,789	0
	Sold/Scrapped: 7/01/11									
58	HEWLETT PACKARD PRINTER	4/21/01	1,500				1,500	5 MO S/L	1,500	0
	Sold/Scrapped: 7/01/11									
59	COMPUTER	1/08/04	1,000				1,000	5 MO S/L	1,000	0
	Sold/Scrapped: 7/01/11									
60	TELEPHONE SYSTEM	4/16/04	1,000				1,000	5 MO S/L	1,000	0
61	KITCHEN EQUIPMENT	2/04/04	2,410				2,410	7 MO S/L	2,410	0
62	KITCHEN EQUIPMENT	5/27/04	3,269				3,269	7 MO S/L	3,269	0
63	CONFERENCE CHAIRS	4/06/04	540				540	7 MO S/L	540	0
64	FURNITURE	4/30/04	130				130	7 MO S/L	130	0
65	MAC COMPUTER	5/25/04	699				699	5 MO S/L	699	0
66	WALK IN FREEZER	9/14/04	3,955				3,955	7 MO S/L	3,861	94
67	RANGE HOOD	9/30/04	528				528	7 MO S/L	507	21
68	REFRIGERATOR	12/16/04	1,750				1,750	7 MO S/L	1,625	125
69	KITCHEN EQUIPMENT	12/31/04	671				671	7 MO S/L	624	47
70	KITCHEN EQUIPMENT	6/07/05	500				500	7 MO S/L	432	68
71	COMPUTER SERVER	8/31/07	600				600	5 MO S/L	460	120
72	SOFTWARE	8/18/07	477				477	5 MO S/L	365	0
	Sold/Scrapped: 7/01/11									
73	REFRIGERATOR 1212	11/11/08	950				950	7 MO S/L	362	136
74	EQUIPMENT	12/09/08	800				800	7 MO S/L	295	114
75	SMARTBOARDS	1/21/09	24,445				24,445	7 MO S/L	8,439	3,492
76	LAPTOP	7/01/09	715				715	5 MO S/L	286	143
77	2 TOSHIBA LAPTOPS	8/27/09	1,000				1,000	5 MO S/L	367	200
78	HP MINI NETBOOK	8/27/09	300				300	5 MO S/L	110	60
79	3 DELL NOTEBOOKS	2/02/10	1,500				1,500	5 MO S/L	425	300
80	2 TOSHIBA LAPTOPS	2/11/10	1,760				1,760	5 MO S/L	499	352
81	SD2075 SHARP COPIER	6/29/11	4,500				4,500	5 MO S/L	0	900
82	SD206 SHARP COPIER	6/29/11	4,500				4,500	5 MO S/L	0	900
83	CARPET	2/03/04	5,000				5,000	7 MO S/L	5,000	0
84	PAINTING	2/18/04	8,000				8,000	7 MO S/L	8,000	0
85	WAREHOUSE FREEZER/REFRIG	12/21/11	20,600				20,600	7 MO S/L	0	1,471
86	WAREHOUSE FORKLIFT	8/29/11	5,975				5,975	7 MO S/L	0	711
87	WAREHOUSE TRAILER	5/11/12	2,400				2,400	7 MO S/L	0	57
	<b>Total Other Depreciation</b>		<u>1,708,825</u>				<u>1,708,825</u>		<u>979,594</u>	<u>48,800</u>
	<b>Total ACRS and Other Depreciation</b>		<u>1,708,825</u>				<u>1,708,825</u>		<u>979,594</u>	<u>48,800</u>
	<b>Grand Totals</b>		1,708,825				1,708,825		979,594	48,800
	<b>Less: Dispositions and Transfers</b>		52,348				52,348		45,105	0
	<b>Less: Start-up/Org Expense</b>		0				0		0	0
	<b>Net Grand Totals</b>		<u>1,656,477</u>				<u>1,656,477</u>		<u>934,489</u>	<u>48,800</u>

