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Form **990-EZ**

2008

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

Short Form

Return of Organization Exempt From Income Tax

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

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other org. anizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

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

Open to Public Inspection

В	For the 2008 calendar year, or tax year beginning 7/01 , 2008, and ending 6/30		, 2009
Έ		mployer	identification number
\blacksquare		02-0	758897
H	Name change label or D/BA COLORADO C-3 ROUNDTABLE E T	elephone	number
H	Initial return PO BOX 1620	(720)	214-6355
一	Specific DENVER, CO 80201	<u> </u>	
	Application pending tions.	<u>umber</u>	
	• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). G Accounting meth		Cash Accru
			ganization is not
			edule B (Form 990,
	Organization type (check only one) = [22] 301(c) (3) = (msert no) = [4347(a)(1) 01 [327]		
	Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are no \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.	rmally rn	not more than
L	Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ	⊳\$	179,86
Pa	rt I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the Instr		
	1 Contributions, gifts, grants, and similar amounts received	1	179,67
	2 Program service revenue including government fees and contracts	2	2.570
	3 Membership dues and assessments	3	
	4 Investment income	4	18
	5a Gross amount from sale of assets other than inventory 5a	┢┷	<u> </u>
	b Less' cost or other basis and sales expenses 5b	1	
R	c Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a) (att sch)	5 c	
E	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here	50	
REVEN			
Ü			
-	reported on line 1) 6a		
	b Less direct expenses other than fundraising expenses 6b	_	
ļ	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6 c	
	7a Gross sales of inventory, less returns and allowances 7a		
	b Less cost of goods sold. 7b		
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7 c	
l	8 Other revenue (describe >)	8	
	9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	179,8
	10 Grants and similar amounts paid (attach schedule)	10	
_	11 Benefits paid to or for members	11	<u> </u>
X	11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors	12	31,5
Ë	13 Professional fees and other payments to independent contractors	13	5,8
N S	14 Occupancy, rent, utilities, and maintenance	14	
S E S	15 Printing, publications, postage, and shipping OGDEN. UT	15	
٦	16 Other expenses (describe ► SEE STATEMENT 1	16	116,6
- {	17 Total expenses (add lines 10 through 16)	17	154,0
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	25,7
Α		-10	25, 10
SET	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	1,, 1	25 21
Ē		19	25,3
s	20 Other changes in net assets or fund balances (attach explanation)	20	F1 11
	21 Net assets or fund balances at end of year Combine lines 18 through 20	21	51,13
ra	til Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 inste		
	(See the instructions for Part II) (A) Beginning of year		(B) End of year
22	Cash, savings, and investments 1,066		46,52
23	Land and buildings	23	
	Other assets (describe > SEE STATEMENT 2) 24,286	. 24	7,1
24	Total assets 25, 352	. 25	53,63
25			
25	Total liabilities (describe ► SEE STATEMENT 3)	. 26	∠,45
25 26	Total liabilities (describe ► SEE STATEMENT 3) 0 Net assets or fund balances (line 27 of column (B) must agree with line 21) 25, 352		2, 49 51, 13

