

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury

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)

2011 Open to Public

	nai Revenue Serv	1		nements	Inspection
	For the 2011	calendar year, or tax year beginning 07/01/11, and ending 06/30/	12		
В	Check if applicable	C Name of organization COLORADO COMMUNITY COLLEGE		D Employ	yer identification number
	Address change	SYSTEM FOUNDATION			
ΠĪ	Name change	Doing Business As		84-	1070271
=	•	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telepho	one number
\perp	Initial return	9101 E LOWRY BOULEVARD		720	-858-2704
	Terminated	City or town, state or country, and ZIP + 4	1		
$\overline{}$	Amended return	DENVER CO 80230		G Gross rece	eipts\$ 720,211
7		F Name and address of principal officer		G Gloss lece	1015
	Application pendin		H(a) Isthisag	group return for a	affiliates? Yes X No
			H(b) Are all at	Silvator and ale	d? Yes No
			, , , , , , ,		(see instructions)
				u, allaci a iisi	(see instructions)
<u> </u>	Tax-exempt statu				
<u>J</u>	Website	WWW.CCCS.EDU	H(c) Group ex		
	Form of organizat		Year of formation 1	.987	M State of legal domicite CO
F	art I	Summary			<u> </u>
	1 Briefly	describe the organization's mission or most significant activities:			
ø	TO	SUPPORT THE MISSION OF THE COLORADO COMMUNITY SYSTE	EM BY CREA	TING	
a	PAI	TNERSHIPS, DEVELOPING RESOURCES, AND ADVOCATING FOR	R THE VALU	E OF A	
& Governance	COL	MUNITY COLLEGE EDUCATION.			
Š	2 Check	this box I if the organization discontinued its operations or disposed of more than 2	25% of its net as	sets	
9	3 Number	r of voting members of the governing body (Part VI, line 1a)		3	11
ŝ	1	or of independent voting members of the governing body (Part VI, line 1b)		4	10
Activities	1	umber of individuals employed in calendar year 2011 (Part V, line 2a)		5	0
ਓਂ	1	umber of volunteers (estimate if necessary)		6	0
⋖	1	nrelated business revenue from Part VIII, column (C), line 12		7a	0
)	1	related business taxable income from Form 990-T, line 34		7b	0
	D Net un	elated business taxable income from Form 990-1, line 34	Prior Ye		Current Year
;	8 Contril	utions and grants (Part VIII, line 1h)		8,981	142,034
Revenue	Į.	m service revenue (Part VIII, line 2g)		0	0
jē	1	nent income (Part VIII, column (A), lines 3, 4, and 7d)	61	6,474	578,177
2	1			4,300	378,177
ร์	1	evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		9,755	720 211
2		evenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)			720,211
>	1	and similar amounts paid (Part IX, column (A), lines 1–3)	<u>+</u>	4,250	25,500
J	1	s paid to or for members (Part IX, column (A), line 4)		0	0
HISES FINSES	ı	s, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0	0
3		sional fundraising fees (Part IX, column (A), line 11e)		0	0
Expé	b Total f	undraising expenses (Part IX, column (D), line 25) 15,598			
ш	17 Other	expenses (Part IX, column (A), lines 11a-11d, 11-24e) RECEIVED		5,354	674,460
	18 Total e	xpenses Add lines 13–17 (must equal Part IX, colum e (A), line 25)		9,604	699,960
	19 Reven	ue less expenses Subtract line 18 from line 12		9,849	20,251
Net Assets or	8	NOV 1 6 2012 O	Beginning of Cu		End of Year
set	g 20 Total a	ssets (Part X, line 16)	12,49		599,975
Ž	21 Total I	abilities (Part X, line 26)	11,90		0
ž,			59	7,341	599,975
	Part II	Signature Block			
U	Inder penalties	of perjury, I declare that I have examined this return, including accompanying schedules and stater	nents, and to the b	est of my kn	owledge and belief, it is
tr	ue, correct, an	complete Declaration of preparer (other than officer) is based on all information of which prepare	r has any knowled	ge ,	
		501h -		111	12-12
Sig	gn 🔝	Signature of officer		Date	
He	- 1.	SHELLEY THOMPSON, EXECUTIVE DIRECT	IR		
		Type or print name and title			· · · · · · · · · · · · · · · · · · ·
_	Print/	ype preparer's name Preparer's signature	Date	Check	f PTIN
Pai	ia				□"
	narer	n D. ADAMS, CPA JASON D. ADAMS, CPA name POYSTI & ADAMS, LLC	· I	1/12 self-em	
	e Only			Firm's EIN	84-0524006
UB	·	400 S COLORADO BLVD STE 690	1		202 722 272
		address DENVER, CO 80246		Phone no	<u> 303-733-3796</u>
_		suss this return with the preparer shown above? (see instructions)			Yes No
Fo	r Paperwork	Reduction Act Notice, see the separate instructions.		_	Form 990 (2011)

