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Department of the Treasury Internal Revenue Service

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

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



<u> </u>			0044		10	IIIspection
STEED ST			2011 calendar year, or tax year beginning MAR 28, 2012 and ending		12	
ħ	B c	heck if pplicable	C Name of organization	D Employer ide	entification	n number
		Addres	COLORADO LIONS FOUNDATION			
\$		Name change		84	-6032	226
	1.	Initial return	Number and street (or P 0. box if mail is not delivered to street address) Room/si			220
2 8		Termin	1 ' ' 1	· ·	9-671	-7394
	· -	-Jated }Amend Jreturn		G Gross receipts \$	<u>, , , , , , , , , , , , , , , , , , , </u>	20,430.
台		Application		H(a) Is this a gro	un return	20, 2300
S		pendin	F Name and address of principal officer BRYAN COOPER	for affiliates	•	Yes X No
4	•		1035 S 12TH ST, CANON CITY, CO 81212	H(b) Are all affiliates		
	 	24 646		1		see instructions)
9			e: NWW.COLIONSFOUNDATION.ORG		•	•
∞				H(c) Group exent ear of formation: 195		
w ,		irt I	Summary	car or formation 191	1) IVI State	on regar dominione CO
က	•		Briefly describe the organization's mission or most significant activities TO PROVI	DE CIIDDOPT	FOD	
4	Activities & Governance		EDUCATIONAL SCHOLARSHIPS AND HUMANITARIAN PROBLEMS		TOK	
	na.				ot assets	
	Ve.	2	Check this box if the organization discontinued its operations of disposed of notice of voting members of the governing body (Part VI, line 1a)	ologinan 25% or its r	et assets	Ę
	ဗွ	3	Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2011 (Part V, line 2a)	10	3	<u>5</u> 5
	∞ ŏ	4	Number of independent voting members of the governing body (Part VI, line 1b)	046	4	
	ties			UIO	5	<u>0</u> 9
	₹		Total number of volunteers (estimate if necessary)	uou!	6	
	Ą	ļ	Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 TPR BRAI OGDE	yCn	7a	0.
		D	Net unrelated business taxable income from Form 990-T, line 34	N	7b	0.
			Cantributions and grants (Dort VIII line 1h)	Prior Year	0.	Current Year
	Revenue		Contributions and grants (Part VIII, line 1h)	 	0.	13,805.
	Ven		Program service revenue (Part VIII, line 2g)			0.
	Re		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	 	0.	6,292.
>		11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8d, 9c, 10c, and 11e) Total revenue add lines 8 through 11 (must equal Part VIII column (A), [22]		0.	333.
A PROTICION TO	-		Total revenue and lines 8 through 11 (must equal Part vin courne (A), lines (2)		0.	20,430.
ñ		13 (Grants and similar amounts paid (Part IX, column (A) lines 1-3)		0.	18,586.
j		14	Benefits paid to or for members (Part IX, column (A) he DEC 2 3 2016		0.	0.
ب	ses	15	Salaries, other compensation, employee benefits (Par IX, column (A), lines 5-10)		0.	<u>0.</u>
JAN	Expenses		Professional fundraising fees (Part IX, column (A), line 116 COEN, UT		0.	0.
<u>-</u>	S.		Total fundraising expenses (Part IX, column (D), line 25)			
<u></u>	_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		0.	1,275.
2			Fotal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		0.	19,861.
97	S	19	Revenue less expenses Subtract line 18 from line 12		0.	569.
7	IS OF			Beginning of Current Y		End of Year
	Assets or d Balances		Total assets (Part X, line 16)	935,38		947,614.
	Net A Fund		Total liabilities (Part X, line 26)		0.	34,652.
			Net assets or fund balances Subtract line 21 from line 20	935,38	6.	912,962.
		rt II	Signature Block			
			ties of perjury, I declare that I have examined this return, including accompanying schedules and sta	•	of my know	rledge and belief, it is
	true,	correct	, and complete. Declaration of preparer (other than officer) is based on all information of which prepared to the complete of			
		1	Signature of officer		-7 <i>-2</i>	2016
	Sigr	- }	· · · · · · · · · · · · · · · · · · ·	Date		
	Here	e	BRYAN COOPER, CURRENT PRESIDENT Type or print name and title			
				Date Che		PTIN
		Ĺ	Print/Type preparer's name Preparer's signature	1 11/11/11	L/	
	Paid		ROY H. BREYFOGLE			00467399
	Prep	ş-	Firm's name MCPHERSON BREYFOGLE DAVELINE & GOOD	RICH Firm's EIN	84	-0628988
	Use	Unly	Firm's address 503 N. MAIN ST., SUITE 740	1	/ = 4 -	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		1	PUEBLO, CO 81003-3131	Phone no		<u> </u>
			S discuss this return with the preparer shown above? (see instructions)			X Yes No
	13200	11 01-23	L12 HA For Paperwork Reduction Act Notice see the separate instructions			Form 990 (2011)

orm	990 (2011) COLORADO LIÓNS FOUNDATION	84-6032226 Page 2
Par	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	
1	Briefly describe the organization's mission	
	PROVIDE SUPPORT FOR EDUCATIONAL SCHOLARSHIPS AND HUMA	NITARIAN
	PROJECTS.	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	ces? Yes X No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program service	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount	nt of grants and allocations to
	others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$13,586.) (including grants of \$13,586.)	Revenue \$)
	PROVIDE GRANTS AND FINANCIAL SUPPORT TO ORGANIZATIONS	FOR VISION AND
	HEARING PURPOSES	
	(Code) (Expenses \$ 5,000 • including grants of \$ 5,000 •) ((Revenue \$)
4b	(Code) (Expenses \$,Hevenue \$/
	PROVIDE SCHODARSHIP GRANIS TO HIGH SCHOOL STODENIS	
4c	(Code) (Expenses \$	(Revenue \$
4d	, u	
	(Expenses \$ 1,275. including grants of \$) (Revenue \$	
4e	Total program service expenses ► 19,861.	
13200	12	Form 990 (2011)

