

# Form 1023 Checklist

(Revised June 2006)

## Application for Recognition of Exemption under Section 501(c)(3) of the Internal Revenue Code

**Note.** Retain a copy of the completed Form 1023 in your permanent records. Refer to the General Instructions regarding Public Inspection of approved applications.

**Check each box to finish your application (Form 1023). Send this completed Checklist with your filled-in application. If you have not answered all the items below, your application may be returned to you as incomplete.**

- Assemble the application and materials in this order:
- Form 1023 Checklist
  - Form 2848, *Power of Attorney and Declaration of Representative* (if filing)
  - Form 8821, *Tax Information Authorization* (if filing)
  - Expedite request (if requesting)
  - Application (Form 1023 and Schedules A through H, as required)
  - Articles of organization
  - Amendments to articles of organization in chronological order
  - Bylaws or other rules of operation and amendments
  - Documentation of nondiscriminatory policy for schools, as required by Schedule B
  - Form 5768, *Election/Revocation of Election by an Eligible Section 501(c)(3) Organization To Make Expenditures To Influence Legislation* (if filing)
  - All other attachments, including explanations, financial data, and printed materials or publications. Label each page with name and EIN.
- User fee payment placed in envelope on top of checklist. DO NOT STAPLE or otherwise attach your check or money order to your application. Instead, just place it in the envelope.
- Employer Identification Number (EIN)
- Completed Parts I through XI of the application, including any requested information and any required Schedules A through H.
- You must provide specific details about your past, present, and planned activities.
  - Generalizations or failure to answer questions in the Form 1023 application will prevent us from recognizing you as tax exempt.
  - Describe your purposes and proposed activities in specific easily understood terms.
  - Financial information should correspond with proposed activities.
- Schedules. Submit only those schedules that apply to you and check either "Yes" or "No" below.
- |            |     |     |    |          |            |     |          |    |          |
|------------|-----|-----|----|----------|------------|-----|----------|----|----------|
| Schedule A | Yes | ___ | No | <u>x</u> | Schedule E | Yes | <u>x</u> | No | ___      |
| Schedule B | Yes | ___ | No | <u>x</u> | Schedule F | Yes | ___      | No | <u>x</u> |
| Schedule C | Yes | ___ | No | <u>x</u> | Schedule G | Yes | ___      | No | <u>x</u> |
| Schedule D | Yes | ___ | No | <u>x</u> | Schedule H | Yes | ___      | No | <u>x</u> |

- An exact copy of your complete articles of organization (creating document). Absence of the proper purpose and dissolution clauses is the number one reason for delays in the issuance of determination letters.
- Location of Purpose Clause from Part III, line 1 (Page, Article and Paragraph Number) p.1 Art. III A
  - Location of Dissolution Clause from Part III, line 2b or 2c (Page, Article and Paragraph Number) or by operation of state law p.3 Art. V H
- Signature of an officer, director, trustee, or other official who is authorized to sign the application.
- Signature at Part XI of Form 1023.
- Your name on the application must be the same as your legal name as it appears in your articles of organization.

Send completed Form 1023, user fee payment, and all other required information, to:

Internal Revenue Service  
P.O. Box 192  
Covington, KY 41012-0192

If you are using express mail or a delivery service, send Form 1023, user fee payment, and attachments to:

Internal Revenue Service  
201 West Rivercenter Blvd.  
Attn: Extracting Stop 312  
Covington, KY 41011

# Power of Attorney and Declaration of Representative

OMB No. 1545-0150  
**For IRS Use Only**  
 Received by: \_\_\_\_\_  
 Name \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 Function \_\_\_\_\_  
 Date \_\_\_\_\_

▶ Type or print. ▶ See the separate instructions.

**Part 1** **Power of Attorney**  
**Caution:** Form 2848 will not be honored for any purpose other than representation before the IRS.

**1 Taxpayer information.** Taxpayer(s) must sign and date this form on page 2, line 9.

Taxpayer name(s) and address  Boulder Area Trails Coalition 1705 14th Street, PMB 201 Boulder, CO 80302	Social security number(s)  _____  Daytime telephone number (303) 485-2162	Employer identification number 84-1402239  Plan number (if applicable)
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hereby appoint(s) the following representative(s) as attorney(s)-in-fact:

**2 Representative(s) must sign and date this form on page 2, Part II.**

Name and address Rick G. Doty, CPA 4999 Pearl East Circle, Suite 300 Boulder, Co 80601	CAF No. 800590631R Telephone No. 3034400399 Fax No. 3034405073  Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> FAX No. <input type="checkbox"/>
Name and address	CAF No. _____ Telephone No. _____ Fax No. _____  Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> FAX No. <input type="checkbox"/>
Name and address	CAF No. _____ Telephone No. _____ Fax No. _____  Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> FAX No. <input type="checkbox"/>

to represent the taxpayer(s) before the Internal Revenue Service for the following tax matters:

3 Tax matters	Tax Form Number (1040, 941, 720, etc.)	Year(s) or Period(s) (see the instructions for line 3)
Type of Tax (Income, Employment, Excise, etc.) or Civil Penalty (See the instructions for line 3)		
Exempt Organization	1023	2006

**4 Specific use not recorded on Centralized Authorization File (CAF).** If the power of attorney is for a specific use not recorded on CAF, check this box. See the instructions for Line 4. Specific uses not recorded on CAF.

**5 Acts authorized.** The representatives are authorized to receive and inspect confidential tax information and to perform any and all acts that I (we) can perform with respect to the tax matters described on line 3, for example, the authority to sign any agreements, consents, or other documents. The authority does not include the power to receive refund checks (see line 6 below), the power to substitute another representative, the power to sign certain returns, or the power to execute a request for disclosure of tax returns or return information to a third party. See the line 5 instructions for more information.

**Exceptions.** An unenrolled return preparer cannot sign any document for a taxpayer and may only represent taxpayers in limited situations. See **Unenrolled Return Preparer** on page 2 of the instructions. An enrolled actuary may only represent taxpayers to the extent provided in section 10.3(d) of Circular 230. See the line 5 instructions for restrictions on tax matters partners.

List any specific additions or deletions to the acts otherwise authorized in this power of attorney: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**6 Receipt of refund checks.** If you want to authorize a representative named on line 2 to receive, **BUT NOT TO ENDORSE OR CASH**, refund checks, initial here \_\_\_\_\_ and list the name of that representative below.

Name of representative to receive refund check(s) ▶ \_\_\_\_\_

**7 Notices and communications.** Original notices and other written communications will be sent to you and a copy to the first representative listed on line 2.

- a If you also want the second representative listed to receive a copy of notices and communications, check this box
- b If you do not want any notices or communications sent to your representative(s), check this box

**8 Retention/revocation of prior power(s) of attorney.** The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the Internal Revenue Service for the same tax matters and years or periods covered by this document. If you do not want to revoke a prior power of attorney, check here.   
**YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT.**

**9 Signature of taxpayer(s).** If a tax matter concerns a joint return, both husband and wife must sign if joint representation is requested, otherwise, see the instructions. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, or trustee on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of the taxpayer.

▶ **IF NOT SIGNED AND DATED, THIS POWER OF ATTORNEY WILL BE RETURNED.**

X  
 -----  
 Signature Date Title (if applicable)

X  
 -----  
 Print Name PIN Number Print name of taxpayer from line 1 if other than individual

-----  
 Signature Date Title (if applicable)

-----  
 Print Name PIN Number

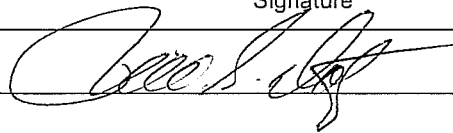
**Part II Declaration of Representative**

**Caution:** *Students with a special order to represent taxpayers in Qualified Low Income Taxpayer Clinics or the Student Tax Clinic Program, see the instructions for Part II.*

Under penalties of perjury, I declare that:

- I am not currently under suspension or disbarment from practice before the Internal Revenue Service;
- I am aware of regulations contained in Treasury Department Circular No. 230 (31 CFR, Part 10), as amended, concerning the practice of attorneys, certified public accountants, enrolled agents, enrolled actuaries, and others;
- I am authorized to represent the taxpayer(s) identified in Part I for the tax matter(s) specified there; and
- I am one of the following:
  - a Attorney - a member in good standing of the bar of the highest court of the jurisdiction shown below.
  - b Certified Public Accountant - duly qualified to practice as a certified public accountant in the jurisdiction shown below.
  - c Enrolled Agent - enrolled as an agent under the requirements of Treasury Department Circular No. 230.
  - d Officer - a bona fide officer of the taxpayer's organization.
  - e Full-Time Employee - a full-time employee of the taxpayer.
  - f Family Member - a member of the taxpayer's immediate family (i.e., spouse, parent, child, brother, or sister).
  - g Enrolled Actuary - enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Service is limited by section 10.3(d) of Treasury Department Circular No. 230).
  - h Unenrolled Return Preparer - the authority to practice before the Internal Revenue Service is limited by Treasury Department Circular No. 230, section 10.7(c)(1)(viii). You must have prepared the return in question and the return must be under examination by the IRS. See **Unenrolled Return Preparer** on page 2 of the instructions.

▶ **IF THIS DECLARATION OF REPRESENTATIVE IS NOT SIGNED AND DATED, THE POWER OF ATTORNEY WILL BE RETURNED.** See the Part II instructions.

Designation - Insert above letter (a-h)	Jurisdiction (state) or identification	Signature	Date
b	Colorado		7/28/07

**Application for Recognition of Exemption  
 Under Section 501(c)(3) of the Internal Revenue Code**

*Note: If exempt status is approved, this application will be open for public inspection.*

Use the instructions to complete this application and for a definition of all **bold** items. For additional help, call IRS Exempt Organizations Customer Account Services toll-free at 1-877-829-5500. Visit our website at **www.irs.gov** for forms and publications. If the required information and documents are not submitted with payment of the appropriate user fee, the application may be returned to you.

Attach additional sheets to this application if you need more space to answer fully. Put your name and EIN on each sheet and identify each answer by Part and line number. Complete Parts I - XI of Form 1023 and submit only those Schedules (A through H) that apply to you.