Form 990 (2011) COLORADO COMMUN	ITY COLLEGE	84-1070271		Page 2
Part III Statement of Program Ser Check if Schedule O contain	rvice Accomplishments			
1 Briefly describe the organization's mission TO SUPPORT THE MISSION PARTNERSHIPS, DEVELOPIN COMMUNITY COLLEGE EDUCA	IG RESOURCES, AND			
2 Did the organization undertake any significal prior Form 990 or 990-EZ?	nt program services during the year	ir which were not listed on the	Ye	es X No
If "Yes," describe these new services on Sci 3 Did the organization cease conducting, or m		onducts, any program	П.,	.
services? If "Yes," describe these changes on Schedu	le O		Ye	s X No
Describe the organization's program service expenses Section 501(c)(3) and 501(c)(4) organits and allocations to others, the total expenses	rganizations and section 4947(a)(1) trusts are required to report the an		
4a (Code) (Expenses \$ PROVIDE STUDENT SCHOLAF ACTIVITIES AT VARIOUS C		I EDUCATIONAL	evenue \$)
4b (Code) (Expenses \$ PROMOTE THE EDUCATIONAL TRAINING AT COLORADO CO STATEWIDE ADVERTISING E	MMUNITY COLLEGES	OR HIGH TECH	evenue \$)
An (Code) (Europeen C	566,246 including grants of	of ¢	nuava ¢	
Ac (Code) (Expenses \$ ASSIST COMMUNITY COLLECT CAPITAL FOR PROJECTS, V DECISIONS REGARDING THE FULL SUPPORT OF THE COM	SES IN SECURING L WHILE ALLOWING EA EIR CAMPUSES AND	ONG-TERM DEBT FOR CH CAMPUS TO MAKE STUDENTS WITH THE	evenue \$,
4d Other program services (Describe in Sched (Expenses \$ II	dule O.) ncluding grants of \$) (Revenue \$)	
4e Total program service expenses ▶	663,670			000

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	ł	ł	
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,		i	
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	1		
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_	1	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			37
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted		v	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
_	VII, VIII, IX, or X as applicable	1		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	44-		x
_	complete Schedule D, Part VI	11a		
D	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	11b		X
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	110		
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
а	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110		
•	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
6	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	
ь	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	,		
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			_
	If "Yes," complete Schedule G, Part III	19	ļ	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<u> </u>	X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	L	<u> </u>

Part IV Checklist of Required Schedules (continued)

			V T	NI -
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization		Yes	No
41	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
£.J	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	x	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	İ		
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
•	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	ŀ	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior		l	
_	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?		1	
	If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	i		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	l	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	i		
	IV, and V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	1		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			Ì
_	19? Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and X 1c reportable gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За 3b b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial X account)? 4a If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts X Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods X and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was X required to file Form 8282? 7с | 7d | d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 8 organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring X 8 organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. 9a Did the organization make any taxable distributions under section 4966? 9ь b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter 10a a Initiation fees and capital contributions included on Part VIII, line 12 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter 11 11a a Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. 13 13a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14b

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 11 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 10 1b Enter the number of voting members included in line 1a, above, who are independent b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 7a one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a a The governing body? X 8b b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes." did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done X Did the organization have a written whistleblower policy? 13 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a a The organization's CEO, Executive Director, or top management official X 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a X with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization > THE ORGANIZATION 9101 E LOWRY BLVD. CO 80230 720-858-2704 DENVER

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe	box	(C) Position (do not check more than one box, unless person is both ar officer and a director/trustee)					(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) LINDA BOWMAN										
MEMBER	0.00	X						0	0	0
(2) JULIANNE HAEFELI MEMBER	0.00	x					İ	o	o	0
(3) NANCY MCCALLIN	0.00	^								
PRESIDENT	0.00	x		x				o	o	0
(4) LEONARD PERLMUTT				<u> </u>						
MEMBER	0.00	x						0	0	0
(5) RAYMOND WILDER										
MEMBER	0.00	X						0	0	0
(6) RUBEN VALDEZ					}	,		_		
MEMBER	0.00	X		ļ				0	0	0
(7) KAYLEEN HOLLINES		7.							o	o
TREASURER (8) MIKE BEASLEY	0.00	X	-			-		0		
SECRETARY	0.00	$ \mathbf{x} $						o	0	o
(9) PAUL HANLEY	0.00	-		-						
CHAIR	0.00	x						l	0	0
(10) DOUG SCHNEIDER	<u>_</u> _:			Г						
VICE-CHAIR	0.00	x	ì					0	0	0
(11) JOHN TREFNY		†								
MEMBER	0.00	X	}					0	0	0
(12) CHRIS CASTILIAN										
	0.00	X						0	0	0
(13) CLIFF RICHARDSON	0.00	x						o	o	o
(14) SHELLEY THOMPSON		A	\vdash	\vdash	\vdash	\vdash	\vdash			<u> </u>
	0.00		1	x	1	1	l	l	0	o

Part VII -

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

Name and title		Average hours per week (describe hours for	bo off	x, unle icera	Pos check ess pe nd a d	rson	than cost both	an ee)	Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-MISC)	c	Estima amour othe ompens from	ated at of er sation	
		related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(organiz and rel organiza	ation ated	
	TILMAN BISHOP BER	0.00						x	0	0				0
(16)														
(17)					1									
(18)														
(19)														
(20)								_						
(21)			_							<u> </u>				
(22)								<u> </u>						
(23)		1												
(24)							ļ					_		
(25)														
1b	Sub-total			J		1	⊥	>						
c d	Total from continuation she Total (add lines 1b and 1c)	eets to Part VII,	Sect	ion /	A			>			-			
2	Total number of individuals (i reportable compensation from	=		_	thos	e lis	ted a	abov	e) who received more than	1 \$100,000 in				
	- Sportable compondation nor	n the organization		Ť									Yes	No
3	Did the organization list any femployee on line 1a? If "Yes,								loyee, or highest compens	ated		3	х	
4	For any individual listed on lir organization and related orga													
5	individual Did any person listed on line									r ındıvıdual		4		X
Sec	for services rendered to the cation B. Independent Contraction		es,"	com	plet	e Sc	hedu	ıle J	for such person			5_	<u> </u>	<u> </u>
1	Complete this table for your f	ive highest comp												
		(A) d business address			ation.	101 1				(B) ption of services	<u>cur</u>	C	(C) ompensa	ation
			-											
			-							'				
2	Total number of independent			_					se listed above) who					
DAA	received more than \$100,000	of compensatio	n fro	m th	e org	janiz	zatioi	n ▶		0		Fo	m 99	0 (2011