Form 990 (2011) COLORADO LIONS FOUNDATION

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)?	ł		
_	If "Yes," complete Schedule A	1	X	7.7
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			₹.
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
E	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		X
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		Δ.
O	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-0		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	'		
Ŭ	Schedule D, Part III	8		х
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			
Ū	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X_	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	_11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			٠,
	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		Х
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	14h		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b		Λ
15	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
10	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		- -	
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		 -
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
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		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (2011)

Pai	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		i '	
	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,			1
	column (A), line 2º 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 organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		1	
	Schedule J	23	L	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		į	
	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	L	
С	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		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	ĺ	X_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b	ł	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	1	Х
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	1	Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			1
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	1	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	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			
40	contributions? If "Yes," complete Schedule M	30	İ	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	-		
٠.	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	-	_	1
UL.	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u></u> -		<u></u> -
•	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?	1		
9 -7	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X_
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b		000		
D	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 related organization?	333		···
30	If "Yes," complete Schedule R, Part V, line 2	36	}	X
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		1
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	31		1
38	Note. All Form 990 filers are required to complete Schedule O	38	Х	
	14016. All 1 Oliti 300 litera die required to complete ochiedule O			(2011)
		. 5,111		<u> </u>

	Check if Schedule O contains a response to any question in this Part V					
	Established above and a Rev O of Established		0		Yes	No
_	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	}		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	еропа	ble gaming			
_	(gambling) winnings to prize winners?	1		1c		┼
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,	_	0			1
_	filed for the calendar year ending with or within the year covered by this return	_2a_	0	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	 	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	5)		_		1,7
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		├
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other					
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a	——	X
þ	If "Yes," enter the name of the foreign country				1	
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial	Accou	nts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	iction?		5b	 	X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c	 	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	ne orga	anization solicit			
	any contributions that were not tax deductible?			6a	 	X
þ	If "Yes," did the organization include with every solicitation an express statement that such contribution	ions o	r gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).		_			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	rovided to the payor?	7a	 	X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	 	-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uired			
	to file Form 8282?		1	7c	 	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	_7d		1	1	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontrac	ct?	7e	-	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f	 	-
9	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 88	999 as required?	<u>7g</u>	ļ	ļ
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h	 	↓
8	Sponsoring organizations maintaining donor advised funds and section $509(a)(3)$ supporting organizations \Box					1
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tin	ne during the year?	8		—
9	Sponsoring organizations maintaining donor advised funds.					1
а	Did the organization make any taxable distributions under section 4966?			9a	 	ļ
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	 	
10	Section 501(c)(7) organizations. Enter	ı	1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	<u> </u>	-		
11	Section 501(c)(12) organizations. Enter		1			1
а	Gross income from members or shareholders	11a		1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them)	11b		1		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		_	ļ	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				<u> </u>	ļ
а	Is the organization licensed to issue qualified health plans in more than one state?			13a	<u> </u>	
	Note. See the instructions for additional information the organization must report on Schedule O					1
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1	1			
	organization is licensed to issue qualified health plans	13b		1		
С	Enter the amount of reserves on hand	13c				_
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a	 	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	le O		14b		1
				Forn	n 990	(2011

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5			
	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 0.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3_		_X_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		!	
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	<u> X</u>	
b	Each committee with authority to act on behalf of the governing body?	8b	X	ļ
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	ļ		
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	1		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
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
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		ļ
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		_X_
15	Did the process for determining compensation of the following persons include a review and approval by independent	}		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a]		,,
_	taxable entity during the year?	16a		X
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			1
<u></u>	exempt status with respect to such arrangements?	16b		L
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 required an exposuration to make the Forms 1022 (or 1024 if applicable), 2021 and 2021 (Section F01(s)/2)s only	avad-4	.lo	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avanat	ne	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request	د ا		
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, are	iu tinai	icial	
00	statements available to the public during the tax year	tion ►		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion 🏓		
	BRYAN COOPER - 719-671-7394 1035 S 12TH ST, CANON CITY, CO 81212			
13200	6	Form	990	(2011)
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Form 990 (2011) 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