**Part I Identification of Applicant**

<b>1</b> Full name of organization (exactly as it appears in your <b>organizing document</b> )		<b>2</b> c/o Name (if applicable)	
Boulder Area Trails Coalition		Eric Vogelsberg	
<b>3</b> <b>Mailing address</b> (Number and street) (see instructions)		Room/Suite	<b>4</b> Employer Identification Number (EIN)
1705 14th Street		PMB 201	84-1402239
City or town, state or country, and ZIP + 4		<b>5</b> Month the annual accounting period ends (01-12)	
Boulder, CO. 80302		12	
<b>6</b> Primary contact (officer, director, trustee, or <b>authorized representative</b> )		<b>b</b> Phone: (303) 494-8586	
<b>a</b> Name: Eric Vogelsberg		<b>c</b> Fax: (optional)	
<b>7</b> Are you represented by an authorized representative, such as an attorney or accountant? If "Yes," provide the authorized representative's name, and the name and address of the authorized representative's firm. Include a completed Form 2848, <i>Power of Attorney and Declaration of Representative</i> , with your application if you would like us to communicate with your representative.		<input checked="" type="checkbox"/>	<b>Yes</b> <input type="checkbox"/> <b>No</b>
<b>8</b> Was a person who is not one of your officers, directors, trustees, employees, or an authorized representative listed in line 7, paid, or promised payment, to help plan, manage, or advise you about the structure or activities of your organization, or about your financial or tax matters? If "Yes," provide the person's name, the name and address of the person's firm, the amounts paid or promised to be paid, and describe that person's role.		<input type="checkbox"/>	<b>Yes</b> <input checked="" type="checkbox"/> <b>No</b>
<b>9 a</b> Organization's website: <a href="http://batco.org">http://batco.org</a>			
<b>b</b> Organization's email: (optional)			
<b>10</b> Certain organizations are not required to file an information return (Form 990 or Form 990-EZ). If you are granted tax-exemption, are you claiming to be excused from filing Form 990 or Form 990-EZ? If "Yes," explain. See the instructions for a description of organizations not required to file Form 990 or Form 990-EZ.		<input type="checkbox"/>	<b>Yes</b> <input checked="" type="checkbox"/> <b>No</b>
<b>11</b> Date incorporated if a corporation, or formed, if other than a corporation. (MM/DD/YYYY)		11 / 22 / 1996	
<b>12</b> Were you formed under the laws of a <b>foreign country</b> ? If "Yes," state the country.		<input type="checkbox"/>	<b>Yes</b> <input checked="" type="checkbox"/> <b>No</b>

**Part II Organizational Structure**

You must be a corporation (including a limited liability company), an unincorporated association, or a trust to be tax exempt. (See instructions.) **DO NOT file this form unless you can check "Yes" on lines 1, 2, 3, or 4.**

- 1 Are you a **corporation**? If "Yes," attach a copy of your articles of incorporation showing **certification of filing** with the appropriate state agency. Include copies of any amendments to your articles and be sure they also show state filing certification.  Yes  No
- 2 Are you a **limited liability company (LLC)**? If "Yes," attach a copy of your articles of organization showing certification of filing with the appropriate state agency. Also, if you adopted an operating agreement, attach a copy. Include copies of any amendments to your articles and be sure they show state filing certification. Refer to the instructions for circumstances when an LLC should not file its own exemption application.  Yes  No
- 3 Are you an **unincorporated association**? If "Yes," attach a copy of your articles of association, constitution, or other similar organizing document that is dated and includes at least two signatures. Include signed and dated copies of any amendments.  Yes  No
- 4 a Are you a **trust**? If "Yes," attach a signed and dated copy of your trust agreement. Include signed and dated copies of any amendments.  Yes  No
- b Have you been funded? If "No," explain how you are formed without anything of value placed in trust.  Yes  No
- 5 Have you adopted **bylaws**? If "Yes," attach a current copy showing date of adoption. If "No," explain how your officers, directors, or trustees are selected.  Yes  No

**Part III Required Provisions in Your Organizing Document**

The following questions are designed to ensure that when you file this application, your organizing document contains the required provisions to meet the organizational test under section 501(c)(3). Unless you can check the boxes in both lines 1 and 2, your organizing document does not meet the organizational test. **DO NOT file this application until you have amended your organizing document.** Submit your original and amended organizing documents (showing state filing certification if you are a corporation or an LLC) with your application.

- 1 Section 501(c)(3) requires that your organizing document state your exempt purpose(s), such as charitable, religious, educational, and/or scientific purposes. Check the box to confirm that your organizing document meets this requirement. Describe specifically where your organizing document meets this requirement, such as a reference to a particular article or section in your organizing document. Refer to the instructions for exempt purpose language. Location of Purpose Clause (Page, Article, and Paragraph): Page 1, Art. III, ParA
- 2a Section 501(c)(3) requires that upon dissolution of your organization, your remaining assets must be used exclusively for exempt purposes, such as charitable, religious, educational, and/or scientific purposes. Check the box on line 2a to confirm that your organizing document meets this requirement by express provision for the distribution of assets upon dissolution. If you rely on state law for your dissolution provision, do not check the box on line 2a and go to line 2c.
- 2b If you checked the box on line 2a, specify the location of your dissolution clause (Page, Article, and Paragraph). Do not complete line 2c if you checked box 2a. Page 3, Article V, Par. H
- 2c See the instructions for information about the operation of state law in your particular state. Check this box if you rely on operation of state law for your dissolution provision and indicate the state:

**Part IV Narrative Description of Your Activities**

Using an attachment, describe your *past, present, and planned* activities in a narrative. If you believe that you have already provided some of this information in response to other parts of this application, you may summarize that information here and refer to the specific parts of the application for supporting details. You may also attach representative copies of newsletters, brochures, or similar documents for supporting details to this narrative. Remember that if this application is approved, it will be open for public inspection. Therefore, your narrative description of activities should be thorough and accurate. Refer to the instructions for information that must be included in your description.

**Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors**

1a List the names, titles, and mailing addresses of all of your officers, directors, and trustees. For each person listed, state their total annual **compensation**, or proposed compensation, for all services to the organization, whether as an officer, employee, or other position. Use actual figures, if available. Enter "none" if no compensation is or will be paid. If additional space is needed, attach a separate sheet. Refer to the instructions for information on what to include as compensation.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
Board of Directors (See attached statement)			none

**Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)**

**b** List the names, titles, and mailing addresses of each of your five highest compensated employees who receive or will receive compensation of more than \$50,000 per year. Use the actual figure, if available. Refer to the instructions for information on what to include as compensation. Do not include officers, directors, or trustees listed in line 1a.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
None			

**c** List the names, names of businesses, and mailing addresses of your five highest compensated independent contractors that receive or will receive compensation of more than \$50,000 per year. Use the actual figure, if available. Refer to the instructions for information on what to include as compensation.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
None			

The following "Yes" or "No" questions relate to *past, present, or planned* relationships, transactions, or agreements with your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in lines 1a, 1b, and 1c.

- 2 a Are any of your officers, directors, or trustees **related** to each other through **family or business relationships**? If "Yes," identify the individuals and explain the relationship.  Yes  No
  - b Do you have a business relationship with any of your officers, directors, or trustees other than through their position as an officer, director, or trustee? If "Yes," identify the individuals and describe the business relationship with each of your officers, directors, or trustees.  Yes  No
  - c Are any of your officers, directors, or trustees related to your highest compensated employees or highest compensated independent contractors listed on lines 1b or 1c through family or business relationships? If "Yes," identify the individuals and explain the relationship.  Yes  No
- 
- 3 a For each of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, or 1c, attach a list showing their name, qualifications, average hours worked, and duties. N/A
  - b Do any of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, or 1c receive compensation from any other organizations, whether tax exempt or taxable, that are related to you through **common control**? If "Yes," identify the individuals, explain the relationship between you and the other organization, and describe the compensation arrangement.  Yes  No

- 4 In establishing the compensation for your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, and 1c, the following practices are recommended, although they are not required to obtain exemption. Answer "Yes" to all the practices you use.
- a Do you or will the individuals that approve compensation arrangements follow a conflict of interest policy?  Yes  No
  - b Do you or will you approve compensation arrangements in advance of paying compensation?  Yes  No
  - c Do you or will you document in writing the date and terms of approved compensation arrangements?  Yes  No

**Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)**

- d** Do you or will you record in writing the decision made by each individual who decided or voted on compensation arrangements?  Yes  No
- e** Do you or will you approve compensation arrangements based on information about compensation paid by **similarly situated** taxable or tax-exempt organizations for similar services, current compensation surveys compiled by independent firms, or actual written offers from similarly situated organizations? Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation.  Yes  No
- f** Do you or will you record in writing both the information on which you relied to base your decision and its source?  Yes  No
- g** If you answered "No" to any item on lines 4a through 4f, describe how you set compensation that is **reasonable** for your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in Part V, lines 1a, 1b, and 1c.

- 5a** Have you adopted a **conflict of interest policy** consistent with the sample conflict of interest policy in Appendix A to the instructions? If "Yes," provide a copy of the policy and explain how the policy has been adopted, such as by resolution of your governing board. If "No," answer lines 5b and 5c.  Yes  No
- b** What procedures will you follow to assure that persons who have a conflict of interest will not have influence over you for setting their own compensation? See attached Statement
- c** What procedures will you follow to assure that persons who have a conflict of interest will not have influence over you regarding business deals with themselves? See attached Statement

**Note:** A conflict of interest policy is recommended though it is not required to obtain exemption. Hospitals, see Schedule C, Section I, line 14.

