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Form. 990

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)

OMB No. 1545-0047

2012

Open to Public

Department of the Treasury

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

| Intern | al Revenue | | The Organization may have to | dise a copy of this return to s | | | 113 | spection | | | |
|-------------------------|--------------|------------|--|----------------------------------|------------------|------------------------------|----------------------------------|--|--|--|--|
| <u> </u> | | | lendar year, or tax year beginning | | | ending | dantu | fraction number | | | |
| | Check if a | | | DO COALITION OF LAND | TRUSTS | | D Employer identification number | | | | |
| <i></i> | Address cl | hange | Doing Business As | | , | 84-13558 | | | | | |
|] ١ | Name cha | nge | Number and street (or PO box if mail is | not delivered to street address) | Room/suite | E Telepho | ne numbe | ∍r | | | |
| ו [| nitial retui | rn | 1245 E COLFAX AVE | | 203 | (303) 271 | -1 <u>577</u> | | | | |
| Π- | Terminate | d | City, town or post office, state, and ZIP of | ode | | | | | | | |
| ٦, | Amended | return | DENVER | со | 80218 | G Gross r | eceipts \$ | 461,708 | | | |
| = | | n pending | F Name and address of principal officer | | | H(a) is this a group r | eturn for a | affiliates? Yes X No | | | |
| ' ′ | тррповио | n penang | Kerri Rollins Same as "C" above | | | H(b) Are all affiliates | | = = | | | |
| | | | | | | If "No," attach a | | | | | |
| | ax-exemp | | X 501(c)(3) 501(c) (| (insert no) 4947(a)(1) | or 527 | 1110, allacine | That (acc | matructions) | | | |
| J V | Vebsite: | : ► ww | w cclt org | | _ | H(c) Group exemption | n number | <u>. </u> | | | |
| KF | orm of or | ganization | X Corporation Trust Ass | ociation Other > | L Ye | ar of formation 199 |)1 M | State of legal domicile CO | | | |
| | art l | Su | mmary | | | | | | | | |
| 9 (A) | 1 | | describe the organization's mission | or most significant activitie | s The | Colorado Coalitic | n of Lar | nd Trusts | | | |
| | 1 | | es land conservation at a state leve | | | | 11 01 201 | | | | |
| ģ | } | | ionalism among the state's land tru | | | | | | | | |
| anc | } | 3 | nservation | | inzadono in | VOIVOU III | | | | | |
| ern | | | | | | L-f | · | | | | |
| õ | 2 | | his box ▶ if the organization | | or aisposed | or more than ∠5 | 1 - | I | | | |
| 8 | 3 | | r of voting members of the governir | 1= - | | | 3 | 13 | | | |
| ties | 4 | | r of independent voting members o | 1 | • | | 4 | 13 | | | |
| Addivities & Governance | 5 | | imber of individuals employed in ca | | ine 2a) | | 5 | 6 | | | |
| | 6 | | imber of volunteers (estimate if neo | 1 | | | 6 | 20 | | | |
| ಅ | 7a | | related business revenue from Par | 1 | | | 7a | 0 | | | |
| 0 | <u> b</u> | Net unre | elated business taxable income fro | m Form 990-1, line 34 | · | T | 7b | 0 | | | |
| _ | 1 _ | | 45 110 | | | Prior Year | | Current Year | | | |
| ⊒ૄ | 8 | | utions and grants (Part VIII line) In | | | | 352,511 | | | | |
| رةٍ | 9 | _ | n service revenue (Part VIII- line Do | | | | 43,260 | | | | |
| Πŵ | 10 | | ent income (Bart VIII, column (A), | | | | 268 | | | | |
| Z, | 11 | | evenue (Part VIII, dolumn (A), lines | | | | 44,207 | | | | |
| = | 12 | | venue—add mes 8 through 11 (must | | ne 12) | <u> </u> | 140,246 | | | | |
| SCANNED UN | 13 | Grants | and similar amounts paid (Part IX. | COLUMN (A), lines 1-3) | | | 0 | | | | |
| (V) | 14 | | s paid to ortor members (Pan IX C | | - 5 40) | | 0 | | | | |
| ės | 15 | | , other compensation, employee bene | | s 5–10) | | 272,560 | 279,006 | | | |
| Expenses | 16a | | ional fundraising fees (Part IX, colu | | | Martin and a manual and Area | 0 | 0 | | | |
| Ä | b | | ndraising expenses (Part IX, colum | 1 ' ' | 2,622 | | | | | | |
| | 17 | | xpenses (Part IX, column (A), lines | | 0.5) | | 97,606 | | | | |
| | 18 | | penses Add lines 13-17 (must eq | • • • | e 25) | | 370,166 | | | | |
| | 19 | Revenu | e less expenses. Subtract line 18 f | from line 12 | | | 70,080 | | | | |
| Net Assets or | | Takal aa | and (Dart V. June 10) | | | Beginning of Curr | | End of Year | | | |
| (SSe | 20 | | ssets (Part X, line 16) | | | ļ | 200,087 | | | | |
| et A | 21 | | ibilities (Part X, line 26) | 04 fram line 00 | | - | 13,718 | | | | |
| Z I | 22 | | ets or fund balances Subtract line | 21 from line 20 | | | 186,369 | 198,232 | | | |
| Nic | art II | Sig | gnature Block | | | | | | | | |
| | | | ry, I declare that I have examined this return, ect, and complete_Declaration of preparer (o | | | | | ge | | | |
| | 501.01, 121 | A | V (| (C) | onnaudit of with | on propercy made any kin | - C | 1.5/15 | | | |
| Sig | gn | 1 | Signature of officer | for Kee | | L Dat | \overline{D} | 13/13 | | | |
| He | re | | | INTE INTE | PINA + | EXECUTIVE | - | 157700 | | | |
| | | 🌶 | Type or print name and title | 1016 | erim t | EXECUTIVE | | eciac | | | |
| | | Prin | nt/Type preparer's name | Preparer's signature | | Date | | PTIN | | | |
| Pa | id | ''" | | 111 | | | Check | if [| | | |
| | nu eparer | . Na | omi Hull | 11 Vacin 4 | ww | 4/26/2013 | self-emp | ployed P00544291 | | | |
| | e Only | | m's name ▶ Hull & Associates, P.C | <u> </u> | | Firm's EIN | ▶ 84-1 | 215980 | | | |
| J-3 | | Fire | n's address ► 780 Simms St , Ste 2 | 00, Golden, CO 80401 | | Phone no | (303 | 3) 202-2702 | | | |
| Ma | v the IR | | ss this return with the preparer sho | | | - Ione 100 120 | | X Yes No | | | |
| | , | | | | -, | | | الله وي بن | | | |