	(B)	1		Pos	C)			(D)	(E)	(F)	
Name and Title	Average hours per week	box, offic	(do not check more than one box, unless person is both a officer and a director/trustee				one h an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other	
	(describe hours for related organizations in Schedule O)	individual trustee or director	Institutional trustee	Officer	кеу етріоуее	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
1) MAX BEAVERS		} ;							_		
IRECTOR	3.00	X	ļ					0.	0.	0	
2) ART WELCH											
RESIDENT	3.00	ļ		X				0.	0.	0	
3) WALTER LEMON	2.00	'		7.7				0	0	_	
ICE PRESIDENT	3.00			X		├		0.	0.	0	
4) DONNA SLY-REDD	3.00			х				0.	0.	0	
ECRETARY	3.00	-		Λ				0.			
5) KEN SCHWOLS REASURER	3.00			x				0.	0.	C	
		<u> </u>									
	1	Ī	1	1	i	1	1	1		1	

Form 990 (2011)

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⊭ar	t VII Section A Officers, Directors, Tr		nplo	yee	s, a	nd l	High	est	Compensated Employ	ees (continued)				
	(A)	(B)	(C)						(D)	(E)			(F)	
	Name and title	Average	Position (do not check more than one					one	Reportable	Reportable			timate	
		hours per week	box, unless person is both an officer and a director/trustee)					h an	compensation	compensation			ount o	of
		(describe	 	1		<u> </u>			from the	from related	- 1		other	haa
		hours for	Individual trustee or director				-		organization	organizations (W-2/1099-MIS			oensatom the	
		related	5 5	stee			Sate	}	(W-2/1099-MISC)	(***271033-14110	Ο,		anızatı	
		organizations	trust	Institutional trustee		yee	ed El		(** 2, *********************************		-	_	relate	
		ın Schedule	langu	tution	 #3	Кеу етріоуее	esto	<u>ت</u> ق			1	orga	nızatıc	ons
		O)	Ę	Instr	Officer	Key	Highest compensated employee	Богшег						
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			L	L	L	<u> </u>	<u> </u>	L			0			0.
	Sub-total								0.		0.			0.
	Total from continuation sheets to Part V	II, Section A							0.		0.			0.
	Total (add lines 1b and 1c) Total number of individuals (including but			linke			2) 111			000 of reportable				<u> </u>
2	compensation from the organization	not iirnitea to tr	iose	nste	eu ai	DOV	e) wi	10 10	eceived more than \$100	,000 of reportable	e			0
	compensation from the organization												Yes	No
3	Did the organization list any former officer	director or tri	ıcta	ماده	w ar	mnle	11/44	٥r	highest compensated e	mnlovee on	ĺ			
3	line 1a? If "Yes," complete Schedule J for		3310	c, nc	, y C i	прк	Jyco	, 01	riigilest compensates c	inployee on		3	- 1	X
4	For any individual listed on line 1a, is the s		ام دا	nmn	enes	atior	n and	to t	her compensation from	the organization		-		
7	and related organizations greater than \$15									ino organization		4		Х
5	Did any person listed on line 1a receive or									idual for services				
·	rendered to the organization? If "Yes," cor											5	Ì	Х
Sec	tion B. Independent Contractors	inploto Comodu.	<u> </u>	0. 0.		, , , , , , , , , , , , , , , , , , , 								
1	Complete this table for your five highest co	ompensated in	deb	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of com	pens	ation fi	rom	
	the organization Report compensation for													
	(A)		•						(B)			(C	3)	
	Name and busines	s address	N	INC	3				Description of s	services	С	omper		n
		·····									-			
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									·					
2	Total number of independent contractors	(including but r	ot 1	mıte	d to	tho	se li	stec	d above) who received n	nore than				
	\$100,000 of compensation from the organ	ization 🕨					0				-			
												Form 9	9 <mark>90</mark> (2	2011)

	rt VII	Statement of Rever			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
ats st	1 a	Federated campaigns	1a					
등 등	b	Membership dues	1b					}
Am Am	С	Fundraising events	1c					
팔	d	Related organizations	1d		l			
S,E	е	Government grants (contribut	ions) 1e		ļ			
is S	f	All other contributions, gifts, gran	its, and			Ì		Ì
호튀		sımılar amounts not included abo	ve 1f	13,805.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines	: 1a-1f \$					i
<u>8</u> 8	h	Total. Add lines 1a-1f		> _	13,805.			
				Business Code				
မွ	2 a							
اه څ	b							
양	С							
e ve	d							
Program Service Revenue	е							
4	f	All other program service reve	enue					
	g	Total, Add lines 2a-2f						
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		>	6,292.	6,292.		
	4	Income from investment of ta	x-exempt bond p	oroceeds 🕨				
- (5	Royalties		▶				
			(ı) Real	(ii) Personal				!
{	6 a	Gross rents						!
}	b	Less rental expenses						
1	С	Rental income or (loss)						
ļ	d	Net rental income or (loss)			·		· . — . — . — . — . — . — . — . — . — .	
ļ	7 a	Gross amount from sales of	(ı) Securities	(II) Other]
		assets other than inventory						
	b	Less cost or other basis						
		and sales expenses						
	C	Gain or (loss)						Ì
ı	d	Net gain or (loss)						
Other Revenue	8 a	Gross income from fundraisin including \$	•					
eve		contributions reported on line	1c) See]				
ᇤ		Part IV, line 18	a					
ŧ	b	Less direct expenses	ь			[
٦	С	Net income or (loss) from fund	draising events					<u> </u>
}	9 a	Gross income from gaming ac	ctivities See					
ł		Part IV, line 19	а					
1	b	Less direct expenses	b			}		
	С	Net income or (loss) from gan	ning activities					L
	10 a	Gross sales of inventory, less	returns]		
		and allowances	а					
{	b	Less cost of goods sold	b					
	c	Net income or (loss) from sale	s of inventory	•				<u> </u>
- 1		Miscellaneous Revenu	ie	Business Code				
	11 a	MISCELLANEOUS		812900	333.	333.		<u></u>
}	b							
}	С	· · · · · · · · · · · · · · · · · · ·						
)	d	All other revenue		<u></u>				ļ
	е	Total. Add lines 11a-11d		•	333.			
	12	Total revenue See instructions.			20,430.	6,625.	0.	
13200 01-23	วช I- 12							Form 990 (201