- 6a** Do you or will you compensate any of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in lines 1a, 1b, or 1c through **non-fixed payments**, such as discretionary bonuses or revenue-based payments? If "Yes," describe all non-fixed compensation arrangements, including how the amounts are determined, who is eligible for such arrangements, whether you place a limitation on total compensation, and how you determine or will determine that you pay no more than reasonable compensation for services. Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation.  Yes  No

- b** Do you or will you compensate any of your employees, other than your officers, directors, trustees, or your five highest compensated employees who receive or will receive compensation of more than \$50,000 per year, through non-fixed payments, such as discretionary bonuses or revenue-based payments? If "Yes," describe all non-fixed compensation arrangements, including how the amounts are or will be determined, who is or will be eligible for such arrangements, whether you place or will place a limitation on total compensation, and how you determine or will determine that you pay no more than reasonable compensation for services. Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation.  Yes  No

- 7a** Do you or will you purchase any goods, services, or assets from any of your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," describe any such purchase that you made or intend to make, from whom you make or will make such purchases, how the terms are or will be negotiated at **arm's length**, and explain how you determine or will determine that you pay no more than **fair market value**. Attach copies of any written contracts or other agreements relating to such purchases.  Yes  No

- b** Do you or will you sell any goods, services, or assets to any of your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," describe any such sales that you made or intend to make, to whom you make or will make such sales, how the terms are or will be negotiated at arm's length, and explain how you determine or will determine you are or will be paid at least fair market value. Attach copies of any written contracts or other agreements relating to such sales.  Yes  No

- 8a** Do you or will you have any leases, contracts, loans, or other agreements with your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," provide the information requested in lines 8b through 8f.  Yes  No
- b** Describe any written or oral arrangements that you made or intend to make.
- c** Identify with whom you have or will have such arrangements.
- d** Explain how the terms are or will be negotiated at arm's length.
- e** Explain how you determine you pay no more than fair market value or you are paid at least fair market value.
- f** Attach copies of any signed leases, contracts, loans, or other agreements relating to such arrangements.

- 9a** Do you or will you have any leases, contracts, loans, or other agreements with any organization in which any of your officers, directors, or trustees are also officers, directors, or trustees, or in which any individual officer, director, or trustee owns more than a 35% interest? If "Yes," provide the information requested in lines 9b through 9f.  Yes  No



**Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)**

- b Describe any written or oral arrangements you made or intend to make.
- c Identify with whom you have or will have such arrangements.
- d Explain how the terms are or will be negotiated at arm's length.
- e Explain how you determine or will determine you pay no more than fair market value or that you are paid at least fair market value.
- f Attach a copy of any signed leases, contracts, loans, or other agreements relating to such arrangements.

**Part VI Your Members and Other Individuals and Organizations That Receive Benefits From You**

The following "Yes" or "No" questions relate to goods, services, and funds you provide to individuals and organizations as part of your activities. Your answers should pertain to *past, present, and planned* activities. (See instructions.)

- 1a In carrying out your exempt purposes, do you provide goods, services, or funds to individuals? If "Yes," describe each program that provides goods, services, or funds to individuals.  Yes  No
- b In carrying out your exempt purposes, do you provide goods, services, or funds to organizations? If "Yes," describe each program that provides goods, services, or funds to organizations.  Yes  No
- 2 Do any of your programs limit the provision of goods, services, or funds to a specific individual or group of specific individuals? For example, answer "Yes," if goods, services, or funds are provided only for a particular individual, your members, individuals who work for a particular employer, or graduates of a particular school. If "Yes," explain the limitation and how recipients are selected for each program.  Yes  No
- 3 Do any individuals who receive goods, services, or funds through your programs have a family or business relationship with any officer, director, trustee, or with any of your highest compensated employees or highest compensated independent contractors listed in Part V, lines 1a, 1b, and 1c? If "Yes," explain how these related individuals are eligible for goods, services, or funds.  Yes  No

**Part VII Your History**

The following "Yes" or "No" questions relate to your history. (See instructions.)

- 1 Are you a **successor** to another organization? Answer "Yes," if you have taken or will take over the activities of another organization; you took over 25% or more of the fair market value of the net assets of another organization; or you were established upon the conversion of an organization from for-profit to non-profit status. If "Yes," complete Schedule G.  Yes  No
- 2 Are you submitting this application more than 27 months after the end of the month in which you were legally formed? If "Yes," complete Schedule E.  Yes  No

**Part VIII Your Specific Activities**

The following "Yes" or "No" questions relate to specific activities that you may conduct. Check the appropriate box. Your answers should pertain to *past, present, and planned* activities. (See instructions.)

- 1 Do you support or oppose candidates in **political campaigns** in any way? If "Yes," explain.  Yes  No
- 2a Do you attempt to **influence legislation**? If "Yes," explain how you attempt to influence legislation and complete line 2b. If "No," go to line 3a.  Yes  No
- b Have you made or are you making an **election** to have your legislative activities measured by expenditures by filing Form 5768? If "Yes," attach a copy of the Form 5768 that was already filed or attach a completed Form 5768 that you are filing with this application. If "No," describe whether your attempts to influence legislation are a substantial part of your activities. Include the time and money spent on your attempts to influence legislation as compared to your total activities.  Yes  No
- 3a Do you or will you operate bingo or **gaming** activities? If "Yes," describe who conducts them, and list all revenue received or expected to be received and expenses paid or expected to be paid in operating these activities. **Revenue and expenses** should be provided for the time periods specified in Part IX, Financial Data.  Yes  No
- b Do you or will you enter into contracts or other agreements with individuals or organizations to conduct bingo or gaming for you? If "Yes," describe any written or oral arrangements that you made or intend to make, identify with whom you have or will have such arrangements, explain how the terms are or will be negotiated at arm's length, and explain how you determine or will determine you pay no more than fair market value or you will be paid at least fair market value. Attach copies or any written contracts or other agreements relating to such arrangements.  Yes  No
- c List the states and local jurisdictions, including Indian Reservations, in which you conduct or will conduct gaming or bingo.

Part VII Your Specific Activities (Continued)

4a Do you or will you undertake fundraising? If "Yes," check all the fundraising programs you do or will conduct. (See instructions.) [X] Yes [ ] No

- mail solicitations [X]
email solicitations [X]
personal solicitations [X]
vehicle, boat, plane, or similar donations [ ]
foundation grant solicitations [X]
phone solicitations [ ]
accept donations on your website [X]
receive donations from another organization's website [ ]
government grant solicitations [X]
Other [ ]

Attach a description of each fundraising program.

b Do you or will you have written or oral contracts with any individuals or organizations to raise funds for you? If "Yes," describe these activities. Include all revenue and expenses from these activities and state who conducts them. Revenue and expenses should be provided for the time periods specified in Part IX, Financial Data. Also, attach a copy of any contracts or agreements. [ ] Yes [X] No

c Do you or will you engage in fundraising activities for other organizations? If "Yes," describe these arrangements. Include a description of the organizations for which you raise funds and attach copies of all contracts or agreements. [ ] Yes [X] No

d List all states and local jurisdictions in which you conduct fundraising. For each state or local jurisdiction listed, specify whether you fundraise for your own organization, you fundraise for another organization, or another organization fundraises for you. Boulder County, Colorado

e Do you or will you maintain separate accounts for any contributor under which the contributor has the right to advise on the use or distribution of funds? Answer "Yes," if the donor may provide advice on the types of investments, distributions from the types of investments, or the distribution from the donor's contribution account. If "Yes," describe this program, including the type of advice that may be provided and submit copies of any written materials provided to donors. [ ] Yes [X] No

5 Are you affiliated with a governmental unit? If "Yes," explain. [ ] Yes [X] No

6a Do you or will you engage in economic development? If "Yes," describe your program. [ ] Yes [X] No

b Describe in full who benefits from your economic development activities and how the activities promote exempt purposes.

7a Do or will persons other than your employees or volunteers develop your facilities? If "Yes," describe each facility, the role of the developer, and any business or family relationship(s) between the developer and your officers, directors, or trustees. [ ] Yes [X] No

b Do or will persons other than your employees or volunteers manage your activities or facilities? If "Yes," describe each activity and facility, the role of the manager, and any business or family relationship(s) between the manager and your officers, directors, or trustees. [ ] Yes [X] No

c If there is a business or family relationship between any manager or developer and your officers, directors, or trustees, identify the individuals, explain the relationship, describe how contracts are negotiated at arm's length so that you pay no more than fair market value, and submit a copy of any contracts or other agreements.

8 Do you or will you enter into joint ventures, including partnerships or limited liability companies treated as partnerships, in which you share profits and losses with partners other than section 501(c)(3) organizations? If "Yes," describe the activities of these joint ventures in which you participate. [ ] Yes [X] No

9a Are you applying for exemption as a childcare organization under section 501(k)? If "Yes," answer lines 9b through 9d. If "No," go to line 10. [ ] Yes [X] No

b Do you provide child care so that parents or caretakers of children you care for can be gainfully employed (see instructions)? If "No," explain how you qualify as a childcare organization described in section 501(k). [ ] Yes [ ] No

c Of the children for whom you provide child care, are 85% or more of them cared for by you to enable their parents or caretakers to be gainfully employed (see instructions)? If "No," explain how you qualify as a childcare organization described in section 501(k). [ ] Yes [ ] No

d Are your services available to the general public? If "No," describe the specific group of people for whom your activities are available. Also, see the instructions and explain how you qualify as a childcare organization described in section 501(k). [ ] Yes [ ] No

10 Do you or will you publish, own, or have rights in music, literature, tapes, artworks, choreography, scientific discoveries, or other intellectual property? If "Yes," explain. Describe who owns or will own any copyrights, patents, or trademarks, whether fees are or will be charged, how the fees are determined, and how any items are or will be produced, distributed, and marketed. [X] Yes [ ] No