	990-EZ (2008) COLORADANS FOR				-075	58897 Page 2
Par	t III Statement of Program S	ervice Accomplishments	(See the instruction	ons.)		Expenses
What i	is the organization's primary exempt purpose? S	EE STATEMENT 4			(Rea	uired for 501(c)(3)
Desc	ribe what was achieved in carrying out	the organization's exempt purp	oses In a clear and co	ncise manner.	and i	(4) organizations and
descr	ribe the services provided, the number	of persons benefited, or other i	relevant information for	each	4947	(a)(1) trusts; optional
, , ,	ram title	<u> </u>		-	for o	thers)
28	SEE STATEMENT 5					
	(Grants \$) If	this amount includes foreign gi	rants check here		28 a	25,116.
29	SEE STATEMENT 6	the amount molades foreign g	anto, check here			
23	SEC SINICHENI O				ł	
	(Grants \$) If	this amount includes foreign gi	rants, check here	>	29 a	72,968.
30	DISTRIBUTION OF BALLOT (GUIDE				
					1	
	(Grants \$) If	the opposite rollides foreign			20-	30,778.
21		this amount includes foreign gi	rants, check here		30 a	30,116.
31	Other program services (attach sched					
		this amount includes foreign gi	rants, check here	▶ _	31 a	100 000
	Total program service expenses (add		<u> </u>	<u> </u>	32	128,862.
Par	t IV List of Officers, Director	s, Trustees, and Key Em	ployees. (List each o	ne even if not cor	npens	sated See the instrs.)
		(b) Title and average hours	(c) Compensation (If	(d) Contributions	to	(e) Expense account
	(a) Name and address	per week devoted	not paid, enter -0)	employee benefit pla deferred compensa	ns and	and other allowances
	TIP MANGATONI	to position		deterred compensa		
	ER_MAYSMITH	CHAIRMAN	1	į	0.	0.
	7 AKRON COURT	0		1		
DEN	IVER, CO 80238					
BET	H GANZ	DIRECTOR	0.		0.	0.
	11 W 30TH AVENUE	· 1	1			- '
	VER, CO 80212	·- ~				
	 	БТВПСТОВ				
	<u>CLEMMONS</u>	DIRECTOR	1		0.	0.
	57 S_DAYTON_ST					
AUR	RORA, CO 80014	i				
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	(total the diagram of the control o		Yes	No
22	Did the account of the first of		163	140
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33	L.	Х
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes	34		Х
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T			
á	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and			l
	proxy tax requirements?	35a		<u> X</u>
	o If 'Yes,' has it filed a tax return on Form 990-T for this year?	35 b		
	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N	36		X
	a Enter amount of political expenditures, direct or indirect, as described in the instructions Did the expenditure file Form 1130 POL fee the user?	276		v
	Did the organization file Form 1120-POL for this year?	37b		X
38 8	a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		X
ŀ	o If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	501(c)(7) organizations Enter			
á	a Initiation fees and capital contributions included on line 9 N/A			
ŀ	Gross receipts, included on line 9, for public use of club facilities N/A			
40 a	501(c)(3) organizations Enter amount of tax imposed on the organization during the year under		1	
	section 4911 ▷ 0., section 4912 ▷ 0., section 4955 ▷ 0.			
	• 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' complete Schedule L, Part I	40 b		Х
•	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.			
	Enter amount of tax on line 40c reimbursed by the organization]		
•	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e		х
	List the states with which a copy of this return is filed P NONE			
	The books are in care of PRIPPLE CREEK BUSINESS SOLUTION Located at PO BOX 7337 DENVER CO ZIP + 4 P 80207 At any time during the calendar year, did the organization have an interest in or a signature or other authority over a		 Yes	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country.	42b		X
(See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts. At any time during the calendar year, did the organization maintain an office outside of the U S? If 'Yes,' enter the name of the foreign country.	42c		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the tax year		⊳ [] Yes	N/A N/A
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead		162	
	of Form 990-EZ	44		<u>X</u>
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	45	L	X
BAA	TEEA0812L 01/14/09 Fo	rm 990	-EZ	2008)

orm 990-E	EZ (2008) COLORADANS FOR FAIF			02-07588			age 4
Part VI	Section 501(c)(3) organization and complete the tables for line	s only. All section 5 es 50 and 51.	501(c)(3) organiza	itions must answer que SEE ST.			9
46 Did th	ne organization engage in direct or indire	ct political campaign ac	tivities on behalf of or		;	Yes	No
	ublic office? If 'Yes,' complete Schedule (ne organization engage in lobbying activit	·	Schedule C, Part II		46 47	Х	X
	e organization operating a school as desc			plete Schedule E	48		X
	he organization make any transfers to an	•	related organization?		49a		X
b If 'Ye	es,' was the related organization(s) a sect	ion 527 organization?			49b		L
50 Comp	olete this table for the five highest compe ved more than \$100,000 of compensation	nsated employees (other from the organization	er than officers, director If there is none, enter	ors, trustees and key emplo 'None'	yees) wh	o eac	h
_	Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		pense int and lowance	
NONE		_	·		_		
				 			
							
Total number	of other employees paid over \$100,000						
51 Com	olete this table for the five highest compe	nsated independent con	ntractors who each rec	eived more than \$100,000	of compe	ensatio)n
from	the organization. If there is none, enter 'l	None.'		, ,			
·	(a) Name and address of each independent contra	ractor paid more than \$100,000		(b) Type of service	(c) Com	pensatio	'n
NONE							
-			1				
		 · · · · · · · · · · · · · · · · · ·	***	- 			
							