Form 990 (2011) COLORADO LIONS FOUNDATION Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response to any question in this Part IX											
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses							
1	Grants and other assistance to governments and											
	organizations in the United States. See Part IV, line 21	18,586.	18,586.									
2	Grants and other assistance to individuals in											
	the United States See Part IV, line 22											
3	Grants and other assistance to governments,											
	organizations, and individuals outside the											
	United States 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 section 403(b) employer contributions)											
9	Other employee benefits											
10	Payroll taxes											
11	Fees for services (non-employees)											
а	Management											
b	Legal											
С	Accounting											
d	Lobbying											
е	Professional fundraising services. See Part IV, line 17											
f	Investment management fees											
g	Other											
12	Advertising and promotion											
13	Office expenses											
14	Information technology											
15	Royalties											
16	Occupancy											
17	Travel											
18	Payments of travel or entertainment expenses											
	for any federal, state, or local public officials											
19	Conferences, conventions, and meetings											
20	Interest											
21	Payments to affiliates	<u> </u>		· · · · · · · · · · · · · · · · · · ·								
22	Depreciation, depletion, and amortization											
23	Insurance		L									
24	Other expenses Itemize expenses not covered above. (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)											
а	FILING FEES	925.	925.									
b	OTHER EXPENSE	350.	350.									
С												
d												
е	All other expenses											
25	Total functional expenses Add lines 1 through 24e	19,861.	19,861.	0.	0.							
26	Joint costs Complete this line only if the organization											
	reported in column (B) joint costs from a combined											
	educational campaign and fundraising solicitation											
	Check here If following SOP 98-2 (ASC 958-720)	<u> </u>	<u> </u>	<u> </u>	<u> </u>							

947,614. Form **990** (2011)

Total liabilities and net assets/fund balances

935,386.

Form 990 (2011)

SCHEDULE A

Department of the Treasury

(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.