**Part VII Your Specific Activities** (Continued)

- 11** Do you or will you accept contributions of: real property; conservation easements; closely held securities; intellectual property such as patents, trademarks, and copyrights; works of music or art; licenses; royalties; automobiles, boats, planes, or other vehicles; or collectibles of any type? If "Yes," describe each type of contribution, any conditions imposed by the donor on the contribution, and any agreements with the donor regarding the contribution.  Yes  No
- 12a** Do you or will you operate in a **foreign country** or **countries**? If "Yes," answer lines 12b through 12d. If "No," go to line 13a.  Yes  No
- b** Name the foreign countries and regions within the countries in which you operate.
- c** Describe your operations in each country and region in which you operate.
- d** Describe how your operations in each country and region further your exempt purposes.
- 13a** Do you or will you make grants, loans, or other distributions to organization(s)? If "Yes," answer lines 13b through 13g. If "No," go to line 14a.  Yes  No
- b** Describe how your grants, loans, or other distributions to organizations further your exempt purposes.
- c** Do you have written contracts with each of these organizations? If "Yes," attach a copy of each contract.  Yes  No
- d** Identify each recipient organization and any **relationship** between you and the recipient organization.
- e** Describe the records you keep with respect to the grants, loans, or other distributions you make.
- f** Describe your selection process, including whether you do any of the following:
- (i)** Do you require an application form? If "Yes," attach a copy of the form.  Yes  No
- (ii)** Do you require a grant proposal? If "Yes," describe whether the grant proposal specifies your responsibilities and those of the grantee, obligates the grantee to use the grant funds only for the purposes for which the grant was made, provides for periodic written reports concerning the use of grant funds, requires a final written report and an accounting of how grant funds were used, and acknowledges your authority to withhold and/or recover grant funds in case such funds are, or appear to be, misused.  Yes  No
- g** Describe your procedures for oversight of distributions that assure you the resources are used to further your exempt purposes, including whether you require periodic and final reports on the use of resources.
- 14a** Do you or will you make grants, loans, or other distributions to foreign organizations? If "Yes," answer lines 14b through 14f. If "No," go to line 15.  Yes  No
- b** Provide the name of each foreign organization, the country and regions within a country in which each foreign organization operates, and describe any relationship you have with each foreign organization.
- c** Does any foreign organization listed in line 14b accept contributions earmarked for a specific country or specific organization? If "Yes," list all earmarked organizations or countries.  Yes  No
- d** Do your contributors know that you have ultimate authority to use contributions made to you at your discretion for purposes consistent with your exempt purposes? If "Yes," describe how you relay this information to contributors.  Yes  No
- e** Do you or will you make pre-grant inquiries about the recipient organization? If "Yes," describe these inquiries, including whether you inquire about the recipient's financial status, its tax-exempt status under the Internal Revenue Code, its ability to accomplish the purpose for which the resources are provided, and other relevant information.  Yes  No
- f** Do you or will you use any additional procedures to ensure that your distributions to foreign organizations are used in furtherance of your exempt purposes? If "Yes," describe these procedures, including site visits by your employees or compliance checks by impartial experts, to verify that grant funds are being used appropriately.  Yes  No

**Part VIII Your Specific Activities (Continued)**

- 15** Do you have a **close connection** with any organizations? If "Yes," explain.  Yes  No
- 16** Are you applying for exemption as a **cooperative hospital service organization** under section 501(e)? If "Yes," explain.  Yes  No
- 17** Are you applying for exemption as a **cooperative service organization of operating educational organizations** under section 501(f)? If "Yes," explain.  Yes  No
- 18** Are you applying for exemption as a **charitable risk pool** under section 501(n)? If "Yes," explain.  Yes  No
- 19** Do you or will you operate a **school**? If "Yes," complete Schedule B. Answer "Yes," whether you operate a school as your main function or as a secondary activity.  Yes  No
- 20** Is your main function to provide **hospital** or **medical care**? If "Yes," complete Schedule C.  Yes  No
- 21** Do you or will you provide **low-income housing** or housing for the **elderly** or **handicapped**? If "Yes," complete Schedule F.  Yes  No
- 22** Do you or will you provide scholarships, fellowships, education loans, or other educational grants to individuals, including grants for travel, study, or other similar purposes? If "Yes," complete Schedule H.  Yes  No

**Note: Private foundations** may use Schedule H to request advance approval of individual grant procedures.

**Part IX Financial Data**

For purposes of this schedule, years in existence refer to completed tax years. If in existence 4 or more years, complete the schedule for the most recent 4 tax years. If in existence more than 1 year but less than 4 years, complete the statements for each year in existence and provide projections of your likely revenues and expenses based on a reasonable and good faith estimate of your future finances for a total of 3 years of financial information. If in existence less than 1 year, provide projections of your likely revenues and expenses for the current year and the 2 following years, based on a reasonable and good faith estimate of your future finances for a total of 3 years of financial information. (See instructions.)

**A. Statement of Revenues and Expenses**

	Type of revenue or expense	3 prior tax years or 2 succeeding tax years				(e) Provide Total for (a) through (d)
		(a) From 1/1/06 To 12/31/06	(b) From 1/1/05 To 12/31/05	(c) From 1/1/04 To 12/31/04	(d) From 1/1/03 To 12/31/03	
<b>Revenues</b>	<b>1</b> Gifts, grants, and contributions received (do not include unusual grants)	11,800.00	1,000.00			12,800.00
	<b>2</b> Membership fees received	985.00	540.00	930.00	1,740.00	4,195.00
	<b>3</b> Gross investment income			22.00	49.00	71.00
	<b>4</b> Net unrelated business income					
	<b>5</b> Taxes levied for your benefit					
	<b>6</b> Value of services or facilities furnished by a governmental unit without charge (not including the value of services generally furnished to the public without charge)					
	<b>7</b> Any revenue not otherwise listed above or in lines 9-12 below (attach an itemized list)					
	<b>8</b> Total of lines 1 through 7	12,785.00	1,540.00	952.00	1,789.00	17,066.00
	<b>9</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to your exempt purposes (attach itemized list)	36,707.00	1,849.00			38,556.00
	<b>10</b> Total of lines 8 and 9	49,492.00	3,389.00	952.00	1,789.00	55,622.00
<b>11</b> Net gain or loss on sale of capital assets (attach schedule and see instructions)						
<b>12</b> Unusual grants						
<b>13</b> Total Revenue Add lines 10 through 12	49,492.00	3,389.00	952.00	1,789.00	55,622.00	
<b>Expenses</b>	<b>14</b> Fundraising expenses					
	<b>15</b> Contributions, gifts, grants, and similar amounts paid out (attach an itemized list)					
	<b>16</b> Disbursements to or for the benefit of members (attach an itemized list)					
	<b>17</b> Compensation of officers, directors, and trustees					
	<b>18</b> Other salaries and wages					
	<b>19</b> Interest expense					
	<b>20</b> Occupancy (rent, utilities, etc.)					
	<b>21</b> Depreciation and depletion					
	<b>22</b> Professional fees					
	<b>23</b> Any expense not otherwise classified, such as program services (attach itemized list)	12,652.00	1,361.00	717.00	1,156.00	
	<b>24</b> Total Expenses Add lines 14 through 23	12,652.00	1,361.00	717.00	1,156.00	

Part IX Financial Data (Continued)

B. Balance Sheet (for your most recently completed tax year)

Year End: 12/31/06

Table with columns for line number, description, and amount. Includes sections for Assets, Liabilities, and Fund Balances or Net Assets. Total Assets and Total Liabilities and Fund Balances or Net Assets are both 48,335.00.

Part X Public Charity Status

Part X is designed to classify you as an organization that is either a private foundation or a public charity. Public charity status is a more favorable tax status than private foundation status.

1 a Are you a private foundation? If "Yes," go to line 1b. If "No," go to line 5 and proceed as instructed. If you are unsure, see the instructions. [ ] Yes [x] No

b As a private foundation, section 508(e) requires special provisions in your organizing document in addition to those that apply to all organizations described in section 501(c)(3). Check the box to confirm that your organizing document meets this requirement, whether by express provision or by reliance on operation of state law.

2 Are you a private operating foundation? To be a private operating foundation you must engage directly in the active conduct of charitable, religious, educational, and similar activities, as opposed to indirectly carrying out these activities by providing grants to individuals or other organizations. [ ] Yes [ ] No

3 Have you existed for one or more years? If "Yes," attach financial information showing that you are a private operating foundation; go to the signature section of Part XI. If "No," continue to line 4. [ ] Yes [ ] No

4 Have you attached either (1) an affidavit or opinion of counsel, (including a written affidavit or opinion from a certified public accountant or accounting firm with expertise regarding this tax law matter), that sets forth facts concerning your operations and support to demonstrate that you are likely to satisfy the requirements to be classified as a private operating foundation; or (2) a statement describing your proposed operations as a private operating foundation? [ ] Yes [ ] No

5 If you answered "No" to line 1a, indicate the type of public charity status you are requesting by checking one of the choices below. You may check only one box.

The organization is not a private foundation because it is:

- a 509(a)(1) and 170(b)(1)(A)(i) - a church or a convention or association of churches. Complete and attach Schedule A.
b 509(a)(1) and 170(b)(1)(A)(ii) - a school. Complete and attach Schedule B.
c 509(a)(1) and 170(b)(1)(A)(iii) - a hospital, a cooperative hospital service organization, or a medical research organization operated in conjunction with a hospital. Complete and attach Schedule C.
d 509(a)(3) - an organization supporting either one or more organizations described in line 5a through c, f, g, or h or a publicly supported section 501(c)(4), (5), or (6) organization. Complete and attach Schedule D.

Vertical checkboxes for options a, b, c, and d.

Part X Public Charity Status (Continued)

- e 509(a)(4) - an organization organized and operated exclusively for testing for public safety.
- f 509(a)(1) and 170(b)(1)(A)(iv) - an organization operated for the benefit of a college or university that is owned or operated by a governmental unit.
- g 509(a)(1) and 170(b)(1)(A)(vi) - an organization that receives a substantial part of its financial support in the form of contributions from publicly supported organizations, from a governmental unit, or from the general public.
- h 509(a)(2) - an organization that normally receives not more than one-third of its financial support from gross investment income and receives more than one-third of its financial support from contributions, membership fees, and gross receipts from activities related to its exempt functions (subject to certain exceptions).
- i A publicly supported organization, but unsure if it is described in 5g or 5h. The organization would like the IRS to decide the correct status.