Total numb	per of other independent contractors rece		mpanying schedules and stati	ements, and to the best of my knowl	edge and b	elief, it is	
	Under penalties of perjury, I declare that I have examinue, correct, and complete Declaration of preparer (other than officer) is based on a	all information of which prepa	rer has any knowledge			
Sign	1 / Wagan Van Ens			1May 14. 2	DIO -		
Here	Signature of officer	N. 1	л _и ·.	Date)			
	Type or prust name and title) vector,	Authoriz	ed Signer			
			Date .	Check if Prepi	arer's Identi	tying Nu	mber
Paid Pre-	Preparer's signature		5/15/		029342		
parer's	Lucium if polf	& COMPANY, P.C.					
Use Only	employed), 1256/ E CORNELL			10001	7-1543		
Office	ZIP + 4 AURORA, CO 8001	4-3323		Phone no ► (303)	<u> 337-</u>	4288	,

May the IRS discuss this return with the preparer shown above? See instructions

►X Yes No

Form **990-EZ** (2008)

Only

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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Total

COLORADANS FOR FAIRNESS & EQUALITY D/BA COLORADO C-3 ROUNDTABLE

Employer identification number 02-0758897

Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) Δ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h 11 Type III - Functionally integrated d l Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11 g (i) a family member of a person described in (i) above? 11 g (ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the organizations the organization supports h (v) Did you notify the organization in col (i) of (i) Name of Supported (II) EIN (III) Type of organization (IV) Is the (vi) Is the (VII) Amount of Support (described on lines 1.9 above or IRC section (see instructions)) organization in col (i) organized in the US? Organization rganization in col (i) listed in your your support? governing document? Yes Yes No Yes No No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total beginning in) Gifts, grants, contributions and membership fees received (Do not include 'unusual grants') 405,889 256 179,675 585,820. Tax revenues levied for the organization's benefit and either paid to it or expended 0. on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to 0. the public without charge 0. 405,889 256. 0 179,675 585,820. Total. Add lines 1-3. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount 514,928. shown on line 11, column (f) Public support. Subtract line 5 from line 4 70,892. Section B. Total Support Calendar year (or fiscal year beginning in) ▷ (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 0. 405,889 256. 0. 179,675. 7 Amounts from line 4 585,820. Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 2 11,444 3,013 187 14,646. similar sources Net income form unrelated business activities, whether or not the business is regularly 0. carried on Other income. Do not include gain or loss form the sale of capital assets (Explain in Part IV) 0. **Total support.** Add lines 7 through 10 600,466. Gross receipts from related activities, etc. (see instructions) 12 0. First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) X organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) % 14 15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f 15 % 16a 33-1/3 support test - 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support test – 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test — 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization **b 10%-facts-and-circumstances test** — **2007.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. **>** Þ 18 **Private foundation.** If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions BAA Schedule A (Form 990 or 990-EZ) 2008

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I) Section A. Public Support Calendar year (or fiscal yr beginning in)► (a) 2004 (c) 2006 (d) 2007 (f) Total **(b)** 2005 (e) 2008 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1-5 7a Amounts included on lines 1. 2, 3 received from disqualified persons. **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 c Add lines 7a and 7b Public support (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal yr beginning in) > (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 9 Amounts from line 6 10 a Gross income from interest. dividends, payments received on securities loans, rents, royalties and income form similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business 11 activities not included inline 10b. whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (add tns 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here **>** Section C. Computation of Public Support Percentage 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 % Section D. Computation of Investment Income Percentage Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 % 19a 33-1/3 support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization > b 33-1/3 support tests - 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions 20

Schedule	A (Form 9	90 or 9	90-EZ)	2008	COL	ORAD.	ANS	FOR	FA	IRNE	SS 8	EQ	UALIT	'Y	02-0	758897		Page 4
Part IV	Suppl	ement	al Inf	ormat	ion. (Compl	ete 1	this p	art	to pro	ovide	the	explai	nation red	uired by	Part II,	line 10;	×
	Part II	, line	17a o	r 17b;	or Pa	art_IÍI,	lıne	12.	Prov	ndė a	ny c	ther	addıtı	ry nation req onal infori	mation. (see ins	tructions	s)
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Schedule A (Form 990 or 990-EZ) 2008

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2008

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► To be completed by organizations described below.

► Attach to Form 990 or Form 990-EZ.