OMB No 1545-0047

Open to Public Inspection

Name of the organization COLORADO LIONS FOUNDATION 84 - 60 322 26	Internal Rever	nue Service	► Att		Insped	ction						
Part I Reason for Public Charity Status (Al organizations must complete this part) See instructions	Name of t	the organizati	on						E	nployer ic	dentification	on number
The organization is not a private foundation because it is. (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A chool described in section 170(b)(1)(A)(ii), (Atlanh Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(ii). A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(ii). A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(ii). A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(ii). A norganization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(ii). A norganization 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)(ii). (Complete Part II) A norganization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exemple functions, subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross invostment income and unrelated business taxable income (leas section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part II) An organization organized and operated exclusively to test for public safely. See section 509(a)(4). A norganization organized and operated exclusively to the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). Check the box that describes the type of supporting organization and other than one or more publicly supported organization received and other than one or more publicly supported organization received and other than one or more publicly supported organization										84	<u>-6032</u>	226
A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). Enter the hospital's name, and state A medical research organization operated in conjunction with a hospital described or section 170(b)(1)(A)(iii). Enter the hospital's name, oty, and state 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)(iii). (Complete Part II) A lederal, state, or local government or governmental unit described in section 170(b)(1)(A)(iii). (Complete Part II) A community fusic described in section 170(b)(1)(A)(iii). (Complete Part II) 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)(iii). (Complete Part II) 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 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 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 receipts from a complete section 500(a)(2). (Complete Part II) An organization organization described with section 511 tas) from businesses acquired by the organization after June 30, 1975 See section 500(a)(2). (Complete Part II) An organization organization described with section 500(a)(3) in supports organization described in section 500(a)(3) in supports organization described in section 500(a)(3) in supports organization for a person organization described in section 500(a)(3) in supports organization (4) in the organization (4) in	Part I	Reason	for Public Chari	ty Status (All organiz	ations mu	st complet	e this part) See inst	ructions			
A school described in section 170(b)(1)(A)(in), (Attach Schedule E) A nonpartal or a cooperative hospital service organization described in section 170(b)(1)(A)(in), Enter the hospital's name, only, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(in), Enter the hospital's name, only, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(in), Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(in), Complete Part II) 8 A community frust described in section 170(b)(1)(A)(in), Complete Part II) 9 A community frust described in section 170(b)(1)(A)(in), Complete Part II) 9 An organization that normally receives (1) more than 33 173% 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 33 173% of its support from gross investment income and unrelated business taxable income (less section 11 tax) from businesses acquired by the organization after June 30, 1975 Ses section 509(a)(2), Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11 to through 11h and a limit proper in the functions of, or to carry out the purposes of one or more publicly supported organization and complete lines 11 to through 11h and a limit proper in the functions of the functions of or to carry out the box that describes the type of supporting organization and complete lines 11 to through 11h and III fully the proper in the function of the full fully interest in the fully interest in the fully interest in the fully interest interest in the fully interest in the fully interest interest interest interest	The organ	ization is not a	a private foundation b	pecause it is (For lines 1	through 1	11, check d	only one b	ox)				
A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 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)(iii). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(iii). (Complete Part II) A reductive related to it in a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iii). (Complete Part II) A community frust described in section 170(b)(1)(A)(iii). (Complete Part II) A community frust described in section 170(b)(1)(A)(iii). (Complete Part II) A community frust described in section 170(b)(1)(A)(iii). (Complete Part II) A community frust described in section 170(b)(1)(A)(iii). (Complete Part III) A community frust described in section 170(b)(1)(A)(iii). (Complete Part III) A community frust described in section 170(b)(1)(A)(iii). (Complete Part III) A community frust described in section 170(b)(1)(A)(iii). (Complete Part III) A community frust described in section 170(b)(1)(A)(iii). (Complete Part III) A community frust described in section 170(b)(1)(A)(iii). (Complete Part III) A community frust described in section 170(b)(1)(A)(iii). (Complete Part III) A community frust described in section 170(b)(1)(A)(iii). (Complete Part III) A community frust described in section 170(b)(1)(A)(iii). (Complete Part III) A community frust described in section 170(b)(1)(A)(iii). (Complete Part III) A community frust described in section 170(b)(1)(A)(iii). (Complete Part III) A community frust described in section 170(b)(1)(A)(iii). (Complete Part III) A community frust fru	1 🔲	A church, co	nvention of churches	, or association of churc	ches desc	ribed in se	ction 170	(b)(1)(A)(ı)				
A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, only, and state 5	2	A school des	cribed in section 170	0(b)(1)(A)(ii). (Attach Sc	hedule E)							
city, and state 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)(v). Complete Part II) A tederal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit of from the general public described in section 170(b)(1)(A)(v), (Complete Part II) 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 500(a)(2), (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 500(a)(2), (Complete Part III) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations and complete lines 11e through 11h a	з 🔙	A hospital or	a cooperative hospit	al service organization o	described	ın section	170(b)(1)(A)(ıiı).				
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)(v). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). (Complete Part II) A community trust described in section 170(b)(1)(A)(v). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II) 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organizations and complete lines 116 through 11h a Type I b Type III - Other by checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualited persons other than foundation managers and other than one or more publicly supported organization described in (ii) and (iii) support g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or organization (your support)	4	A medical res	search organization o	perated in conjunction	with a hos	pital descr	ibed in se	ction 170	(b)(1)(A)(iii). Enter th	ie hospital':	s name,
section 170(b)(1)(A)(iv). (Complete Part III) 7		city, and stat	e									
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 pan of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II) 8 A community frust described in section 170(b)(1)(A)(v). (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 5011 tax) from businesses acquired by the organization after June 30, 1975 8e section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organization and complete lines 11e through 11h a line of supporting organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a line organization function and complete lines 11e through 11h a line organization function and complete lines 11e through 11h a line organization function function and complete lines 11e through 11h a line organization function function 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that described in section 509(a)(1) or section 509(a)(1) or section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that described in (a) organization function f	5 📖	An organizati	on operated for the t	penefit of a college or ur	niversity ov	wned or op	erated by	a governr	nental uni	described	d in	
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)(w)). (Complete Part II) 8		section 170	(b)(1)(A)(iv). (Comple	te Part II)								
section 170(b)(1)(A)(wi). (Complete Part II) A community trust described in section 170(b)(1)(A)(wi). (Complete Part II) A norganization 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 609(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11 of through 11th a Type III - Other By checking this box. Lentify 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)(2) or section 509(a)(2) or section 509(a)(2) or section 509(a)(2) or section 509(a)(2) or section 509(a)(2) or section 509(a)(2) or section 509(a)(2) or section 509(a)(2) or section 509(a)(2) or section 509(a)(2) or section 509(a)(3). Check the box that described in the 1st or		A federal, sta	ite, or local governme	ent or governmental unit	t described	d in sectio	n 170(b)(1)(A)(v).				
A community trust described in section 170(b)(1)(A)(n), (Complete Part II) 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 501(a)(2). (Complete Part III) 10	7 LX	An organization that normally receives a substantial part of its support from a governmental unit or from the general pull										ibed in
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 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organization and complete lines 11e through 11h a last part of supporting organization and complete lines 11e through 11h a last part of supporting organization and complete lines 11e through 11h a last part part part part part part part par		section 170(b)(1)(A)(vi). (Complet	te Part II)								
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 501 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10	8 🖳	A community	trust described in se	ection 170(b)(1)(A)(vi). ((Complete	Part II)						
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	9 💹											
See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a			•	•	•	·	•				-	
An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a				·	tion 511 ta	x) from bu	sinesses a	cquired b	y the orga	nization af	iter June 30	0, 1975
An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a	—			,			_					
more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a												.
describes the type of supporting organization and complete lines 11e through 11h a	11	_	•	•		•					•	
a Type II b Type II c Type III c						-) See sec	tion 509(a	a)(3). Oned	JK the box	mai
By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) above? (i) Name of supported organization described on lines 1-above or IRC section (see instructions)) (iv) Is the organization in col. (ii) Isted in your organization in col. (i) organization in col. (ii) organiz			_ 	¬ -		_		paratod		4	Type III. C)thor
foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type II, Type III, 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? (i) A person who directly or indirectly controls, either alone or together writh persons described in (ii) and (iii) below, the governing body of the supported organization? (iii) A family member of a person described in (i) or (ii) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? (ii) Name of supported organization accepted and the supported organization (v) Did you notify the organization in col. (i) is the organization in col. (i) is feed in your governing document? (iii) ISIN (iii) Type of organization (see instructions)) (iv) Is the organization in col. (i) of your support? (iv) Is the organization in col. (i) of your support? (iv) Is the organization in col. (i) of your support? (iv) Is the organization in col. (i) of your support? (iv) Is the organization in col. (i) of your support? (iv) Is the organization in col. (i) of your support? (iv) Is the organization in col. (i) of your support? (iv) Is the organization in col. (i) of your support? (iv) Is the organization in col. (i) of your support? (iv) Is the organization in col. (ii) of your support? (iv) Is the organization in col. (ii) of your support? (iv) Is the organization in col. (ii) of your support? (iv) Is the organization in col. (ii) of your support? (iv) Is the organization in col. (iii) of your support? (iv) Is the organization in col. (iii) of your support? (iv) Is the organization in col. (iii) of your support? (iv) Is the organization in col. (iii) of your support? (iv) Is the organization in col. (iii) of your support? (iv) Is the organization in col. (iii) of your support?	•	-		• •			-	-	more die			
f If the organization received a written determination from the IRS that it is a Type II, or Type III supporting organization, check this box g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) organization (i) or (ii) above? (i) Name of supported organization organization (described on lines 1-9 above or IRC section (see instructions)) (iii) Type of organization in col. (i) Isted in your organization in col. (i) organization in col. (i) organization in col. (i) organization in col. (i) organization in col. (i) organization (see instructions)) Total	e											
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Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (iii) EN (iii) EN (iv) Is the organization (v) Did you notify the organization in col. (i) organized in the U.S.? Yes No Yes No Yes No Total	•	_					po (, .) po	, 0. 1, p.	, ,,,			
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the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (iii) Version (iii) Type of organization in col. (iii) listed in your governing document? (iv) Did you notify the organization in col. (ii) organization in col. (i) organization in col. (ii) of your support? (iv) Is the organization in col. (ii) organization in col. (ii) of your support? (iv) Is the organization in col. (ii) organization in col. (ii) organization in col. (ii) of your support? (vii) A family member of a person described in (i) above? (vii) A 35% controlled entity of a person described in (i) or (ii) above? (viii) A 35% controlled entity of a person described in (i) or (ii) above? (viii) EIN (viii) Type of organization in col. (ii) of your support? (viii) A 35% controlled entity of a person described in (i) or (ii) above? (viii) EIN (viii) Type of organization in col. (ii) of your support? (viii) A 35% controlled entity of a person described in (i) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (iii) organi	J											Yes No
(iii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? h Provide the following information about the supported organization (spranization of organization) (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section) (see instructions)) (iv) Is the organization in col. (ii) of your support? (ii) of your support? (iv) Is the organization in col. (ii) of your support? (iv) If the organization in col. (ii) of your support? (iv) If the organization in col. (iv) of your support? (vi) Amount of support U.S.? Yes No Yes No Yes No Total					J		•		,, ,	•	11g(ı)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (i) Name of supported organization (described on lines 1-9 above or IRC section (see instructions)) Total (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (iv) Is the organization (v) Did you notify the organization in col. (i) organized in the U.S.? (vii) Amount of support? (viii) Amount of support? Yes No Yes No Yes No Total		-	• •	· · ·								
h Provide the following information about the supported organization(s) (i) Name of supported organization						e?						
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above or IRC section (see instructions)) Yes No Yes No Yes No Total	orga	anization		(described on lines 1-9	in col. (i) lis	sted in your	organizat	ion in con.	l(i) organız	ed in the	• •	
Total				`above or IRC section		,	(i) oi youi			,7		
		<u></u>		(see instructions))	Yes	No	Yes	No	Yes	No		
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	Total					}	}		}	1		
		Paperwork Re	duction Act Notice	see the Instructions f	or				Schedul	e A (Form	1 990 or 99	0-EZ) 2011