- 6 If you checked box g, h, or i in question 5 above, you must request either an **advance** or a **definitive ruling** by selecting one of the boxes below. Refer to the instructions to determine which type of ruling you are eligible to receive.
- a **Request for Advance Ruling:** By checking this box and signing the consent, pursuant to section 6501(c)(4) of the Code you request an advance ruling and agree to extend the statute of limitations on the assessment of excise tax under section 4940 of the Code. The tax will apply only if you do not establish public support status at the end of the 5-year advance ruling period. The assessment period will be extended for the 5 advance ruling years to 8 years, 4 months, and 15 days beyond the end of the first year. You have the right to refuse or limit the extension to a mutually agreed-upon period of time or issue(s). Publication 1035, *Extending the Tax Assessment Period*, provides a more detailed explanation of your rights and the consequences of the choices you make. You may obtain Publication 1035 free of charge from the IRS web site at [www.irs.gov](http://www.irs.gov) or by calling toll-free 1-800-829-3676. Signing this consent will not deprive you of any appeal rights to which you would otherwise be entitled. If you decide not to extend the statute of limitations, you are not eligible for an advance ruling.

Consent Fixing Period of Limitations Upon Assessment of Tax Under Section 4940 of the Internal Revenue Code

For Organization:

----- (Signature of Officer, Director, Trustee, or other authorized official) ----- (Type or print name of signer) ----- (Date) -----  
 ----- (Type or print title or authority of signer) -----

For IRS Use Only

----- IRS Director, Exempt Organizations ----- (Date) -----

- b **Request for Definitive Ruling:** Check this box if you have completed one tax year of at least 8 full months and you are requesting a definitive ruling. To confirm your public support status, answer line 6b(i) if you checked box g in line 5 above. Answer line 6b(ii) if you checked box h in line 5 above. If you checked box i in line 5 above, answer both lines 6(b)(i) and (ii).
- (i) (a) Enter 2% of line 8, column (e) on Part IX-A. Statement of Revenues and Expenses.
  - (b) Attach a list showing the name and amount contributed by each person, company, or organization whose gifts totaled more than the 2% amount. If the answer is "None," check this box.
  - (ii) (a) For each year amounts are included on lines 1, 2, and 9 of Part IX-A. Statement of Revenues and Expenses, attach a list showing the name of and amount received from each **disqualified person**. If the answer is "None," check this box.
  - (b) For each year amounts are included on line 9 of Part IX-A. Statement of Revenues and Expenses, attach a list showing the name of and amount received from each payer, other than a disqualified person, whose payments were more than the larger of (1) 1% of line 10, Part IX-A. Statement of Revenues and Expenses, or (2) \$5,000. If the answer is "None," check this box.

7 Did you receive any unusual grants during any of the years shown on Part IX-A, Statement of Revenues and Expenses? If "Yes," attach a list including the name of the contributor, the date and amount of the grant, a brief description of the grant, and explain why it is unusual.  Yes  No

**Part XI User Fee Information**

You must include a user fee payment with this application. It will not be processed without your paid user fee. If your average annual gross receipts have exceeded or will exceed \$10,000 annually over a 4-year period, you must submit payment of \$750. If your gross receipts have not exceeded or will not exceed \$10,000 annually over a 4-year period, the required user fee payment is \$300. See instructions for Part XI, for a definition of **gross receipts** over a 4-year period. Your check or money order must be made payable to the United States Treasury. *User fees are subject to change. Check our website at www.irs.gov and type "User Fee" in the keyword box, or call Customer Account Services at 1-877-829-5500 for current information.*

1 Have your annual gross receipts averaged or are they expected to average not more than \$10,000? If "Yes," check the box on line 2 and enclose a user fee payment of \$300 (Subject to change - see above). If "No," check the box on line 3 and enclose a user fee payment of \$750 (Subject to change - see above).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
2 Check the box if you have enclosed the reduced user fee payment of \$300 (Subject to change).	<input type="checkbox"/>	<input type="checkbox"/>
3 Check the box if you have enclosed the user fee payment of \$750 (Subject to change).	<input type="checkbox"/>	<input checked="" type="checkbox"/>

I declare under the penalties of perjury that I am authorized to sign this application on behalf of the above organization and that I have examined this application, including the accompanying schedules and attachments, and to the best of my knowledge it is true, correct, and complete.

**Please  
Sign  
Here**

(Signature of Officer, Director, Trustee, or other authorized official)	(Type or print name of signer)	(Date)
(Type or print title or authority of signer)		

**Reminder:** Send the completed Form 1023 Checklist with your filled-in-application.



**Schedule E. Organizations Not Filing Form 1023 Within 27 Months of Formation**

Schedule E is intended to determine whether you are eligible for tax exemption under section 501(c)(3) from the postmark date of your application or from your date of incorporation or formation, whichever is earlier. If you are not eligible for tax exemption under section 501(c)(3) from your date of incorporation or formation, Schedule E is also intended to determine whether you are eligible for tax exemption under section 501(c)(4) for the period between your date of incorporation or formation and the postmark date of your application.

- |            |   |   |  |
|------------|---|---|--|
| <b>1</b>   | Are you a church, association of churches, or integrated auxiliary of a church? If "Yes," complete Schedule A and stop here. Do not complete the remainder of Schedule E.   | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| <b>2 a</b> | Are you a public charity with annual <b>gross receipts</b> that are normally \$5,000 or less? If "Yes," stop here. Answer "No" if you are a private foundation, regardless of your gross receipts.  | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| <b>b</b>   | If your gross receipts were normally more than \$5,000, are you filing this application within 90 days from the end of the tax year in which your gross receipts were normally more than \$5,000? If "Yes," stop here.  | <input type="checkbox"/> Yes            | <input type="checkbox"/> No            |
| <b>3 a</b> | Were you included as a subordinate in a group exemption application or letter? If "No," go to line 4.   | <input type="checkbox"/> Yes            | <input type="checkbox"/> No            |
| <b>b</b>   | If you were included as a subordinate in a group exemption letter, are you filing this application within 27 months from the date you were notified by the organization holding the group exemption letter or the Internal Revenue Service that you cease to be covered by the group exemption letter? If "Yes," stop here.   | <input type="checkbox"/> Yes            | <input type="checkbox"/> No            |
| <b>c</b>   | If you were included as a subordinate in a timely filed group exemption request that was denied, are you filing this application within 27 months from the postmark date of the Internal Revenue Service final adverse ruling letter? If "Yes," stop here.  | <input type="checkbox"/> Yes            | <input type="checkbox"/> No            |
| <b>4</b>   | Were you created on or before October 9, 1969? If "Yes," stop here. Do not complete the remainder of this schedule.   | <input type="checkbox"/> Yes            | <input type="checkbox"/> No            |
| <b>5</b>   | If you answered "No" to lines 1 through 4, we cannot recognize you as tax exempt from your date of formation unless you qualify for an extension of time to apply for exemption. Do you wish to request an extension of time to apply to be recognized as exempt from the date you were formed? If "Yes," attach a statement explaining why you did not file this application within the 27-month period. Do not answer lines 6, 7, or 8. If "No," go to line 6a. | <input type="checkbox"/> Yes            | <input type="checkbox"/> No            |
| <b>6 a</b> | If you answered "No" to line 5, you can only be exempt under section 501(c)(3) from the postmark date of this application. Therefore, do you want us to treat this application as a request for tax exemption from the postmark date? If "Yes," you are eligible for an advance ruling. Complete Part X, line 6a. If "No," you will be treated as a private foundation.   | <input type="checkbox"/> Yes            | <input type="checkbox"/> No            |
| <b>b</b>   | <b>Note.</b> Be sure your ruling eligibility agrees with your answer to Part X, line 6.<br>Do you anticipate significant changes in your sources of support in the future? If "Yes," complete line 7 below.   | <input type="checkbox"/> Yes            | <input type="checkbox"/> No            |

**Schedule E. Organizations Not Filing Form 1023 Within 27 Months of Formation (Continued)**

7 Complete this item only if you answered "Yes" to line 6b. Include projected revenue for the first two full years following the current tax year.

Type of Revenue	Projected revenue for 2 years following current tax year		
	(a) From _____ To _____	(b) From _____ To _____	(c) Total
1 Gifts, grants, and contributions received (do not include unusual grants)			
2 Membership fees received			
3 Gross investment income			
4 Net unrelated business income			
5 Taxes levied for your benefit			
6 Value of services or facilities furnished by a governmental unit without charge (not including the value of services generally furnished to the public without charge)			
7 Any revenue not otherwise listed above or in lines 9-12 below (attach an itemized list)			
8 Total of lines 1 through 7			
9 Gross receipts from admissions, merchandise sold, or services performed, or furnishing of facilities in any activity that is related to your exempt purposes (attach itemized list)			
10 Total of lines 8 and 9			
11 Net gain or loss on sale of capital assets (attach an itemized list)			
12 Unusual grants			
13 Total revenue. Add lines 10 through 12			

8 According to your answers, you are only eligible for tax exemption under section 501(c)(3) from the postmark date of your application. However, you may be eligible for tax exemption under section 501(c)(4) from your date of formation to the postmark date of the Form 1023. Tax exemption under section 501(c)(4) allows exemption from federal income tax, but generally not deductibility of contributions under Code section 170. Check the box at right if you want us to treat this as a request for exemption under 501(c)(4) from your date of formation to the postmark date.

▶

Attach a completed Page 1 of Form 1024, Application for Recognition of Exemption Under Section 501(a), to this application.

Boulder Area Trails Coalition  
84-1402239  
Attachment to Form 1023

Part V: Compensation and Other Financial Arrangements With Your Officers, Directors,  
Trustees, Employees, and Independent Contractors

<u>Board of Directors</u>	<u>Mailing Address</u>	<u>Compensation</u>
Eric Vogelsberg	1705 14 <sup>th</sup> Street Boulder, CO 80302	NONE
Suzanne Webel	1705 14 <sup>th</sup> Street Boulder, CO 80302	NONE
Chris Morrison	1705 14 <sup>th</sup> Street Boulder, CO 80302	NONE
Guy Burgess	1705 14 <sup>th</sup> Street Boulder, CO 80302	NONE
Mike O'Brien	1705 14 <sup>th</sup> Street Boulder, CO 80302	NONE
Gary Sprung	1705 14 <sup>th</sup> Street Boulder, CO 80302	NONE
Holly Tulin	1705 14 <sup>th</sup> Street Boulder, CO 80302	NONE

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Boulder Area Trails Coalition

84-1402239

Attachment to Form 1023

Part V, 5a and 5b: Conflict of Interest Procedures:

5a:

Any “interested persons” (directors, officers, committee members, management) having a conflict of interest with regard to their individual compensation are precluded from attending a board or committee meetings in which their compensation issues are discussed. All compensation setting for “interested persons” is done by “non interested” board members.