| Pa | rtall | | | Accomplishments response to any question in this Part III | |
|----|---|---|--|--|---------------|
| 1 | • | scribe the organization | | Trusts is to promote and support land | |
| | | | | adership, advocacy, education and outreach | |
| | | | | | |
| 2 | the prior l | Form 990 or 990-EZ? | | | Yes X No |
| 2 | | lescribe these new sen | 1 | ule O - significant changes in how it conducts, any program | |
| 3 | services? | = | _ | | Yes X No |
| 4 | Describe expenses | the organization's prog Section 501(c)(3) and | ram service acc d 501(c)(4) orga | complishments for each of its three largest program services, as measure anizations are required to report the amount of grants and allocations to other program service reported | |
| 4a | (Code | | | 151,670 including grants of \$) (Revenue \$ |) |
| | | | | re that conservation finance incentives in | |
| | and local in Colora | government open spacedo These goals have | ce programs and been met throu | e the primary conservation tools used by land trusts od have resulted in nearly 200 million acres protected igh broad based coalition building, including ind environmental interests | |
| | | | - | | |
| | | | | | |
| | | | | | |
| | | | | | _ |
| 4b | Colorado conferen appraise conferen published | n - CCLT conferences, who are involved in the ce is attended by apprors, realtors and land tru ce features training sest diguides on phasing co | publications and e preservation of eximately 250 pe st personnel) as ssions by expert nservation ease | 176,796 Including grants of \$) (Revenue \$ Ind newsletters reach thousands of people throughout of Colorado's open space heritage. Our annual people including conservation professionals (lawyers, see well as landowners. This state-wide policy to in the field. In recent years, CCLT has ement transactions, appraising conservation easements, and on funding opportunitities for open space projects. | |
| | | | | | |
| | | | | | |
| | | | <u>_</u> | | |
| 4c | (Code Other pro |) (Expering) (Expering)) (Expering) | nses \$ re varied and no | 52,203 including grants of \$) (Revenue \$ ot tracked individually |) |
| | | | | | |
| | | | | | |
| | | | <u> </u> | | •=== |
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| | | | | | |
| 4d | Other pro (Expense | ogram services (Descri | be in Schedule 0 including gr | | |
| 4e | | gram service expense | | rants of \$ 0) (Revenue \$ 0) 380,669 | - |
| | | | | | |