132021 01-24-12

Form 990 or 990-EZ.

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

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

Sec	ction A. Public Support						
Cale	ndar 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 ")					13,805.	13,805.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to	u.					
	or expended on its behalf		1				
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge		1				
4	Total. Add lines 1 through 3					13,805.	13,805.
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)						
6	Public support. Subtract line 5 from line 4						13,805.
	ction B. Total Support				•		
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 4					13,805.	13,805.
8	Gross income from interest,						
	dividends, payments received on	l.					
	securities loans, rents, royalties						
	and income from similar sources					6,292.	6,292.
9	Net income from unrelated business						
_	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)					333.	333.
11	Total support. Add lines 7 through 10						333. 20,430.
12		etc (see instruct	ions)	l		12	
	First five years. If the Form 990 is for	•	•	rd, fourth, or fifth t	tax vear as a section	on 501(c)(3)	
	organization, check this box and stor	-	,	, , , , , ,	•	, ,, ,	
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2011 (I	line 6, column (f) c	livided by line 11,	column (f))		14	67.57 %
15	Public support percentage from 2010	Schedule A, Parl	II, line 14			15	%
	33 1/3% support test - 2011. If the			on line 13, and line	14 is 33 1/3% or	more, check this box	and
	stop here. The organization qualifies						$\triangleright x$
k	33 1/3% support test - 2010. If the				d line 15 is 33 1/39	% or more, check the	s box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes				ne 13, 16a, or 16b,	and line 14 is 10% (or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			•	•	3	
ŧ	10% -facts-and-circumstances tes	-	•		_	17a, and line 15 is 1	0% or
-	more, and if the organization meets the	· · · · · · · · · · · · · · · · · · ·					
	organization meets the "facts-and-circ						
18	Private foundation. If the organization						▶ □
					0.1	adula A /Farm 000	