Pa	irt V	<u>III Stater</u>	nent of Reve	enue						
							(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
Sis	10	Federated car		T 4- T				revenue		_512, 513, or 514
an	la L		. •	1a						
عَ ق	D	Membership o		1b						
FA	C	Fundraising e		1c						
ΩË	d	Related organ		1d						
Sign	е	Government grants		1e						
ibutio	f	All other contribution and similar amounts	ns, gifts, grants, s not included above	1f		142,034				
Program Service Revenue Contributions, Gifts, Grants Amounts	g	Noncash contribution Total. Add line	ons included in lines 1a	-1f	\$	•	142,034			
<u>e</u>		Total. Add lill	cs 1a-11			Busn. Code	142,001			
eun	2a					Bush. Code				f
ě	b					<u> </u>		 		
8	C									
2	d		<u> </u>			_				
n S	u									
gra	e	All ather was				<u></u>				
õ	T		ram service reve	enue		<u> </u>			l	L
-	_ 9	Total. Add line				▶				
	3		come (including	aiviaer	ias, intere	est,	570 177			570 177
1		and other sim	•				578,177	<u> </u>		578,177
	4		nvestment of tax	x-exem	pt bond p	_			 	<u> </u>
	5	Royalties				<u> </u>				
			(ı) Real		(II) F	Personal				[
1	6a	Gross rents								
	Ь	Less rental exps								
1	С	Rental inc or (loss)	L							
	d	Net rental inco Gross amount from			. ——			.=		
	/a	sales of assets	(i) Securities	<u> </u>	(11)	Other				
		other than inventory								
	b	Less cost or other	<u> </u>							
		basis & sales exps								
	С	Gain or (loss)	Ĺ		<u></u>					
	d	Net gain or (lo	oss)			•			<u> </u>	
0	8a	Gross income fr	om fundraising eve	ents						
Other Revenue		(not including \$								
ě		of contributions	reported on line 1c	;)						
۳		See Part IV, line	: 18	а						
th	b	Less direct ex	xpenses	ь						
0	С	Net income or	(loss) from fund	draising	events	<u> </u>				
			om gaming activitie							
		See Part IV, line		а						
	ь	Less. direct ex	xpenses	ь						
			r (loss) from gan	nına ac	tivities]	
			f inventory, less	- 1	<u></u>					
		returns and al	•	a						
	h	Less cost of		b						
			r (loss) from sale	- 1	venton				İ	ł
			cellaneous Revenue	22 01 111	ventory	Busn. Code				
	11a		- Tevende			Duali. Code	1		İ	-
									 	
	b					<u> </u>	<u></u>	 	 	
	C	A 11				ļ		 		
	d	All other rever				L				
	e	Total. Add line				P	700 011			<u> </u>
	12	Total revenue	e. See instructio	ns			720,211	0	0	5

Form 990 (2011) **Statement of Functional Expenses** Part IX

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

	Check if Schedule O contains a response	e to any question in this Pa	art IX		
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	25,500	25,500		····
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	··-			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	ļ			
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)			2.450	
а	Management	3,450		3,450	
b	Legal			0.000	
	Accounting	9,000		9,000	
d	Lobbying	-			
е	,		2 566		
f	Investment management fees	3,566			
g	Other	5,000		5,000 369	
12	Advertising and promotion	3,842			·
13	Office expenses	2,070	920	1,150	
14	Information technology				
15	Royalties				
16	Occupancy	2,660	2,660		
17	Travel		2,000		
18	Payments of travel or entertainment expenses	1			
40	for any federal, state, or local public officials	49,801	34,203		15,598
19	Conferences, conventions, and meetings	566,246			13,330
20	Interest	300,240	300,240		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization Insurance	1,126		1,126	
23		1,120		2/220	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If		1		
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	ACCOUNT TO THE PROPERTY OF THE PARTY OF THE	26,654	26,593	61	
_	AWARDS	509			
b b	DUES AND SUBSCRIPTIONS	470		470	
d	MEALS	66		66	
e	***				
25	Total functional expenses. Add lines 1 through 24e	699,960	663,670	20,692	15,598
26					
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if				
	following SOP 98-2 (ASC 958-720)				
					E 990 (2014