Asset	Description	Date In Service	Cost	Tax	AMT
<b>Other Depreciation:</b>					
1	1995 FORD CLUB WAGON	12/20/01	9,180	0	0
2	1995 FORD CLUB WAGON	2/22/02	9,180	0	0
4	MINI BUS	8/07/08	7,200	1,440	0
5	TRUCK	8/20/08	2,000	400	0
6	BUILDING	11/01/63	43,221	0	0
7	BUILDING IMPROVEMENTS CDA	1/01/84	87,922	2,199	0
8	BUILDING IMPROVEMENTS CDA	1/01/85	36,738	917	0
9	BUILDING IMPROVEMENTS CDA	1/01/87	97,532	3,247	0
10	BUILDING IMPROVEMENTS	1/01/81	176,436	0	0
11	BUILDING IMPROVEMENTS	1/01/82	170,256	0	0
12	BUILDING IMPROVEMENTS	1/01/83	41,484	0	0
13	BUILDING IMPROVEMENTS	1/01/84	18,333	456	0
14	BUILDING IMPROVEMENTS	1/01/85	4,000	200	0
15	BUILDING IMPROVEMENTS	1/01/87	3,388	108	0
16	BUILDING IMPROVEMENTS	1/01/97	3,063	153	0
17	ROOF	2/01/98	18,644	932	0
18	LEASEHOLD IMPROVE 1212	6/30/04	31,998	1,600	0
19	LEASEHOLD IMPROVE 1212	12/31/04	7,829	392	0
20	LEASEHOLD IMPROVE 1212	6/30/05	92,446	4,623	0
21	LEASEHOLD IMPROV 910	6/30/05	4,385	220	0
22	LEASEHOLD IMPROV 910	6/30/06	336,730	16,836	0
23	LEASEHOLD IMPROV 910	6/30/06	71,350	3,567	0
24	BUILDING IMPROV 910	9/01/06	1,157	58	0
25	MASONARY WINDOWS 910 MTCH	6/30/07	62,384	2,080	0
26	MASONARY WINDOWS HIST DEN	6/30/07	187,155	6,238	0
27	BUILDING IMPROVEMENTS 910	10/17/07	8,450	422	0
28	BUILDING IMPROVEMENTS 910	6/30/08	3,565	179	0
29	IMPROVEMENTS 1212	6/30/10	1,622	81	0
30	LAND	11/01/63	16,000	0	0
52	100 CHAIRS	6/01/98	300	0	0
56	AIR CONDITIONER	5/31/00	4,032	269	0
60	TELEPHONE SYSTEM	4/16/04	1,000	0	0
61	KITCHEN EQUIPMENT	2/04/04	2,410	0	0
62	KITCHEN EQUIPMENT	5/27/04	3,269	0	0
63	CONFERENCE CHAIRS	4/06/04	540	0	0
64	FURNITURE	4/30/04	130	0	0
65	MAC COMPUTER	5/25/04	699	0	0
66	WALK IN FREEZER	9/14/04	3,955	0	0
67	RANGE HOOD	9/30/04	528	0	0
68	REFRIGERATOR	12/16/04	1,750	0	0
69	KITCHEN EQUIPMENT	12/31/04	671	0	0
70	KITCHEN EQUIPMENT	6/07/05	500	0	0
71	COMPUTER SERVER	8/31/07	600	20	0
73	REFRIGERATOR 1212	11/11/08	950	135	0
74	EQUIPMENT	12/09/08	800	115	0
75	SMARTBOARDS	1/21/09	24,445	3,492	0
76	LAPTOP	7/01/09	715	143	0
77	2 TOSHIBA LAPTOPS	8/27/09	1,000	200	0
78	HP MINI NETBOOK	8/27/09	300	60	0
79	3 DELL NOTEBOOKS	2/02/10	1,500	300	0
80	2 TOSHIBA LAPTOPS	2/11/10	1,760	352	0
81	SD2075 SHARP COPIER	6/29/11	4,500	900	0
82	SD206 SHARP COPIER	6/29/11	4,500	900	0
83	CARPET	2/03/04	5,000	0	0
84	PAINTING	2/18/04	8,000	0	0
85	WAREHOUSE FREEZER/REFRIG	12/21/11	20,600	2,943	2,943
86	WAREHOUSE FORKLIFT	8/29/11	5,975	854	854
87	WAREHOUSE TRAILER	5/11/12	2,400	343	343
<b>Total Other Depreciation</b>			<u>1,656,477</u>	<u>57,374</u>	<u>4,140</u>
<b>Total ACRS and Other Depreciation</b>			<u><u>1,656,477</u></u>	<u><u>57,374</u></u>	<u><u>4,140</u></u>

DEN768 DENVER INNER CITY PARISH, INC.

84-0525768

**Future Depreciation Report**    **FYE: 6/30/13**

FYE: 6/30/2012

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<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
	<b>Grand Totals</b>		<u>1,656,477</u>	<u>57,374</u>	<u>4,140</u>