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

• Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

• Section 501(c)(3) organizations: complete Parts I-A and B Do not complete Part I-C

• Section 527 organizations, complete Part I-A only

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2008

e 5	section 501(c)(3) organization:	s that have filed Form 5/68 (election under	r section 501(h)). Cor	mplete Part II-A. Do not	complete Part II-B.
0 S	Section 501(c)(3) organization: Part II-A	s that have NOT filed Form 5768 (election	under section 501(h))) Complete Part II-B. De	o not complete
		,' to Form 990, Part IV, line 5 (Proxy Tax), t	then		
		rganizations. Complete Part III			
	of organization	<u> </u>		Employer identifica	ition number
COI	ORADANS FOR FAIRNE	SS & EQUALITY		02-075889	7
Par	To be completed See the instruction	by all organizations exempt under ns for Schedule C for details.	r section 501(c) a	nd section 527 org	anizations.
1	Provide a description of the	organization's direct and indirect political c	ampaign activities in	Part IV	
2	Political expenditures			⊳ \$	
3	Volunteer hours				
Par	To be completed See the instruction	by all organizations exempt under ns for Schedule C for details.	r section 501(c)(3	8).	
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	⊳ \$	
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	⊳\$	
3		section 4955 tax, did it file Form 4720 for			Yes X No
	Was a correction made?		•		Yes No
t	If 'Yes,' describe in Part IV				
	t I-C To be completed	by all organizations exempt under ns for Schedule C for details.	r section 501(c),	except section 501	(c)(3).
1	Enter the amount directly exp	pended by the filing organization for section	n 527 exempt functio	n activities ▷\$	
2			·		
2	function activities	g organization's funds contributed to other	organizations for sec	tion 527 exempt ▷\$	
3	Total of direct and indirect ex Form 1120-POL, line 17b	xempt function expenditures. Add lines 1 a	nd 2 and enter here a	and on ►\$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	made Enter the amount paid received and promptly and d	and employer identification number (EIN) of and indicate if the amount was paid from irectly delivered to a separate political organical space is needed, provide information in	the filing organizatio anization, such as a s	n's funds or were politic	al contributions
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's own internal funds. If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter 0
		<u> </u>			

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

•					
Schedule C (Form 990 or 990-EZ) 200 Part II-A To be comp	leted by organi	FOR FAIRNESS & E zations exempt under the instructions for So	r section 501(c)(3)	02-0758 that filed Form 5768	
		ongs to an affiliated group	chedule C for detail		
		ecked box A and 'limited co	introl' provisions apply		
	Limits on Lobby	ing Expenditures — ans amounts paid or incur		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditi	ures to influence p	ublic opinion (grass roots lo	obbying)		
b Total lobbying expenditi	ures to influence a	legislative body (direct lob)	bying)	30,778.	
c Total lobbying expendite	ures (add lines 1a	and 1b)		30,778.	0.
d Other exempt purpose e	expenditures			123,299.	_ <u></u> _
e Total exempt purpose e	xpenditures (add li	nes 1c and 1d)		154,077.	0.
f Lobbying nontaxable an both columns	nount Enter the ar	nount from the following tal	ble in	30,815.	
If the amount on line 1e, col	umn (a) or (b) is	The lobbying nontaxable a	amount is		
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1,	,000,000	\$100,000 plus 15% of the excess	over \$500,000		
Over \$1,000,000 but not over \$	1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000		
Over \$1,500,000 but not over \$	17,000,000	\$225,000 plus 5% of the excess o	ver \$1,500,000		
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable a	amount (enter 25%	of line 1f)		7,704.	0.
h Subtract line 1g from lin	ne 1a Enter -0- ıf I	ine g is more than line a		0.	0.
i Subtract line 1f from lin	e 1c Enter -0- if h	ne f is more than line c		0.	0.
j If there is an amount of section 4911 tax for this	her than zero on e	ther line 1h or line 1i, did t	he organization file Fo	rm 4720 reporting	Yes X No
	e organizations th	4-Year Averaging Period at made a section 501(h) e ns below. See the instructi	lection do not have to	complete all of the five gh 2f.)	
	Lob	bying Expenditures During	4-Year Averaging Per	iod	
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount				30,815.	30,815.
b Lobbying ceiling amount (150% of line 2a, column (e))		,			46,223.
c Total lobbying expenditures				30.778	30.778

f Grassroots lobbying expenditures

BAA

d Grassroots non-taxable amount

e Grassroots ceiling amount (150% of line 2d, column (e))

Schedule **C** (Form 990 or 990-EZ) 2008

7,704.