			(A)		(B)
			Beginning of year		End of year
1	Cash—non-interest bearing		27,766	1	29,535
2	Savings and temporary cash investments		79,671	2	94,738
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net			4	
5	Receivables from current and former officers, directors	s, trustees, key			
1	employees, and highest compensated employees. Co				
	Schedule L			5	
6	Receivables from other disqualified persons (as define	ed under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 50	1(c)(9) voluntary			
2	employees' beneficiary organizations (see instructions			6	
2 2 7		,		7	
ເ 8	Inventories for sale or use			8	
9	Prepaid expenses and deferred charges			9	
10	a Land, buildings, and equipment cost or				
	other basis Complete Part VI of Schedule D	10a			
	Less accumulated depreciation	10b		10c	
11	Investments—publicly traded securities		489,904	11	475,702
12	Investments—other securities See Part IV, line 11			12	-
13	Investments—program-related See Part IV, line 11			13	
14	Intangible assets			14	
15	Other assets See Part IV, line 11	11,900,000	15		
16	Total assets. Add lines 1 through 15 (must equal line	34)	12,497,341	16	599,975
17				17	
18	Grants payable			18	
19	Deferred revenue			19	
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability Complete Part IV	of Schedule D		21	
22	Payables to current and former officers, directors, trus	stees, key			
≝	employees, highest compensated employees, and dis	equalified persons			
	Complete Part II of Schedule L			22	
ت ₂₃	Secured mortgages and notes payable to unrelated th	nird parties	11,900,000	23	
24	Unsecured notes and loans payable to unrelated third	parties		24	
25	Other liabilities (including federal income tax, payable	s to related third			
	parties, and other liabilities not included on lines 17-24	4) Complete Part X	İ		
	of Schedule D			25	
26			11,900,000	26	(
	Organizations that follow SFAS 117, check here ▶	⋅X and complete			
8	lines 27 through 29, and lines 33 and 34.				
 27	Unrestricted net assets		386,626		347,253
B 28	Temporarily restricted net assets		188,015		230,022
≧ 29	Permanently restricted net assets		22,700	29	22,700
2	Organizations that do not follow SFAS 117, check	here ▶ and			
5	complete lines 30 through 34.				
27 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20	Capital stock or trust principal, or current funds			30	
g 31	Paid-in or capital surplus, or land, building, or equipm	ent fund		31	
<u> </u>				32	
2 33	Total net assets or fund balances		597,341	33	599,975
34	Total liabilities and net assets/fund balances		12,497,341	34	_599,975

orm	990 (2011) COLORADO COMMUNITY COLLEGE 84-1070271			Pag	<u>je 12</u>
	t XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response to any question in this Part XI				
4	Total revenue (must equal Part VIII, column (A), line 12)	1	72	20,2	211
1	Total expenses (must equal Part IX, column (A), line 25)	2		99,9	
2	Revenue less expenses Subtract line 2 from line 1	3		20,2	
-	·	4		97 , S	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	5		L7,	
5	Other changes in net assets or fund balances (explain in Schedule O)			_ , ,	
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,	6	5(99,9	975
n -	column (B))			<i>,</i> , ,	
ra	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			Yes	No
_	Accounting method used to prepare the Form 990			162	NO
1	Accounting method does to properly the first open and first open a		-		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			- 1	
	Schedule O				X
	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	x	Λ
	Were the organization's financial statements audited by an independent accountant?		2b		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			x	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	^	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
	issued on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	L	<u></u>
			For	ա 990	(2011

SCHEDULE A . (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

COLORADO COMMUNITY COLLEGE SYSTEM FOUNDATION

Employer identification number 84-1070271

P	art I	Reaso	on for Public Charity S	Status (All organizations i	must co	mpiete	tnis pa	π) Se	e instr	uction	S			-
Γhe	orga	nization is not a	a private foundation because	e it is (For lines 1 through 11, c	heck only	one box)							
1		A church, con	vention of churches, or asso	ociation of churches described in	n section	170(b)(1)(A)(i).							
2	П	A school desc	cribed in section 170(b)(1)(A	A)(ii). (Attach Schedule E)										
3	П	A hospital or a	a cooperative hospital servic	e organization described in <mark>sec</mark>	tion 170(b)(1)(A)(i	ii).							
4	П	A medical res	earch organization operated	in conjunction with a hospital d	lescribed	ın sectio	170(b)	(1)(A)(ii	i). Ente	r the ho	spital's nam	ıе,		
	ш	city, and state												
5	X	An organization	on operated for the benefit of	f a college or university owned	or operate	ed by a go	vernme	ntal unit	describ	ed in				
		_	o)(1)(A)(iv). (Complete Part											
6		•		overnmental unit described in se	ection 17	0(b)(1)(A)	(v).							
7	П			substantial part of its support fro				rom the	genera	l public				
	ــــا	•	section 170(b)(1)(A)(vi). (Co											
8				70(b)(1)(A)(vi). (Complete Part	II)									
9	П) more than 33 1/3% of its supp		contributio	ns, mer	nbership	fees, a	and gro	ss			
				pt functions—subject to certain										
				d unrelated business taxable in										
), 1975 See section 509(a)(2).										
10		An organization	on organized and operated e	exclusively to test for public safe	ety See s	ection 50	9(a)(4).							
11		An organization	on organized and operated e	exclusively for the benefit of, to p	perform th	ne functio	ns of, or	to carry	out the	•				
		purposes of o	ne or more publicly supporte	ed organizations described in se	ection 509	(a)(1) or	section (509(a)(2) See s	section	l			
		509(a)(3). Ch	eck the box that describes the	ne type of supporting organization	on and co	mplete lir	ies 11e							
		a Type		c Type III–Functions			d		e III–Otl					
е				anization is not controlled direct										
		other than for	indation managers and othe	r than one or more publicly sup	ported org	ganization	s descri	bed in s	ection !	509(a)(1	1)			
		or section 509												
f		If the organization	ation received a written dete	rmination from the IRS that it is	a Type I,	Type II, o	or Type I	II suppo	orting					
		_	check this box											
g		Since August	: 17, 2006, has the organizat	tion accepted any gift or contrib	ution from	any of th	ie							
		following per											T	-
				entrols, either alone or together	with perso	ons descr	ibed in (i	ii) and				Yes	No	-
		• •	w, the governing body of the								11g(+-	_
		• •	member of a person describ								11g(+	_
		. ,	• •	described in (i) or (ii) above?							[11g(шу		-
<u>h</u>				he supported organization(s)	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		6354		4	- 44 -	4			-
		ne of supported rganization	(ii) EIN	(iii) Type of organization (described on lines 1-9	1 ' '	organization sted in your		ou notify uzation in	organizat	s the ion in col		mount o	•	
	0.	gamzation		above or IRC section		document?	col (i)			zed in the S ?				
				(see instructions))	Yes	No	Yes	ort? No	Yes	No				
					 	100		-10	100					-
(A)					ļ	ļ			ļ					
(B)					 									_
(6)						ļ	İ	1						
(C)														_
(0)							ļ							
(D)														
,-,					<u></u>	<u> </u>								
(E)														
						<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>				_
						1								
To	tal		<u> </u>		1	<u> </u>	<u> </u>		<u> </u>	<u> </u>				