| | | | 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 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 1 2 | X | |
| | 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 | | Х |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | х | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, | | | |
| | assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, | _ | | |
| _ | Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors | 5 | | |
| 6 | 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 | | Х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | Ī | |
| | 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 | | Х |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a | | | |
| | custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt | | | |
| | negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | X |
| 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 | | _ |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, | | 1339 5 | X |
| | 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 | Anna Ca C.I. | | |
| | 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 | 441. | | |
| c | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more | 11b | | X |
| Ū | 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 |
| | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | 11e | | Х |
| • | the organization's separate of consolidated final rola 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 | | × |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | ^- |
| | Schedule D, Parts XI and XII | 12a | Х | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," | | | |
| 40 | and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | X |
| 13 14a | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States? | 13 | | X |
| | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking. | 14a | | X |
| ~ | 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 (\dot{A}), line 3, more than \$5,000 of grants or assistance to any | • | | |
| 40 | organization 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 located outside the United States? If "Yes," complete Schedule F, Parts III and IV | 16 | | V |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services | מו | | X |
| • | on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | | Х |
| 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 | Χ | |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | , . | | ., |
| 20-2 | If "Yes," complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 19 | | X |
| | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20a 20b | | |
| | 1 | | | |

19? Note. All Form 990 filers are required to complete Schedule O

| | | 04-100000 | | ayc T |
|-------------|---|-----------|----------|--|
| Par | 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 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 | 20 | | |
| | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the | 22 | | X |
| 23 | organization's current and former officers, directors, trustees, key employees, and highest compensated | | | |
| | employees? If "Yes," complete Schedule J | 23 | | Х |
| 242 | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than | -23 | | <u> </u> |
| 2 70 | \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If</i> "Yes," answer lines | | | |
| | 24b through 24d and complete Schedule K. If "No," go to line 25 | 24a | | Х |
| b | | 24b | - | |
| | Did the organization maintain an escrow account other than a refunding escrow at any time during the year | 1 | | |
| • | 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 | | | 1 |
| | with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | 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 | | X |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or | r | | |
| | disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, | | | Ì |
| | substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled | | ĺ | ľ |
| | 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) | | | |
| a | 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 | | | l |
| | Schedule L, Part IV | 28b | <u> </u> | X |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) | | | |
| 20 | was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 28c | | X |
| 29 30 | Did the organization receive more than \$25,000 in hon-cash contributions / ii Yes, complete schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | 29 | | X. |
| 30 | conservation contributions? If "Yes," complete Schedule M | 20 | | |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N</i> , | 30 | | X |
| ٠. | Part I | 31 | ļ | 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 | | Х |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | - 52 | | ^ |
| | sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I | 33 | | Х |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, | <u> </u> | | |
| | III, or IV, and Part V, line 1 | 34 | | X |
| | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | Х |
| b | If "Yes" to line 35a, 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 | | <u> </u> |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 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 | | | |
| 20 | VI | 37 | - | X_ |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and | 1 | | 1 |