5b:

Any “interested persons” (directors, officers, committee members, management) having a conflict of interest with regard to any business arrangements with them are precluded from attending board or committee meetings in which these issues are discussed. All business arrangements for “interested persons” is approved by “non interested” board members.

Part VI, Your Members and Other Individuals and Organizations That Receive Benefits From You

1b:

Provide funding for the design and construction of new trails, the enhancement of existing trails, and other projects that will significantly improve the quality of the visitor experience on public lands.

Part VIII, Your Specific Activities

4a:

Boulder Area Trail Coalition’s fundraising to date has been limited to membership solicitation via mail and email and to applications for Colorado State Funds for trail project and map project grants.

10:

The organization has copyrighted the “Boulder Area Trails Coalition Comprehensive Trail Map of Boulder County.” The organization produces the maps through a printer and sells them at retail locations and directly to the public. The fees are based upon the going rate for trail maps.

13b:

Funding the design and construction of new trails, the enhancement of existing trails, and other projects that will significantly improve the quality of the visitor experience on public lands.

13d:

Proposals are being requested from Boulder County land management agencies. No related party relationship is expected.

Boulder Area Trails Coalition  
84-1402239  
Attachment to Form 1023

Part VIII, Your Specific Activities

13e:

Records will be kept by grantee and will include proposal, amounts disbursed, and any other correspondence with grantee.

13f(ii):

The organization recommends that each proposal include:

- Specific plans for the trail projects to be constructed
- A work plan to be followed in constructing the project
- Budget with a description of financial and in-kind contributions (including volunteer labor) to be applied to the project
- Formal letters of support from appropriate land-use agencies whose approval and participation will be required for the project to proceed.

13g:

The organization will inspect and review specific projects after they are completed. If this cannot be performed, the organization will specify that a report describing the work done and the results of the process. The organization will review the report

Part IX, Line 9:

**2006-** Sale of Trail Maps \$36,707

**2005-** Sale of Trail Maps \$1,849

Part IX, Line 23:

Other expenses consist of the following:

**2006**

Cost of Sales           \$11,901  
Mailing and Supplies     351  
Trail Project Support    400

Total Other Expenses \$12,652

**2005**

Cost of Sales           \$ 823  
Post Office Box         144  
Mailing and Supplies   394

Total Other Expenses \$1,361

**2004**

Trail Project Support \$ 717

**2003**

Trail Project Support \$ 1,156

Boulder Area Trails Coalition  
84-1402239  
Attachment to Form 1023

The following 12 page document provides substantiation for the following:

Part IV: Narrative Descriptions of Activities

## ***Help Preserve, Create, and Enhance Environmentally Responsible Trails Systems and Boulder County***

The Boulder Area Trails Coalition is a group of environmentalists, hikers, equestrians, and bicyclists who believe it is in everyone's best interest to work together on trail issues. Our mission is to promote non-motorized, multi-use, environmentally responsible trail systems. By joining together we can fulfill the vision accessible healthy open lands. Your skills, involvement, and financial resources are needed and welcome.

Multi-purpose trails are a valuable community resource which provide recreational benefits which enhance the quality-of-life of area residents and visitors. In addition to their recreational benefits, trails systems enhance environmental quality by:

- Fostering a sense of stewardship among trail users
- Helping users appreciate and protect our natural heritage
- Generating support for additional open space and public lands
- Creating opportunities to initiate ecosystem restoration
- Providing alternatives to automobile travel

### **Major Goals:**

- A system of connected trails incorporating environmentally sound trail placement and design
- A comprehensive trail plan and user friendly information
- A community of responsible trail users
- Public support for trails

### **Services**

- Support and facilitate local and regional trails planning
- Create, preserve, and enhance systems of connected trails
- Serve as a trails policy advocate to local, state, and federal agencies
- Serve as a catalyst to develop consensus on trail issues
- Educate trail users about trail ethics and trail opportunities
- Raise funds for trails
- Support volunteer trail projects
- Serve as a trails information resource
- Facilitate multifaceted partnership for the benefit of trails
- Support off-street trails and on-street bike lanes as transportation and recreation routes

BATCO Newsletter, Winter 2006-2007  
*"Trails for Today and Tomorrow"*

**BATCO's mission is to promote non-motorized, multi-use,  
environmentally responsible trail systems.**

**Board of Directors**

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**Board Meetings**

The Board meets the 2nd Thursday of each month. The meetings begin at 7PM and typically last about two hours. Board meetings are usually held in the Sanitas meeting room at the Boulder Outlook. Contact any board member to verify meeting locations and agendas.

**BATCO members and the public are welcome to attend. Please join us!**

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**Letter from the President**

BATCO was founded to provide a positive voice for trails in Boulder County. Today, after more than a decade of often frustrating advocacy, I'm pleased to report that the times are changing.

Following the approval of the Visitor Master Plan (VMP) in 2005, the Open Space and Mountain Parks (OSMP) department immediately took steps to implement the plan. The staff has worked diligently with stakeholders and interested citizens to make the implementation stages successful. To date two Trail Study Area (TSA) plans have been approved and significant components of the first have been constructed.

The Marshall Mesa/Southern Grasslands TSA, which was completed in 2005, resulted in the subsequent construction of two of BATCO's priority southeastern trails and a new larger and safer trailhead.

The Eldorado Mountain/Doudy Draw TSA, which was accepted this December, proposes more than doubling the designated trails in the area and providing significant new access opportunities for bicyclists and hang gliders.

These gains did not come easy and their implementation is not guaranteed. Like the drawn-out and contentious VMP process, TSA planning and implementation stages have required our continuous, active involvement. The debates between recreational advocates and protectionists that consumed so much time during the VMP have resurfaced at each subsequent stage. Losses in historical access for many visitor groups have come along with the additional designated trails.

The OSMP staff is engaged in a difficult balancing act that promises to continue for the foreseeable future. BATCO will be there to help keep it level.

Elsewhere, Boulder County Parks and Open Space (BCPOS) completed building trails and trailheads at Caribou Ranch, Mud Lake, and Twin Lakes; constructed a trail connecting Meyers Gulch and Walker Ranch; rebuilt the Walker Ranch Trailhead; and supported volunteers building a second trail loop at Heil Valley Ranch. The County also completed a master plan for Niwot Trails including portions of the Longmont to Boulder (LOBO) regional trail.

The Forest Service is actively implementing recommendations from last year's Brainard Lake Recreational Area Management Plan. In addition to constructing a new bridge over South Saint Vrain Creek, the Forest Service supported volunteer groups that upgraded the Little Raven and Waldrop Trails for year-round use.

BATCO played a role in all these activities. We participated in the OSMP Eldorado Mountain/Doudy Draw TSA, the County's Heil Valley-to-Lyons and LOBO trails planning, and supported City, County, and Forest Service trail projects.

Last, but far from least, the BATCO Boulder County Comprehensive Trail Map that we released last year has been extremely successful. We've raised thousands of dollars from map sales and are beginning to turn the proceeds into trail projects. We've included more information and a map order form at the end of this newsletter.

## **Boulder City Open Space:**

The City of Boulder OSMP department has been working on a visitor plan since 1999. After an enormous effort, the Boulder City Council approved the proposed VMP in April of 2005. The plan and many associated documents are available via the BATCO website at [BATCO OSMP Visitor Plan](#).

With the completion of the VMP, OSMP efforts are now focused on creating real new visitor opportunities. During 2005, the OSMP staff began a series of TSA projects to determine future trail accesses, modifications, and closures on open space properties. Although years will pass before all eleven of scheduled study projects are complete, two of the most significant are finished, and the recommendations of the first TSA are well on their way to implementation.

## **Marshall Mesa/Southern Grasslands Trails Implementation**

The Marshall Mesa/Southern Grasslands TSA was the first of the trail study projects to be completed by the OSMP staff. The planning process stretched through most of 2005. You can find extensive details about the project, including a map of the project area, on the BATCO website at [BATCO MM/SG TSA](#).

We are encouraged by the progress OSMP has made in implementing the plan's recommendations. OSMP has constructed four new trails totaling almost five miles within the TSA and constructed a major new trailhead at the intersection of Highway 93 and Marshall Road. The attractive trailhead includes landscaping, picnic tables, a shelter, water, and designated pull-through horse trailer parking. The new additions include:

- The Cowdrey Draw Trail (0.8 mi.): This segment of the Marshall Mesa-to-Superior trail (between the Community Ditch Trail and South 66th Street) was constructed with volunteer help in the fall of 2005. The major volunteer project was sponsored by OSMP

and the Boulder Off-Road Alliance (now the Boulder Mountainbike Alliance or BMA), and supported by BATCO.

- The Coal Seam (0.6 mi.) & Marshall Valley (0.9 mi.) Trails: These two trails, which connect the old Marshall Mesa trailhead to the new trailhead and the new trailhead to the Community Ditch Trail, were constructed during 2006. Volunteers built the entire Coal Seam Trail. Most of the work was done at a large project on National Trails day. OSMP, BMA, and BATCO sponsored the project. This project was BATCO's first opportunity to return some of the profits from our map sales to Boulder's trails.
- The High Plains Trail (2.5 mi.): This trail connects the Greenbelt Plateau trailhead to the Coalton Trail and roughly parallels Highway 128. A large volunteer trail project constructed the eastern portion of the trail in October, and a contractor later completed it.
- An informal equestrian connection is in use between the Greenbelt Plateau and Flatirons Vista trailheads, via an existing Highway 93 underpass between Community Ditch and the top of the hill. This connection (BATCO's third priority in the area) is included in both the Marshall Mesa/Southern Grasslands and Eldorado Mountain/Doudy Draw TSAs. Although OSMP will support the connection until an alternative can be provided, it will be subject to seasonal closures to protect ground-nesting birds. No formal trail will be constructed.