Schedule A (Form 990 or 990 EZ) 2011 Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support						
Cale	endar 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]			
	ınclude 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 bus- iness under section 513						
4	Tax revenues levied for the organ- ization'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						
72	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	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						
c	Add lines 7a and 7b						
_8	Public support (Subtract line 7c from line 6)				<u></u>	<u> </u>	<u> </u>
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning ın) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6		<u> </u>				
10	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
(c Add lines 10a and 10b			ļ			<u> </u>
11	Net income from unrelated business activities not included in line 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)						
	Total support (Add lines 9, 10c, 11, and 12)	L	<u> </u>	<u> </u>	<u> </u>	5041 1151	<u> </u>
14	First five years. If the Form 990 is fo	r the organization'	's first, second, thi	rd, fourth, or fifth t	ax year as a sect	on 501(c)(3) organı	zation,
	check this box and stop here	lia Command Da		·			<u> </u>
Se	ction C. Computation of Pub						
15	., ,			column (f))		15	%
16						16	%
	ction D. Computation of Inve					17	%
	,	nvestment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))					
18	8 Investment income percentage from 2010 Schedule A, Part III, line 17 9a 33 1/3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not						%
19:							1 / is not
	more than 33 1/3%, check this box a						▶ ∟
	b 33 1/3% support tests - 2010. If the line 18 is not more than 33 1/3%, ch	-					. —
aΛ				•		· -	
<u> 20</u>	Private foundation, If the organization	эн аш пот спеск а	LUOX OIT IIITE 14, 18	a, or 190, check t	ins box and see I	10111101115	

	and rai	t III, III TE Z	iso comp	olete this part for any	additic	mai iiii	ormation (S	ee msm	uctions)		
X	EXEMPT	STATUS	WAS	REINSTATED	AS	OF	MARCH	15,	2012.	,	
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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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number 84-6032226

Par	t I Organizations Maintaining Donor Advise		s or Accounts. Complete if the			
	organization answered "Yes" to Form 990, Part IV, line		of the contract complete in the			
	Organization answered Tes to Form 556, Furt 17, into	(a) Donor advised funds	(b) Funds and other accounts			
4	Total number at end of year					
1 2	Aggregate contributions to (during 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 hold in donor adv	seed funds			
5	are the organization's property, subject to the organization's		Yes No			
6	Did the organization inform all grantees, donors, and donor a	-				
6	for charitable purposes and not for the benefit of the donor of					
	impermissible private benefit?	of donor advisor, or for any other purpos	Yes No			
Par		ganization answered "Yes" to Form 990				
	Purpose(s) of conservation easements held by the organization		Tarry, mo			
1	Preservation of land for public use (e.g., recreation or e		istorically important land area			
	Protection of natural habitat	· —	rtified historic structure			
	Preservation of open space	i reservation of a ce	Timed Historic Structure			
2	Complete lines 2a through 2d if the organization held a qualif	fied consentation contribution in the form	n of a conservation easement on the last			
2	day of the tax year	ned conservation contribution in the form	of a conservation casement on the last			
	day of the tax year		Held at the End of the Tax Year			
-	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements	2b				
0	•	2c				
d						
a	listed in the National Register	after 6/17/00, and not on a mistoric struc	2d			
3	Number of conservation easements modified, transferred, re	leased extinguished or terminated by the	L-31-2			
3	year	leased, extiliguished, of terminated by the	to organization during the tax			
4	Number of states where property subject to conservation ea	sement is located				
5	Does the organization have a written policy regarding the pe		f			
3	violations, and enforcement of the conservation easements i		Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,					
7	Amount of expenses incurred in monitoring, inspecting, and					
8	Does each conservation easement reported on line 2(d) above					
	and section 170(h)(4)(B)(ii)?	to satisfy the requirements or essue.	Yes No			
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expen-				
•	include, if applicable, the text of the footnote to the organiza					
	conservation easements					
Par	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or	Other Similar Assets.			
L	Complete if the organization answered "Yes" to Form					
1a	If the organization elected, as permitted under SFAS 116 (AS		ement and balance sheet works of art,			
	historical treasures, or other similar assets held for public ex					
	the text of the footnote to its financial statements that descr					
b	If the organization elected, as permitted under SFAS 116 (AS		nt and balance sheet works of art, historical			
	treasures, or other similar assets held for public exhibition, e					
	relating to these items	•				
	(i) Revenues included in Form 990, Part VIII, line 1		> \$			
	(ii) Assets included in Form 990, Part X		\$			
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financ				
	the following amounts required to be reported under SFAS 1		-			
а	Revenues included in Form 990, Part VIII, line 1	•	> \$			
b	Assets included in Form 990, Part X		\$			