84-1070271

Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sect	tion A. Public Support				•		
	dar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	253,086	385,244	405,792	88,981	131,744	1,264,847
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					<u>-</u> -	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	253,086	385,244	405,792	88,981	131,744	1,264,847
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						19,718
_6	Public support. Subtract line 5 from line 4						1,245,129
	tion B. Total Support						
Caler	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	253,086	385,244	405,792	88,981	131,744	1,264,847
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	722,705	589,394	636,462	621,811	578,177	3,148,549
9	Net income from unrelated business activities, whether or not the business is regularly carned on					· · · · · · · ·	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	21,800	14,300	14,300	14,300		64,700
11	Total support. Add lines 7 through 10			1			4,478,096
12	Gross receipts from related activities, etc	•				12	<u> </u>
13	First five years. If the Form 990 is for the		t, second, third, fou	urth, or fifth tax yea	ir as a section 501	(c)(3)	▶ ٢-
_	organization, check this box and stop her		·				
	tion C. Computation of Public Su					T 44	
14	Public support percentage for 2011 (line 6	* *	-	n (f))		14	27.80%
15	Public support percentage from 2010 Sch				0.44004	15	25.17%
16a	33 1/3% support test—2011. If the organ				33 1/3% or more, 0	check this	▶ □
	box and stop here. The organization qual		•		E in 22 1/20/ or m	0.50	
D	33 1/3% support test—2010. If the organ				3 IS 33 1/3 /6 01 111	oie,	▶ □
47-	check this box and stop here. The organi 10%-facts-and-circumstances test—20°	•		-	a or 16h and line	1.1 ie	• 🗆
11a	10%-racts-and-circumstances test—20 10% or more, and if the organization mee						
	Part IV how the organization meets the "fa						
	-	acis-and-circumsia	nces test The Oil	gamzation qualines	as a publicity sup	ported	▶ □
h	organization 10%-facts-and-circumstances test—20	10 If the organizati	on did not check a	hov on line 13 16	Sa 16h or 17a an	d line	
þ	15 is 10% or more, and if the organization						
	Explain in Part IV how the organization me						
	supported organization	ooto ine Tacto-aliu	Commission (C	o. The organization	qualifico do d p	,	• [
18	Private foundation. If the organization di	d not check a box	on line 13, 16a, 16	b, 17a, or 17b, che	eck this box and se	ee	
	instructions		. ,	,			▶ [X

Page 3

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

	· · · · ·
(Complete only if you checked the box on line 9 of	f Part I or if the organization failed to qualify under Part II
If the organization fails to qualify under the tests le	

Sec	tion A. Public Support							
	dar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011		(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		,					
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge	· · · · · · · · · · · · · · · · · · ·						
6	Total. Add lines 1 through 5					<u> </u>		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
8 8	Add lines 7a and 7b Public support (Subtract line 7c from line 6)							
Sec	tion B. Total Support		<u> </u>	I	. I	.1	1	
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201	1	(f) Total
9	Amounts from line 6	(-)	. , , .		1			
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b		<u> </u>	1				
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)			<u> </u>				
13	Total support. (Add lines 9, 10c, 11, and 12)							
14	and 12) First five years. If the Form 990 is for the	organization's fire	st second third for	ourth, or fifth tax v	ear as a section 50)1(c)(3)		
1**	organization, check this box and stop her		on occorna, tima, in	, 5: mili tan ji		\-/\ - /		>
Sec	ction C. Computation of Public S		ntage					
15	Public support percentage for 2011 (line 8			mn (f))			15	%
16	Public support percentage from 2010 Sch	* *	-		···		16	%
Sec	ction D. Computation of Investme						,	
17	Investment income percentage for 2011 (line 10c, column (f) divided by line 1	3, column (f))			17	%
18	Investment income percentage from 2010						18	%
19a								
	17 is not more than 33 1/3%, check this b							▶ _
b								
	line 18 is not more than 33 1/3%, check to						ì	▶
20	Private foundation. If the organization d	id not check a box	on line 14, 19a, o	r 19b, check this b	oox and see instruc	ctions		

Schedule A (Form 990 or 990-EZ) 2011 COLORADO COMMUNITY COLLEGE

84-1070271

Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information (See instructions)