The TSA plan also proposes a new trail along the western border of Marshall Lake, supports additional trails on County open space to the east of the TSA area, and addresses the existing serious safety issues associated with the Community Ditch crossing of Highway 93.

- OSMP has indicated that the Marshall Lake Trail might not be built unless there is compliance with the HCA on-trail requirement on the High Plains Trail. The department will monitor visitor behaviors on the trail during 2007 to determine the fate of the Marshall Lake Trail. As always, BATCO strongly encourages everyone to know and obey the regulations for the trails we visit.
- Resolving the safety issues at the Community Ditch crossing of Highway 93 requires cooperation between OSMP and the FRICO Ditch Company. After several years of discussion, it appears OSMP may have to take FRICO to court to obtain the necessary right-of-way permissions. Until then, the at-grade crossing with its associated dangers will remain as is.

Boulder County intends to address the eastern trail connections during 2007. The present plan is to hire a consultant to review and design the trails. Transportation tax funds will then be used to create connections between the OSMP Cowdrey Draw Trail and the BCPOS Singletree Trail, and between the Singletree Trail and the eastern end of the Coalton Trail. In addition to tying the Coal Creek and Rock Creek Trails together, these trails will form the eastern edge of the Morgul Bismarck singletrack loop envisioned in the TSA plan.

## **Eldorado Mountain/Doudy Draw TSA Plan**

The Eldorado Mountain/Doudy Draw Trail Study Area is the second of the trail study projects to be addressed by the OSMP staff.

Unlike the Marshall Mesa/Southern Grasslands, this TSA includes large areas that have historically experienced significant public visitation, but are without designated trails. The area also contains significant natural resources in the Eldorado Mountain HCA and in the Spring Brook portion of the Natural Area.

Recreational visitors, including climbers, hikers, equestrians, bicyclists, and dog walkers were understandably concerned about the TSA's effect upon their access opportunities, and provided a

unified set of trail recommendations for consideration. BATCO supported these recommendations.

Not too surprisingly, the plan's public meetings were well attended. The debate was vigorous, and the old arguments from the VMP discussions were delivered again. Differences of opinion within the OSMP staff further complicated the process.

BATCO was extensively involved in the study project. Our representatives attended all the public meetings hosted by OSMP and participated in a group effort by the Boulder Outdoor Coalition (another organization of recreational stakeholder groups) to develop a unified set of trail proposals for the area. More information about the coalition is available at [Boulder Outdoor Coalition](#).

On December 8, 2006, the OSMP staff released the final TSA plan for Eldorado Mountain and Doudy Draw. The plan strives to find a balance between preserving sensitive resources and providing reasonable public access. It protects the Eldorado Mountain HCA and the Spring Brook portion of the Natural Area, while improving recreational access. New trails will be constructed, and additional user groups will be allowed to use some of the existing trails.

Approximately 8.7 miles of new trails are designated in the TSA, bringing the total trail length from the existing 7.2 to 15.9 miles. The newly designated trails include:

- Doudy Draw-Flatirons Vista Trail Loops (2.7 mi.)
- Fowler to Doudy Draw Trail (1.8 mi.)
- Doudy Draw-Spring Brook Loop Trail (1.8 mi.)
- Post Office Trail (0.1 mi.)
- Mickey Mouse Access Trail (0.5 mi.)
- Goshawk Ridge Trail (1.8 mi.)

Opportunities for mountain bikers will be significantly expanded, including provisional bike access to Eldorado Canyon State Park; stacked loop trail opportunities in the Doudy Draw, Spring Brook, and Flatirons Vista areas; and bike access to the Doudy Draw Trail. Providing new bicycle trails west of Broadway and Highway 93 is a departure from a long-standing previous policy of prohibiting new bicycle trails in this area. An area for hang gliders will also be provided at the northern edge of Flatirons Vista on an experimental basis.

To protect area resources, the TSA plan proposes closing and restoring more than 20 miles of existing undesignated trails, and incorporates a number of new limitations on historical use patterns. Visitors who confine their activities to the designated trails will benefit from the extended TSA infrastructure, while off-trail users will have new limitations on traditional accesses. In particular: bikes and dogs are prohibited on new trails within the Eldorado Mountain HCA; dogs are limited to on-leash, on-trail in the Spring Brook area; equestrians are limited to on-trail access in the HCA and Spring Brook areas and will not be eligible to apply for off-trail permits in either area; and, seasonal closures are proposed for the northern Flatirons Vista and Community Ditch areas.

Details of BATCO's recommendations, process participation, and links to the final TSA plan and other documents are available on-line at [BATCO EM/DD TSA](#).

## **Boulder County Parks & Open Space Trails:**

### **Heil Valley Ranch/Lyons Trails**

Boulder Area Trails Coalition  
1705 14<sup>th</sup> Street, Boulder, CO 80302  
Phone: 303-485-2162

[www.batco.org](http://www.batco.org)

The 2005 the BCPOS analysis of possible trail connections between Hall Ranch, Heil Valley Ranch, and the Town of Lyons resulted in a plan to make the connections a reality (visit [Boulder County Hall-Heil Trails](#) for more information).

Because of private property issues, the plan left unclear the details of the final connections to Lyons and of the associated trailhead. We are delighted to report that the County has resolved the private property concerns through the recent purchase of the Olson property on the southern edge of Lyons. The County and Town of Lyons have begun a series of meetings to complete the trailhead design during 2007.

During the summer and fall of 2006, volunteers began constructing the second trail loop at Heil Valley Ranch (the Wild Turkey Trail). The County plans to complete the loop trail early in 2007 and will subsequently begin the construction of the Lyons connector trail.

BATCO supported the volunteer trail projects and sponsored a County GOCO Grant request that resulted in a \$250,000 award to help fund the Olson purchase, and future trails and trailhead construction.

### **Walker Ranch Trails**

This year, the County rebuilt the South Boulder Creek Trailhead at Walker Ranch and completed a new trail connecting the trailhead to the Meyers Gulch Trailhead. The reconstruction temporarily closed the South Boulder Creek Trailhead, but the trailhead is now reopened as the Walker Loop Trailhead. BATCO sponsored a County GOCO Grant that funded the construction. We have also requested BCPOS to construct a much-needed reroute of "The Wall" portion of the Walker Ranch Loop in 2007, and offered to help fund the project.

### **Mud Lake/Caribou Trails**

The County completed the Mud Lake trails and trailhead, and has plans for additional trail construction at Caribou Ranch. The intent is to create more trails in the north of the ranch with access via a new bridge over the creek. Depending upon results from the Forest Service's review of its Caribou Travel Management Plan, the new trails may include a connection northward to the Sourdough Trail via the old Switzerland Trail railroad grade.

### **Rock Creek/Coal Creek Trails**

The Rock Creek and Coal Creek trail system design consists of two trails that follow Rock and Coal Creeks, beginning west of Superior and continuing to the east County line, where the trails will merge. Most of the Coal Creek Trail is already a reality, stretching from Coal Creek Drive west of Superior to 120th Street east of Lafayette.

The County's recent acquisition of the Stephenson Nelson property allows planning and design of the Rock Creek and Coal Creek confluence, connection with Lafayette's Flagg Park, and a potential connection across State Highway 7 to the Erie trail system.

The County continues to address the missing segments of the Rock Creek Trail. With the completion of the C-470 Northwest Parkway, the County connected the Lafayette end of the Rock Creek trail to Dillon Road. Plans to complete the connection from Dillon Road, under Highway 287, and to the Rock Creek Farm are waiting approval for a crossing of BNSF Railroad.

The County also completed the preliminary design for a Coal Creek Trail connection between Superior Town Hall and the Mayhoffer/Singletree Trail.

## **Longmont-to-Boulder(LOBO) Trail**

The Transportation Department has ongoing plans to complete a Longmont-to-Boulder (LOBO) regional transportation alignment.

In 2005, the County used transportation tax funds to build an underpass at Highway 52 to connect the Niwot trail system with the Gunbarrel Cottontail Trail. This year, additional transportation tax money funded completion of the connection's trail component.

The County also completed a master plan for Niwot Trails during 2006. Eventually, portions of these Gunbarrel and Niwot trails, along with Boulder and Longmont trails, will complete the LOBO trail. The Niwot plan identifies two alternative alignments to make the connection to Longmont: one follows 83rd Street and then parallels the Diagonal Highway, while the other follows Dry Creek farther to the east. BATCO supports the Dry Creek alignment because of its higher quality, rural nature. The feasibility of implementing the route will determine the final alignment selection.

The Transportation Department also plans to complete additional connections to the LOBO Trail to the west. Federal Funding has been approved for a trail connection between Tom Watson Park and the Cottontail Trail, a connection from Lookout Road to the County's Twin Lakes Park is being studied, and a preliminary design for a Four Mile Creek Trail connection and railroad underpass has been completed for submission to the railroad. Various environmental reports and right-of-way plans are also in process.

## **Feeder Canal**

The southern portion of the Boulder Feeder Canal Trail is the last of the five BATCO trails approved by the OSMP Board of Trustees in 2000. The County Transportation Department has assumed leadership for this project and will provide the funding. To date the focus has been on various planning activities. An Environmental Resource Study was completed in May of 2003, a City of Boulder Water Utility Department-requested CEAP was approved by the City Council in April of 2006, and the County is now in the process of identifying the feasibility of different trail alignments.

## **Forest Service Trails:**

In 2005, the Forest Service completed a management plan for the Brainard Lake Recreational Area. The primary goal of the plan was a reduction in the intense recreational pressure around Brainard Lake through the development of new facilities farther to the east. As a consequence, the Forest Service intends to upgrade winter trails in the area to all-season use. Improvements are planned for the Little Raven, Waldrop, and South Saint Vrain Trails. The environmental and physical sustainability of the trails will be enhanced and the quality of the visitor experience improved for hikers and mountain bikers. Unfortunately, the Little Raven and Waldrop Trails will not be open to equestrians.