COLORADO COALITION OF LAND TRUSTS

Statements Regarding Other IRS Filings and Tax Compliance Part V

| | Check if Schedule O contains a response to any question in this Part V | • | | • | | <u> </u> |
|--------|--|--------|-------------|---------------------------------------|--|--------------|
| | | | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable | 1a | 6 | N. S. | 関連を | |
| 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 | repor | table | 1980 | | |
| | gaming (gambling) winnings to prize winners? | | | 1c | | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | | | 有意 | | 3 Sa. |
| | Statements, filed for the calendar year ending with or within the year covered by this return | 2a | 6 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax re | | > | 2b | X | <u> </u> |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction | ons) | | | arus Asia | in the same |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | | | 3a | <u> </u> | X |
| þ | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | | | 3b | <u> </u> | <u> </u> |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other | | - | | | 1 |
| | over, a financial account in a foreign country (such as a bank account, securities account, or other | financ | cial | | | ١ |
| | account)? | | | 4a | Ect Walforder | X |
| b | 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 Financi | | counts | | 100 | 上盤上 |
| 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 trans | sactio | n'7 | 5b | \vdash | X |
| C | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | . 41 | | 5c | <u> </u> | - |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did | ine | | | | |
| h | organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions. | tiono | 0.5 | 6a | | X |
| b | gifts were not tax deductible? | ILIOHS | Oi | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | 40.40 | , hij | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for | or goo | ds | | | |
| | and services provided to the payor? | | | 7a | X | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | | 7b | Х | <u> </u> |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it | was | | | 1 | |
| | required to file Form 8282? | | 1 | 7c | | X |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | | | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit | | | 7e | <u> </u> | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cor | | | 7f | <u> </u> | X |
| 9 | If the organization received a contribution of qualified intellectual property, did the organization file Form 88 | | | 7g | <u> </u> | ऻ |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization f | | orm 1098-C? | 7h | | 21man # |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting | | | 130 | | |
| | organizations. Did the supporting organization, or a donor advised fund maintained by a sponsorii | ng | | | | |
| 0 | organization, have excess business holdings at any time during the year? | | | 8 Grevan | £2°1,7'8 | 4 (Se.57) a |
| 9 a | Sponsoring organizations maintaining donor advised funds. | | | NA. | | 1992 |
| a b | Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? | | | 9a | | |
| 10 | Section 501(c)(7) organizations. Enter | | | 9b | 407957 | STANCE. |
| a | 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 | 10a | | | | 1 |
| 11 | Section 501(c)(12) organizations. Enter | LOD | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| | Gross income from members or shareholders | 11a | | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources | 114 | | | | |
| | against amounts due or received from them) | 11b | | | | 體 |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo | | 412 | 12a | Silveria | Spring. |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | | | S. 18 | 353 |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | ا | | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | | | 13a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O | | | 業場 | 证案 | 张裳. |
| b | Enter the amount of reserves the organization is required to maintain by the states in which | | | | 100 | W |
| | the organization is licensed to issue qualified health plans | 13b | | | 跨 亞 | 4 |
| С | Enter the amount of reserves on hand | 13c | | | 歐層 | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | | | 14a | | Х |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu | ıle O | | 14b | | |

Part VI

| Secti | ion A. Governing Body and Management | | | | | | | | | |
|--------|---|------------------------|---|-------------|--|--|--|--|--|--|
| | | | 7903444 | Yes | No | | | | | |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 1a | 13 | | S. | | | | | |
| | 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 | | 1 | | | | | | | |
| | committee, explain in Schedule O | | 1 1 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | | | | | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | | 13 | 1 | | | | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relations | hip with | <u>@</u> 1.3 | 136 | STATE OF THE STATE | | | | | |
| | any other officer, director, trustee, or key employee? | | 2 | | _ X_ | | | | | |
| 3 | Did the organization delegate control over management duties customarily performed by or under | | | | ., | | | | | |
| | supervision of officers, directors, or trustees, or key employees to a management company or other | | 3 | | _X | | | | | |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 w | | 5 | | X | | | | | |
| 5 | | | | | | | | | | |
| 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 | 7. | | | | | | | |
| l. | one or more members of the governing body? ! Are any governance decisions of the organization reserved to (or subject to approval by) members | | 7a | | X | | | | | |
| b | stockholders, or persons other than the governing body? | '1 | 7b | | Х | | | | | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertake | n during | No. Acid | · 推翻 | 以 | | | | | |
| 0 | the year by the following | ii duiing | 100 | | | | | | | |
| а | The governing body? | | 8a | X | [.41%47] | | | | | |
| b | Each committee with authority to act on behalf of the governing body? | | 8b | | х | | | | | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be r | eached | | | | | | | | |
| - | at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | | 9 | | Х | | | | | |
| Sect | ion 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 | | | ŀ | | | | | | |
| | affiliates, and branches to ensure their operations are consistent with the organization's exempt pu | • | 10b | ļ.,. | | | | | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before | ore filing the form? | 11a | X | 97 Bio | | | | | |
| 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could | aivo maa ta aanflista | 12a | X | | | | | | |
| b c | Did the organization regularly and consistently monitor and enforce compliance with the policy? If | • | 12b | X | | | | | | |
| C | describe in Schedule O how this was done | 163, | 12c | x | | | | | | |
| 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 | <u> </u> | | | | | |
| 15 | Did the process for determining compensation of the following persons include a review and appro | nval hv | | ない。 | (1) | | | | | |
| | independent persons, comparability data, and contemporaneous substantiation of the deliberation | | | | 逐步 | | | | | |
| а | The organization's CEO, Executive Director, or top management official | | 15a | 10317967 | X | | | | | |
| b | Other officers or key employees of the organization | | 15b | | Х | | | | | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) | | 对發 | T. | | | | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang | gement | in the | | | | | | | |
| | 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 evalu | iate its | 1936; 5°°E | | 摇丛 | | | | | |
| | participation in joint venture arrangements under applicable federal tax law, and take steps to safe | guard | | 此选 | | | | | | |
| _ | the organization's exempt status with respect to such arrangements? | | 16b | | ļ | | | | | |
| | tion C. Disclosure | | | | | | | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed | | | | | | | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 99 | U-1 (Section 501(c) | (3)s onl | y) | | | | | | |
| | available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (e) | minum im Outri dist. O | • • | | | | | | | |
| 19 | Own website X Another's website X Upon request Other (e) Describe in Schedule O whether (and if so, how), the organization made its governing documents, | conflict of interest | <i>'</i>) | | | | | | | |
| 19 | policy, and financial statements available to the public during the tax year | commet of interest | | | | | | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books | and records of the | | | | | | | | |
| | Crog Vankoo | (303) 271- | 1577 | | | | | | | |
| | 1245 F Colfay Ava Ste 203 Denver CO 80218 | 7000/ 21 1- | | | | | | | | |