PART II, LINE 10 - OTHER INCOME DETAIL

MANAGEMENT FEE

\$

64,700

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Open to Public

Inspection Name of the organization Employer identification number COLORADO COMMUNITY COLLEGE 84-1070271 SYSTEM FOUNDATION Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes Conservation Easements. Complete if the organization answered "Yes" to Form 990. Part IV. line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a a Total number of conservation easements b Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990. Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Sche	dule D (Form 990) 2011 COLORADO	COMMUNITY	COLLEGE	84-1	070271			P	age 2
Pa	rt III Organizations Maintainir	ng Collections of	Art, Historical Tr	easures, or Othe	r Similar A	ssets (contin		
3	Using the organization's acquisition, access collection items (check all that apply)								
а	Public exhibition	d 🗍 I	Loan or exchange prog	jrams .					
b	Scholarly research		Other						
С	Preservation for future generations								
4	Provide a description of the organization's	collections and explain	how they further the c	organization's exempt	purpose in Pa	ırt			
	XIV								
5	During the year, did the organization solicit	or receive donations of	of art, historical treasur	es, or other similar				_	_
	assets to be sold to raise funds rather than						Ye	_	No
Pa	rt IV Escrow and Custodial A	rangements. Cor	nplete if the organ	zation answered	"Yes" to Fo	rm 990	, Part I	V,	
	line 9, or reported an amou	unt on Form 990, F	Part X, line 21						
1a	Is the organization an agent, trustee, custo	dian or other intermed	ary for contributions o	r other assets not			_		_
	included on Form 990, Part X?						Ye	es 📙	」No
þ	If "Yes," explain the arrangement in Part XI	V and complete the fol	llow≀ng table		<u></u>	,			
							Amoun	<u>t </u>	
C	Beginning balance				1c	<u> </u>			
d	Additions during the year				1d				
е	Distributions during the year				1e				
f	Ending balance				1f	<u> </u>			
2a	Did the organization include an amount on	Form 990, Part X, line	21?				Ye	es	No
	If "Yes," explain the arrangement in Part XI	V							
Pa	art V Endowment Funds. Com	plete if the organiz	zation answered "\	<u>es" to Form 990,</u>	Part IV, line	<u>e 10.</u>			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three yea	rs back	(e) Fou	r years	back
1a	Beginning of year balance	236,215	244,292	372,063					
b	Contributions	132,961	85,542	402,945					
С	Net investment earnings, gains, and						İ		
	losses		8,631				L		
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs	90,404	100,235	530,716					
f	Administrative expenses								
g	End of year balance	278,772	236,215	244,292			L		
2	Provide the estimated percentage of the cu	rrent year end balance	e (line 1g, column (a))	held as					
а	Board designated or quasi-endowment ▶	8.14%							
b	Permanent endowment ▶ 9.34 %	•							
С	Temporarily restricted endowment ▶	32.52 %							
	The percentages in lines 2a, 2b, and 2c sh	ould equal 100%							
3a	Are there endowment funds not in the poss	session of the organiza	ition that are held and	administered for the					
	organization by							Yes	No
	(i) unrelated organizations						3a(i)	<u> </u>	X
	(ii) related organizations						3a(ii)	L	X
b	If "Yes" to 3a(II), are the related organization	ns listed as required o	n Schedule R?				3b	Ĺ	
4	Describe in Part XIV the intended uses of t	he organization's endo	owment funds						
Pa	art VI Land, Buildings, and Equ	uipment. See For	m 990, Part X, line	e 10.					
	Description of property	(a) Cost or other b	pasis (b) Cost or o	ther basis (c)	Accumulated		(d) Book	value	
		(investment)	(othe	er) de	epreciation			_	
1a	Land								
	Buildings								
	Leasehold improvements						,		
	Equipment						,	-,	
	Other								
	I. Add lines 1a through 1e (Column (d) mus	t equal Form 990, Part	t X, column (B), line 10)(c))		>			
		•			<u> </u>	Schedule	D (For	n 990) 201
					•		_ 1. 0.1		,

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

(8) (9) (10)

Sche	dule D (Form 990) 2011 COLORADO COMMUNITY COLLEGE	84-107027	1	Page 4
Pa	at XI Reconciliation of Change in Net Assets from Form 990 to	Audited Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	720,211
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	699,960
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	20,251
4	Net unrealized gains (losses) on investments		4	-17,617
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 through 8		9	-17,617
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9)	10	2,634
Pa	it XII Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements		1	809,835
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a -17,617		
b	Donated services and use of facilities	2b 107,241		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		2e	89,624
3	Subtract line 2e from line 1		3	720,211
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	720,211
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses per F	Returr	1
1	Total expenses and losses per audited financial statements		1	807,201
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a 107,241	1	
b	Prior year adjustments	2b	1	
С	Other losses	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		2e	107,241
3	Subtract line 2e from line 1		3	699,960
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
C	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	699,960

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

PART XIV - SUPPLEMENTAL FINANCIAL INFORMATION

Supplemental Information

THE FOUNDATION'S ENDOWMENTS CONSIST OF APPROXIMATELY FIVE INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES. FOUR ENDOWMENTS ARE CONSIDERED DONOR-RESTRICTED ENDOWMENT FUNDS AND ONE IS CONSIDERED A BOARD-DESIGNATED ENDOWMENT FUND. AS REQUIRED BY THE GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING FUNDS DESIGNATED BY THE BOARD TO FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AND

REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR IMPOSED RESTRICTIONS.

THE BOARD OF THE FOUNDATION HAS INTERPRETED THE COLORADO PRUDENT MANAGEMENT OF INSTITUTIONAL FUNDS ACT (CPMIFA) AS REQUIRING THE PRESERVATION OF THE FAIR VALUE OF THE ORIGINAL GIFT AS OF THE GIFT DATE OF THE DONOR RESTRICTED ENDOWMENT FUNDS ABSENT EXPLICIT DONOR STIPULATIONS TO THE CONTRARY. AS A RESULT OF THIS INTERPRETATION, THE FOUNDATION CLASSIFIES AS PERMANENTLY RESTRICTED AND BOARD DESIGNATED NET ASSETS (A) THE ORIGINAL VALUE OF GIFTS DONATED TO THE PERMANENT ENDOWMENT, (B) THE ORIGINAL VALUE OF SUBSEQUENT GIFTS TO THE PERMANENT ENDOWMENT, AND (C) ACCUMULATIONS TO THE PERMANENT ENDOWMENT MADE IN ACCORDANCE WITH THE DIRECTION OF THE APPLICABLE DONOR GIFT INSTRUMENT AT THE TIME THE ACCUMULATION IS ADDED TO THE FUND. THE REMAINING PORTION OF THE DONOR RESTRICTED ENDOWMENT FUND THAT IS NOT CLASSIFIED IN PERMANENTLY RESTRICTED OR BOARD DESIGNATED NET ASSETS IS CLASSIFIED AS TEMPORARILY RESTRICTED NET ASSETS UNTIL THOSE AMOUNTS ARE APPROPRIATED FOR EXPENDITURE BY THE FOUNDATION IN A MANNER CONSISTENT WITH THE STANDARD OF PRUDENCE PRESCRIBED BY CPMIFA. IN ACCORDANCE WITH CPMIFA, THE FOUNDATION CONSIDERS THE FOLLOWING FACTORS IN MAKING A DETERMINATION TO APPROPRIATE OR ACCUMULATE DONOR RESTRICTED AND BOARD DESIGNATED ENDOWMENT FUNDS:

- 1. THE DURATION AND PRESERVATION OF THE FUND.
- 2. THE PURPOSE OF THE FOUNDATION AND THE DONOR RESTRICTED ENDOWMENT FUND.
- 3 GENERAL ECONOMIC CONDITIONS.
- 4. THE POSSIBLE EFFECT OF INFLATION AND DEFLATION.
- 5. THE EXPECTED TOTAL RETURN FROM INCOME AND THE APPRECIATION OF INVESTMENTS.

- 6.OTHER RESOURCES OF THE FOUNDATION.
- 7. THE INVESTMENT POLICIES OF THE FOUNDATION.
- 8.THE FOUNDATION HELD \$22,700 IN PERMANENTLY RESTRICTED ENDOWMENT NET ASSET FOR THE YEARS ENDED JUNE 30, 2012 AND 2011 AND \$26,050 AND \$25,500 IN BOARD DESIGNATED ENDOWMENT NET ASSET FOR THE YEARS ENDED JUNE 30, 2012 AND 2011.

₹	
22	
29	
201	
124	
õ	
52	

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Parti

COLORADO COMMUNITY

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

► Attach to Form 990.

Open to Public Inspection 201

OMB No 1545-0047

2

X Yes Employer identification number 84-1070271 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and General Information on Grants and Assistance COLLEGE SYSTEM FOUNDATION

=	e if the organization answered "Yes"	ne recipient received more than \$5,000
the selection criteria used to award the grants or assistance?	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes."	to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000.
the self	bart #	

<u> </u>		
A	(h) Purpose of grant	or assistance
	(g) Description of	non-cash assistance
	(f) Method of valuation	other)
	(e) Amount of non-	cash assistance
	(d) Amount of cash	orant
	3) IRC	section
space is needer	(b) EIN	•
Part II can be duplicated if additional space is needed	(a) Name and address of organization	or dovernment
	-	•

1 (a) Name and address of organization	(b) EIN	(c) IRC	(d) Amount of cash		(f) Method of valuation (book, FMV, appraisal,		(h) Purpose of grant
or government		if applicable	grant	cash assistance	other)	non-cash assistance	or assistance
(1) PUEBLO COMMUNITY COLLEGE							
900 WEST ORMAN AVENUE					•		
PUEBLO CO 81001			9,000				
(2)							
(3)						-	
(4)							

(2)

(9)						•
E						,
(8)						
6)						
2	2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	organizations listed	in the line	1 table		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. 3 Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2011) ▶ 25500

84-1070271	d States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22
COLLEGE	Is in the Unite
ILTY	nce to Individua
COLORADO COMMUN	Other Assista
Form 990) (2011)	Grants and
Schedule I (I	Part III

	(e) Method of valuation (book, (f) Description of non-cash assistance	FMV, appraisal, other)	•							the first of the second of the
	(e) Method of	FMV, appre							!	The tree of
	(d) Amount of	non-cash assistance						i		- 1 - C -: F - 1 - 1
	(c) Amount of	cash grant								the the contract of the
onal space is needed	(b) Number of	recipients								1-4-44:
Part III can be duplicated if additional space is needed	(a) Type of grant or assistance									Superior and the state of the s
	2)		_	2	က	4	2	9		74 77 10

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. REQUIREMENTS OF THE GRANT, GRANT REPORTS ARE PREPARED AT LEAST ANNUALLY FOR THE GRANTOR. THE GRANT REPORT DESCRIBES HOW THE GRANT FUNDS WERE EXPENDED. ADMINISTRATOR AND THE INTERM DIRECTOR. THEN, DEPENDING ON THE REPORTING THE GRANT FUNDS RECEIVED BY THE FOUNDATION ARE MANAGED BY THE GRANT PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS ADMINISTRATOR. ALL EXPENDITURES ARE APPROVED BY BOTH THE GRANT Part IV

RECORDS ARE AVAILABLE TO THE GRANTORS TO REVIEW TO ENSURE THE EXPENDITURES

ARE IN COMPLIANCE WITH THE GRANTOR GUIDELINES.

SCHEDULE J

(Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

Open to Public

OMB No 1545-0047

Internal Revenue Service
Name of the organization

Department of the Treasury

COLORADO COMMUNITY COLLEGE

SYSTEM FOUNDATION

Employer identification number 84-1070271

Part I Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No." complete Part III to 1h Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director Explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5a b Any related organization? X 5b If "Yes" to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of a The organization? 6a b Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 X Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III X 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

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

Regulations section 53 4958-6(c)?