11,556.

0.

7,704.

Schedule C (Form 990 or 990-EZ) 2008 COLORADANS FOR FAIRNESS & EQUALITY		-075			Page 3
Part II-B To be completed by organizations exempt under section 501(c)(3) that have (election under section 501(h)). See the instructions for Schedule C for details	e NOT	filed	Form 5		-
	(a)		(b)	
	Yes	No	A	mount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of. a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?i Other activities? If 'Yes,' describe in Part IV					
j Total lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If 'Yes,' enter the amount of any tax incurred under section 4912					
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A To be completed by all organizations exempt under section 501(c)(4), sect 501(c)(6). See the instructions for Schedule C for details.	on 50	1(c)(5), or se	ction	
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Part III-B To be completed by all organizations exempt under section 501(c)(4), sect	on 50	1(c)(5), or se	ction	
501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part answered 'Yes.' See Schedule C Instructions for details.	III-A, d	quest	ion 3 is		
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of politica expenses for which the section 527(f) tax was paid).	l				
a Current year		2a			
b Carryover from last year		2b			
c Total		2с			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pol expenditure next year?	ss tical	4			
5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)		5			
Part IV Supplemental Information					
Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, a Also, complete this part for any additional information	nd Part	II-B, lı	ne 1ı		
		_ .	_ 	- -	-
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2cueding C (Loum agn of agn-FT) 5008 COTOKYDAN2	LOK LUTKNE22 & ECOUPTII	02-0/5889/	Page 4
Part IV Supplemental Information (d	ontinued)		
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FEDERAL STATEMENTS

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COLORADANS FOR FAIRNESS & EQUALITY D/BA COLORADO C-3 ROUNDTABLE

02-0758897

STATEMENT 1 FORM 990-EZ, PART I, LINE 16 OTHER EXPENSES

CONFERENCES, CONVENTIONS,	AND MEETINGS	\$	1,672.
DEPRECIATION		·	4,079.
OTHER EXPENSES			66.
POSTAGE & DELIVERY			654.
PRINTING & COPYING			198.
PROGRAM EXPENSES			107,746.
SUPPLIES			127.
TELEPHONE & TELECOMM			800.
TEMPORARY STAFF			1,275.
		TOTAL \$	116,617.

STATEMENT 2 FORM 990-EZ, PART II, LINE 24 OTHER ASSETS

	<u>BEGIN</u>	<u>NNING</u> _	<u>ENDING</u>
DUE FROM CFEAF MACHINERY AND EQUIPMENT	\$ 1 1	3,094. \$ 1,192.	0. 7,113.
	TOTAL \$ 2	4,286. \$	7,113.

STATEMENT 3 FORM 990-EZ, PART II, LINE 26 TOTAL LIABILITIES

		<u>BEGINNING</u>	ENDING
PAYROLL TAXES W/H	TOTAL	\$ 0. \$ 0.	\$ 2,498. \$ 2,498.

STATEMENT 4 FORM 990-EZ, PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE

PROMOTION OF CIVIL RIGHTS AND THE FIGHT AGAINST DISCRIMINATION.

STATEMENT 5 FORM 990-EZ, PART III, LINE 28 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

MEMBERSHIP PROGRAM: BUILT BROAD MULTI-ISSUE COALITION WORKING COLLECTIVELY TO INCLUDE ALL COLORADANS IN OUR DEMOCRATIC PROCESS IN BUILDING A JUST AND EQUITABLE STATE. COORDINATING THE CAPACITY OF GROUPS AND PROVIDING STRATEGIC RESOURCES.

2008

FEDERAL STATEMENTS

PAGE 2

COLORADANS FOR FAIRNESS & EQUALITY D/BA COLORADO C-3 ROUNDTABLE

02-0758897

NO

NO

STATEMENT 6 FORM 990-EZ, PART III, LINE 29 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

PUBLIC EDUCATION PROGRAM: EDUCATING COLORADANS ABOUT IMPORTANT PUBLIC POLICY ISSUES THAT AFFECT THEIR DAILY LIVES. THIS INCLUDES KNOWLEDGE OF AND ACCESS TO BETTER HEALTH, EDUCATION, ENVIRONMENTAL AND ECONOMIC OPPORTUNITY INFORMATION.

STATEMENT 7
FORM 990-EZ, PART VI
REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?

(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?