84-1355809

COLORADO COALITION OF LAND TRUSTS

| 100 | | | vi | ты |
|------|----|---|-----|-----|
| πн - | -1 | • | 7 A | 165 |
| M | | | | 174 |
| | | | | |

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.

| A . 41 4 | 010 Di | T | and the second second second | | pensated Employees |
|------------|------------------------|---------------|------------------------------|------------------|-----------------------|
| Section A. | ()tticers)irectors | Triigtee Ke | V EMINIOVAAS | and Hidnest Com | neneated Employees |
| OCCHOILA. | | Trustees, Ite | y Linbidyccs, | and rightest com | polisated Ellipioyees |
| | | | | | |

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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

| (A) Name and Title | (B) Average hours per week (list any | box, | unle: ei an | Pos neck ss pe d a d | rson | e than on as both or/truste | an ee) | (D) Reportable compensation from | (E) Reportable compensation from related | (F) Estimated amount of other |
|-----------------------|--|-------------|-----------------------|-------------------------------|-------------|------------------------------|-----------|--|--|--|
| | hours for related organizations below dotted line) | or director | Institutional trustee | Officer | ey employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| (1) Joe Almon | 1 00 | | | | | | | | | |
| Director | 0 00 | X_ | | | | | | | | |
| (2) Scott Campbell | 1 00 | | | | | | | | | |
| Director | 0 00 | X_ | | | | | | | | |
| (3) Cary Baird | 1 00 | | | | | | | | | |
| Director | 0 00 | X | | | | | | | | |
| (4) Buck Frederickson | 1 00 | | | | | | | | | - |
| Vice President | 0 00 | - | | Х | | | | | | |
| (5) Jason Corzine | 1 00 | | 1 | | | | | | | |
| Director | 0 00 | X | | | | | | | | |
| (6) Ken Mırr | 1 00 | | | | | | | | | |
| Director | 0 00 | - 1 | | | | | | | | |
| (7) Kerrı Rollins | 1 00 | | | | | | | | | |
| President | 0 00 | - 1 | | Х | ļ | ļ | | | | |
| (8) Kevin Shea | 1 00 | | Г | | | | | | | |
| Treasurer | 0 00 | - | | X | | | | | | |
| (9) Greg Vallın | 1 00 | | | | | | | | | |
| Secretary | 0 00 | X | | Х | | | | | | |
| (10) Jeff Crawford | 1 00 | | | | | | | | | |
| Director | 0.00 | X | | | İ | 1 1 | | | | · |
| (11) Erik Glenn | 1 00 | | | _ | | 1 | | | | |
| Director | 0 00 | • | | | 1 | | | | | |
| (12) Robin Reid | 1 00 | - | T | <u> </u> | | 1 | | | | |
| Director | 0 00 | - 1 | | | | | | | | |
| (13) Juniper Katz | 1 00 | | | Ī | | | | | <u>. </u> | - |
| Director | 0 00 | · I | | | | | i | | | |
| (14) John Swartout | 40 00 | + | | | | | | | | |
| Executive Director | 0 00 | .) | l | $ _{X}$ | | | | 70,323 | i | |