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Schedule D (Form 990) 2011

	chedule D (Form 990) 2011 COLORADO L'IONS' FOUNDATION 84-6032226 Page 2						
Pai	t III Organizations Maintaining C	ollections of A	rt, Historical 1	reasures, c	or Other	Similar Ass	sets (continued)
3	Using the organization's acquisition, accession (check all that apply)	on, and other record	ds, check any of th	e following that	t are a sign	ificant use of	its collection items
а	Public exhibition	,	d Loan or e	kchange progra	ıms		
b	Scholarly research	_		torialigo progra			
c	Preservation for future generations	`					
4	Provide a description of the organization's co	illections and explai	in how they further	the organization	nn's exemn	ot nurnose in E	Part XIV
5	During the year, did the organization solicit or	•	•	-	· ·	•	
	to be sold to raise funds rather than to be ma				,	[Yes No
Pai	t IV Escrow and Custodial Arrang reported an amount on Form 990, Par	gements. Compl			'Yes" to Fo	orm 990, Part I	
1a	Is the organization an agent, trustee, custodia	an or other intermed	diary for contributi	ons or other as:	sets not inc	cluded	
	on Form 990, Part X?		,			[Yes No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing table				
	,	,	•				Amount
С	Beginning balance					1c	
d	Additions during the year					1d	
е	Distributions during the year					1e	
f	Ending balance					1f	
2a	Did the organization include an amount on Fo	orm 990, Part X, line	⊋21?				Yes No
b	If "Yes," explain the arrangement in Part XIV						
Par	rt V Endowment Funds. Complete if	the organization ar	nswered "Yes" to I	orm 990, Part	IV, line 10		
		(a) Current year	(b) Prior year	(c) Two year	s back (d)	Three years ba	ck (e) Four years back
1a	Beginning of year balance	······································					
b	Contributions						
¢	Net investment earnings, gains, and losses						
d	Grants or scholarships						
е	Other expenditures for facilities						
	and programs	·, ·, ·					
f	Administrative expenses						
g	End of year balance			<u></u>		<u></u>	
2	Provide the estimated percentage of the curr	ent year end baland	ce (line 1g, column	(a)) held as			
а	Board designated or quasi-endowment		%				
b	Permanent endowment >	%					
С	Temporarily restricted endowment >	%					
	The percentages in lines 2a, 2b, and 2c should equal 100%						
3a	Are there endowment funds not in the possession of the organization that are held and administered for the organization						
	by						Yes No
	(i) unrelated organizations 3a(i)						
	(ii) related organizations 3a(ii)						
b	b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?						
4	Describe in Part XIV the intended uses of the						
Pa	rt VI Land, Buildings, and Equipm						
	Description of property	(a) Cost or o		st or other is (other)		umulated eciation	(d) Book value
	l and	Dasis (IIIVest	mont) Das	is (otilei)	uehie	Joianoll	
	Land						
	Buildings					+	<u>.</u>
	Leasehold improvements						
	Equipment						
	Other I. Add lines 1a through 1e (Column (d) must e	aual Form 990. Pan	t X. column (B). line	= 10(c))		→	

Schedule D (Form 990) 2011

Employer identification number 84-6032226 OMB No 1545-0047 Open to Public Inspection (h) Purpose of grant HIGH PARK FIRE GRANT 201 or assistance X Yes 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 GRANT recipient that received more than \$5,000 Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed address of organization (below, if applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash pront of its applicable cash 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. FMV, appraisal, other) Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ં o assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ▶ Attach to Form 990. (d) Amount of cash grant 000 5,000, (c) IRC section if applicable COLORADO LIONS FOUNDATION 45-3718930 General Information on Grants and Assistance criteria used to award the grants or assistance? 1 (a) Name and address of organization COLORADO LIONS KIDSIGHT PROGRAM, INC. - 8200 S QUEBEC ST #A3-704 or government CO 80112 DISTRICT 6 NE LIONS Name of the organization Department of the Treasury Internal Revenue Service **SCHEDULE 1** CENTENNIAL (Form 990) Part II Part

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table LHA

Schedule I (Form 990) (2011)

Page 2 Schedule I (Form 990) (2011) (f) Description of non-cash assistance 84-6032226 (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed SCHEDULE I, PART I, LINE 2: GRANT APPLICATIONS ARE RECEIVED AND REVIEWED BY Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (d) Amount of non-cash assistance 22 (c) Amount of cash grant COLORADO LIONS FOUNDATION (b) Number of recipients (a) Type of grant or assistance THE BOARD OF DIRECTORS. Schedule I (Form 990) (2011) Part III

132102 01-27-12

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

Name of the organization COLORADO LIONS FOUNDATION	Employer identification number 84-6032226
FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS REVIEW	ED BY PRESIDENT
AND TREASURER PRIOR TO FILING THE RETURN.	
FORM 990, PART VI, SECTION C, LINE 19: AVAILABLE UPON REQ	UEST.
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED LOSSES ON INVESTMENTS:	-22,993.

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

Schedule O (Form 990 or 990-EZ) (2011)