## **Little Raven Trail**

During 2006, volunteer organizations ran several trail projects on the Little Raven Trail south of Brainard Lake. These projects resulted in the construction of sustainable reroutes for four different segments of the trail, and various other improvements along the alignment. The reroutes

removed the trail from sensitive wetlands and created new alignments with sustainable grades. BATCO is participating in additional project planning for 2007 to build boardwalks over the remaining wetland areas.

## **Waldrop Trail**

The Forest Service constructed a new bridge over the South Saint Vrain Creek on the western Waldrop Trail and began trail improvements between the bridge and the South Saint Vrain Trail. During 2007 the Forest Service plans to use volunteer labor to construct a wetland boardwalk on the western Waldrop and to begin design of a connection to the east between the Waldrop and the Sourdough Trail.

## **South Saint Vrain Trail**

A short portion of the western South Saint Vrain Trail presently lies within the Indian Peak Wilderness. To improve the quality of the trail and to allow bike access, the Forest Service plans to reroute the trail to avoid the wilderness section. Planning and design of this reroute is also scheduled for 2007.

## **BATCO Trails Map Update**

Last year we released the BATCO Boulder County Comprehensive Trail Map. For the first time ever, a single map shows all designated trails in Boulder County, shows which routes are open to what user groups, and indicates which public land agency owns and manages them. The map was extremely well received. We've raised more than \$40,000 from sales of the first edition, and are in the process of obtaining funding for a second edition. If you'd like to help with the map update or map sales, please contact us.

BATCO committed to investing the proceeds from map sales in local trail projects. This past year we supported the Boulder City OSMP trail projects at Marshall Mesa and offered the County a \$12,500 grant to build a much needed trail reroute at Walker Ranch. We will continue to put our money where our mission is to improve the public lands we all know and love.

If you haven't already done so, please buy a map--they make great gifts-- and help us spread the word about this innovative project. You can view a sample of the map, print an order form, or find a list of retailers that carry the map on the BATCO website at [BATCO Map](#).

## **New BATCO Website Addresses**

We've added several new website addresses to make it easier to stay in touch with us. You can now reach the BATCO website via these URLs:

[www.batco.org](http://www.batco.org)

[www.bouldertrails.org](http://www.bouldertrails.org)

[www.bouldertrails.com](http://www.bouldertrails.com)

## **Yearly Membership Renewal**

Boulder Area Trails Coalition  
1705 14<sup>th</sup> Street, Boulder, CO 80302  
Phone: 303-485-2162

[www.batco.org](http://www.batco.org)

BATCO memberships are for the calendar year. We ask that members renew in the spring. Memberships received during the last quarter of the year are considered paid in full for the next year. You can use the membership form on this website at [Membership Application](#) to avoid the spring rush!



## Major trail projects from 1996 to 2007

Since BATCO's founding, the organization has supported public trails in Boulder County by joining with the various land management agencies and other nonprofit organizations to design, build, and maintain area trails. BATCO's contributions include sponsoring, organizing, publicizing, and staffing volunteer trail projects. Trail projects in which BATCO has participated include:

Year	Day-Month	Project Location	Vols.	Hrs.	Land Agency	Project Description
1996	18-May	Rabbit Mountain	32	160	Boulder County	New Eagle Wind Trail construction
	1-Jun	Rabbit Mountain	81	405	Boulder County	New Eagle Wind Trail construction
	12-Jun	Marshall Mesa	15	60	Boulder City	Trail maintenance
	27-Jul	Walker Ranch	65	260	State Park	Waterbars, south end of Boulder Creek Trail
	10-Aug	Sourdough Trail	12	60	Forest Service	Trail improvements at south end
1997	7-Jun	Rabbit Mountain	150	600	Boulder County	New trail construction from lot to saddle
	25-Jun	Marshall Mesa	15	60	Boulder City	Trail maintenance
	26-Jul	Walker Ranch	40	160	State Park	Reroute at south end of Boulder Creek Trail
	16-Aug	Ceran St. Vrain	40	200	Forest Service	New trail segment at north end
1998	6-Jun	East Beech	140	560	County & City	New Lefthand Trail construction
	23-Jun	Marshall Mesa	15	60	Boulder City	Trail maintenance
	18-Jul	Walker Ranch	47	188	Boulder County	Boulder Creek & Columbine Gulch Trail
	8-Aug	Rattlesnake Gulch	20	80	State Park	Trail Improvements
	22-Aug	Sourdough Trail	20	100	Forest Service	Improvements south of Brainard Lake Rd.
1999	5-Jun	Betasso	70	280	Boulder County	New trail section
	15-Jun	Marshall Mesa	15	60	Boulder City	Trail maintenance
	26-Jun	Walker Ranch	20	80	State Park	Waterbars, south end of Boulder Creek Trail
2000	3-Jun	Rock Creek Farm	60	240	Boulder County	Trail improvement, crusher fines
	14-Jun	Marshall Mesa	20	80	Boulder City	Trail maintenance
	15-Jul	Rattlesnake Gulch	20	80	State Park	Trail improvements
	26-Jul	Hell Valley Ranch	50	225	Boulder County	Wapiti & Ponderosa Trail construction
	5-Aug	Sourdough Trail	40	180	Forest Service	Improvements north of Brainard Lake Rd.
	30-Aug	Hell Valley Ranch	50	225	Boulder County	Wapiti & Ponderosa Trail construction
	21-Oct	Hell Valley Ranch	35	158	Boulder County	Wapiti & Ponderosa Trail construction
2001	2-Jun	Hell Valley Ranch	145	653	Boulder County	Wapiti & Ponderosa Trail construction
	20-Jun	Marshall Mesa	40	160	Boulder City	Trail maintenance
	14-Jul	Rattlesnake Gulch	25	100	State Park	Trail improvements
	11-Aug	Sourdough Trail	60	270	Forest Service	Improvements north of Brainard Lake Rd.
	6-Oct	Betasso	20	80	Boulder County	Bummer's Rock to Boulder Canyon Trail
2002	11-Jul	Foothills Trail	12	48	Boulder City	Trail maintenance
	18-Jul	Hell Valley Ranch	25	100	Boulder County	Lower Wapiti Trail improvements
	25-Jul	Rattlesnake Gulch	12	48	State Park	Trail improvements
	17-Aug	Sourdough Trail	25	100	Forest Service	Improvements south of Beaver Reservoir
	25-Aug	Hall Ranch	34	136	Boulder County	Antelope Valley Trail construction
	29-Sep	Baptiste Trail	17	68	Forest Service	Improvements south of Beaver Reservoir
2003	8-Jun	Ceran St. Vrain	34	159	Forest Service	Trail Improvements & maintenance
	25-Jun	Marshall Mesa	19	57	Boulder City	Trail maintenance

	23-Aug	Sourdough Trail	19	86	Forest Service	Improvements south of Beaver Reservoir
	6-Sep	Walker Ranch	35	140	Boulder County	Crescent Meadow Trail alternative alignment
<b>2004</b>	10to13-May	Marshall Mesa	60	238	Boulder City	4 day New Vista trail project
	5-Jun	Bitterbrush Trail	60	240	Boulder County	Trail improvements & maintenance
	26-Jun	West Magnolia	33	149	Forest Service	Forest Service Trail maintenance & signage
	10-Jul	West Magnolia	29	131	Forest Service	Forest Service Trail maintenance & signage
	21-Jul	Heil Valley Ranch	22	66	Boulder County	Trail maintenance
	07-Aug	Sourdough Trail	47	235	Forest Service	New trail construction north of Brainard Road
	21-Aug	Sourdough Trail	31	163	Forest Service	New trail construction north of Brainard Road
	18-Sep	Sourdough Trail	9	61	Forest Service	New trail construction north of Brainard Road
<b>2005</b>	9 to 11-May	Heil Valley Ranch	54	212	Boulder County	3 day New Vista trail project
	11-Jun	Mud Lake	35	140	Boulder County	New trail construction
	18-Jun	Davidson Mesa	70	290	Louisville	Trail improvements & new trail construction
	25-Jun	S. St. Vrain Trail	38	190	Forest Service	New trail construction east of Sourdough Trail
	25-Jul	Mud Lake	37	148	Boulder County	New trail construction
	May-Jul	West Magnolia	18	69	Forest Service	Kiosk construction
	30-Jul	West Magnolia	20	80	Forest Service	Kiosk installation & trail improvements
	17-Sep	Marshall Mesa	70	280	Boulder City	New trail construction
	24-Sep	Buffalo Creek	110	220	Forest Service	Trail reroute & improvements w/IMBA
<b>2006</b>	22-Apr	Marshall Mesa	15	30	Boulder City	Crewleader training project
	8 to 10-May	Marshall Mesa	57	228	Boulder City	3 day New Vista trail project
	3-Jun	Marshall Mesa	100	400	Boulder City	New trail construction
	22-Jul	Little Raven Trail	38	152	Forest Service	2 major trail reroutes
	26-Aug	Little Raven Trail	26	109	Forest Service	Trail reroute, bridge & improvements
	16-Sep	Heil Valley Ranch	93	435	Boulder County	New trail loop construction
	21-Sep	Heil Valley Ranch	10	63	Boulder County	SmartWool new trail loop construction
	30-Sep	Buffalo Creek	133	599	Forest Service	Trail improvements w/IMBA
	7-Oct	High Plains Trail	80	341	Boulder City	New trail construction
	4-Nov	Heil Valley Ranch	85	395	Boulder County	New trail loop construction
<b>2007</b>	2-Jun	Heil Valley Ranch	80	455	Boulder County	Wild Turkey Trail construction
	20&28-Jun	Little Raven Trail	3	21	Forest Service	Bog bridge design & sills cutting
	11-Jul	Little Raven Trail	7	21	Forest Service	Bog bridge materials work party
	14-Jul	Little Raven Trail	19	86	Forest Service	50+' of bog bridge construction
	1-Aug	Little Raven Trail	4	20	Forest Service	Bog bridge design & sills cutting
	4-Aug	Little Raven Trail	26	168	Forest Service	100+' of bog bridges, plus new trail alignment