Schedule J (Form 990) 2011

COLORADO COMMUNITY COLLEGE

Schedule J (Form 990) 2011

Part #

256 10/24/2012 9 57 AM

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

84-1070271

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

(B) Breakdown of W-2 and/or 1099-MISC compensation	(B) Brea	kdown of W-2	(B) Breakdown of W-2 and/or 1099-MISC compensation	ompensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(А) Nате	(I) Base compensation	(E)	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits		reported as deferred in prior Form 990
		+	1			ļ		
TILMAN BISHOP	<u>.</u>	0	Э	5	5 (O	0	•
	(11)	0	0					
	(3)							
2	(11)							
	0							
	(11)			ļ				
	(1)							
-	(
	€	ļ						
<u> </u>	. (8)							
	€							
ď	· •							
	€							
	: =	-						
	. ∈	1						
					-			
6	fint	+						
	÷							
								1
Ţ	Ē			:				
	8							
12	. (8)			i				
	8							•
~~~	(1)							
	€							•
71	. (n)							
	(0)							
16	. (11)							
	(0)	<del></del>						
16		-						
							ň	Schedule J (Form 990) 2011

COLORADO COMMUNITY COLLEGE

Schedule J (Form 990) 2011

256 10/24/2012 9 57 AM

Supplemental Information Part #

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information.

### **SCHEDULE O**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

OMB No. 1545-0047

Name of the organization COLORADO COMMUNITY COLLEGE

SYSTEM FOUNDATION

Employer identification number 84-1070271

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 FORM 990 IS REVIEWED BY BOARD STAFF PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY BYLAWS-

#### CONFLICT OF INTEREST:

IF ANY PERSON WHO IS A DIRECTOR OR OFFICER OF THE CORPORATION IS AWARE THAT THE CORPORATION IS ABOUT TO ENTER INTO ANY BUSINESS TRANSACTION DIRECTLY OR INDIRECTLY WITH HIMSELF, OR ANY MEMBER OF HIS FAMILY, OR ANY ENTITY IN WHICH HE HAS A LEGAL, EQUITABLE OR FIDUCIARY INTEREST OR POSITION, INCLUDING WITHHOUT LIMITATION AS A DIRECTOR, OFFICER, SHAREHOLDER, PARTNER, BENEFICIARY OR TRUSTEE, SUCH PERSON SHALL:

- A) IMMEDIATELY INFORM THOSE CHARGED WITH APPROVING THE TRANSACTION ON BEHALF OF THE CORPORATION OF HIS INTEREST OR POSITION,
- B) AID THE PERSONS CHARGED WITH MAKING THE DECISION BY DISCLOSING MATERIAL FACTS WITHIN HIS KNOWLEDGE THAT BEAR ON THE ADVISABILITY OF SUCH TRANSACTION FROM THE STANDPOINT OF THE CORPORATION, AND
- C) NOT BE ENTITLED TO VOTE ON THE DECISION TO ENTER INTO SUCH TRANSACTION.

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

THE EXECUTIVE DIRECTOR OF THE FOUNDATION IS HIRED BY THE PRESIDENT OF THE

COLORADO COMMUNITY COLLEGE SYSTEM AND THUS THE SALARY FOR THE POSITION IS

DETERMINED IN CONCERT WITH THE SYSTEM SALARY PLAN. OTHER STAFF WOULD FALL

UNDER THE SAME COMPENSATION PLAN.

Name of the organization

COLORADO COMMUNITY COLLEGE

Employer identification number

84-1070271

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
SALARY FOR POSITIONS IS DETERMINED IN CONCERT WITH THE SYSTEM SALARY PLAN.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION FORM 990 AND OTHER FEDERAL FILING FORMS ARE AVAILABLE THROUGH PUBLIC REQUEST. THE FILINGS ARE ALSO SHARED WITH THE STATE AUDITOR'S OFFICE.

(8) (9) (10) Totals

6 10/24/	2012 9 57 AM	4			•	i.	
Form	ns • •		Mor	tgages and Oth	er Notes Payable		
990 / 990-PF		For calendar year 2011, or tax year beginning					2011
Name		For calendar ye	ar 2011,	or tax year beginning	07/01/11 , and ending 0		entification Number
COLORADO COMMUNITY COLLEGE							
SYSTEM FOUNDATION						84-107	0271
FOI	RM 990, PAI	RT X, LINE	23 -	- ADDITIONAL	INFORMATION		
		Name of lender			Relationship to disqualified person		
(1)	COLORADO EDUCATIONAL & CULTURAL FACI						
(2)				JLTURAL FACI			
	COLORADO EI	OUCATIONAL	& Ct	JLTURAL FACI			
(4)							
(5)							
(6) (7)	<del></del>						<u> </u>
(8)		<del></del>					
(9)							
(10)		·····					······
	Original amount	t Date of		Maturity	Repayment terms		Interest rate
(1)	7,090,0			date 12/01/31	VARIABLE		Tate
(2)	4,730,0			12/01/27	VARIABLE		
(3)	2,480,0			12/01/32	VARIABLE		
(4)							
(5)							
(6)							
(7) (8)	-						
(8) (9)					"		
(10)							
					_	•	
445	LEASE RECE	Security provided by	borrower		Purpose of loan		
	LEASE RECE						<u> </u>
	LEASE RECE						
(4)							
(5)							
<u>(6)</u>							
(7)		··		<del></del>			
(8) (9)						-	
(10)							
1/							
					Balance due at	В	alance due at
	Consid	eration furnished by	lender		beginning of year		end of year
(1)					6,025,000 3,760,000		
(2)			-		2,115,000		
(3) (4)					2/220/000		· · · · · · · · · · · · · · · · · · ·
(5)		•					
(6)							
(7)							

11,900,000