| ≫ P a | TOV | Section A. Officers, Directors, Tr | ustees, Key Em | oloye | es, | and | 1 Hi | ghes | t C | ompensated Em | ployees (con | tınuec | <u>1)</u> | |
|--------------|-----------------------------|--|--|--------------------------------|-----------------------|-------------------------------|--------------|---|-------------|--|---|----------------|--|-------------------|
| | | (A) Name and title | (B) Average hours per week (list any | box, office | unle: er an | Pos neck ss pe d a d | rson | than of the the than of the | an ee) | (D) Reportable compensation from | (E) Reportable compensation from related | | (F) Estimate amount other | of |
| | | | hours for related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizations (W-2/1099-MISC | (c) | from th from th organizat and relat organizati | ie tion ted |
| | Jeannie M | | | | | | | | | | | | | |
| | m Executiv | | 0 00 | - | | X | - | | - | 60,000 | | + | | 4,288 |
| 7. I.D. | | | | | | | | | | | | | | |
| (17) | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| (19) | | | | | | | | | | : | | | | |
| (20) | | | | | | | | | <u> </u> | | | | | |
| (21) | | | | | | | | | | | | | | |
| (22) | | | | - | | | | | | | | | | |
| (23) | | | | - | | | | | | | | | | |
| (24) | | | | | | | | | | | | | | |
| (25) | | | | · | | | | | | | | | | |
| 1b c | | n continuation sheets to Part VII, S | Section A | | | | | | > | 130,323 0 | | 0 | | 4,288 C |
| <u>d</u> | | d lines 1b and 1c) sber of individuals (including but not l | imited to those lie | etad s | aho. | (<u>a)</u> v | who | rece | <u> </u> | 130,323 | | 0 | | 4,288 |
| | | e compensation from the organization | | | | | WIIO | 1666 | ivec | i more triair \$100 | ,000 01 | | | |
| 3 | Did the or | rganization list any former officer, dir on line 1a? <i>If "Yes," complete Sche</i> | ector, or trustee, | key e | emp | loye | ee, d | or hig | hes | t compensated | | 医 | | |
| 4 | | ndividual listed on line 1a, is the sum | l. | | | on a | and | other | COL | mpensation from | | 3 %,} | | X |
| | | ization and related organizations gre | | | | | | | | | | | | X |
| 5 | | erson listed on line 1a receive or access rendered to the organization? If " | | | | | | | | | /idual | 5 | | X |
| Sec | tion B. Ind | ependent Contractors | | | | | | | | | | | | .L.:` |
| 1 | Complete compensations year | this table for your five highest comp ation from the organization Report c | ensated indepen | dent the c | con aler | trac idar | tors yea | that ar end | rec | eived more than with or within the | \$100,000 of e organization | 's tax | | |
| _ | | (A) Name and business ad | dress | | | | | | | (B) Description of ser | vices | Com | (C) pensation | ו |
| | | | | | | | | | | | | | | |
| | | | 1 | | | | | | + | | | | | C |
| | | | | | | | | _ | | | | | | |
| | Total reser | har of indopendent contractors (contractors | Iding but not live | ind to | 46- | ' | | | | | Re-90 | inder Höllerör | th 9500240 | C |
| 2 | | ber of independent contractors (inclusions from the state of the state | _ | ιεα το ▶ | ı tr)C | se I | ıste | a abc n | ve) | wno received | | が対象を | | |

| Heli | 4VIII | Check if Schedule O contains | a response | e to ar | ny question in th | ıs Part VIII | | | |
|---|--------------|--|---------------|----------------------|----------------------------|---|--|--------------------------------|--|
| | | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| ifts, Grants r Amounts | 1a b c | Federated campaigns Membership dues Fundraising events Related organizations | | 1a 1b 1c 1d | 0 36,925 55,000 0 | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | e f | Government grants (contributions) | | 1e 1f | 312,117 17,506 | | | | |
| | g h 2a | Total. Add lines 1a–1f Conference registrations | | | Business Code 541900 | 404,042 40,244 | 40,244 | | |
| ו Service Revenue | b c d | | | - - - | | 0 0 0 | | | |
| Program | f g 3 | All other program service revenue Total. Add lines 2a–2f Investment income (including div | | erest, | ▶ | 0 40,244 | 200 年 | | |
| | 4 5 | other similar amounts) Income from investment of tax-ex Royalties | | d proc | > | 263 0 0 | Africa 1991 of the Openion | | 263 |
| | 6a b c | Gross rents Less rental expenses Rental income or (loss) Net rental income or (loss) | () (30 | 0 | 0 | | | | |
| | d 7a b | Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses | (ı) Securii | ties 0 | (II) Other | | | | |
| a) | c d | Gain or (loss) Net gain or (loss) Gross income from fundraising | | 0 | 0 | 0 | | | |
| Other Revenue | 8a | events (not including \$ of contributions reported on line See Part IV, line 18 | 72,506 1c) | a | 14,409 | — 1. 17 (20) Proposition 1 (1) Conf. 7. | | | |
| ₽ E | b c 9a | Less direct expenses Net income or (loss) from fundra Gross income from gaming activ See Part IV, line 19 | - | а | 23,055 | -8,646 | | | |
| | c 10a | Less direct expenses Net income or (loss) from gaming Gross sales of inventory, less returns and allowances | g activities | b a | | C | | | |
| | 11a | Net income or (loss) from sales of Miscellaneous Revenue Miscellaneous revenue & refund | | b / | Business Code 900099 | 2,750 | 2,750 | | |
| | b c d | All other revenue Total. Add lines 11a–11d | | | • | 000000000000000000000000000000000000000 | · | | |
| | 12 | Total revenue See instructions | | | ▶ | 438 653 | | HARDON AND THE | 263 1000 - Marine 100 - |

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)

| 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 | | | | A STATE OF THE STA | 為自然學出 | | | | | |
| | organizations in the United States See Part IV, line | e 21 | 0 | · · · | | | | | | | |
| 2 | Grants and other assistance to individuals in the | | | | | | | | | | |
| | United States See Part IV, line 22 | İ | 0 | | | Charles State | | | | | |
| 3 | Grants and other assistance to governments, | | | | | | | | | | |
| | organizations, and individuals outside the | | | | | | | | | | |
| | United States See Part IV, lines 15 and 16 | l | 0 | | ACMEDICATION AND THE PARTY OF T | | | | | | |
| 4 | Benefits paid to or for members | | 0 | | 等级,通常的基础。 | AND THE STREET STREET | | | | | |
| 5 | Compensation of current officers, directors, | | 00 222 | 00.050 | 7.005 | 0.450 | | | | | |
| _ | trustees, and key employees | | 90,333 | 80,258 | 7,925 | 2,150 | | | | | |
| 6 | Compensation not included above, to disqualified | | İ | | | | | | | | |
| | persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | o | | | | | | | | |
| 7 | Other salaries and wages | | 156,262 | 149,967 | 6,059 | 236 | | | | | |
| 8 | Pension plan accruals and contributions (include | | 150,202 | 149,501 | 0,009 | 230 | | | | | |
| U | section 401(k) and 403(b) employer contributions) | | 0 | | | | | | | | |
| 9 | Other employee benefits | | 11,543 | 5,951 | 5,592 | _ | | | | | |
| 10 | Payroll taxes | | 20,868 | 19,483 | 1,183 | 202 | | | | | |
| 11 | Fees for services (non-employees) | | | | 1,100 | | | | | | |
| а | Management | | O | | | | | | | | |
| b | Legal | | 0 | | | | | | | | |
| С | Accounting | | 4,500 | 0 | 4,500 | C | | | | | |
| d | Lobbying | | 21,525 | 21,525 | 0 | c | | | | | |
| е | Professional fundraising services See Part IV, line 17 | | 0 | Carried Actions | | | | | | | |
| f | Investment management fees | | 0 | | | | | | | | |
| g | Other (If line 11g amount exceeds 10% of line 25, colu | mn | | | | | | | | | |
| | (A) amount, list line 11g expenses on Schedule O) | | 30,031 | 30,031 | 0 | <u> </u> | | | | | |
| 12 | Advertising and promotion | | 0 | | | | | | | | |
| 13 | Office expenses | | 6,029 | 4,716 | | C | | | | | |
| 14 | Information technology | | 7,830 | 416 | 7,414 | | | | | | |
| 15 | Royalties | | 0 | | | | | | | | |
| 16 | Occupancy | | 12,521 | 10,935 | 1,586 | C | | | | | |
| 17 | Travel | | 0 | - | | | | | | | |
| 18 | Payments of travel or entertainment expenses | | | | | | | | | | |
| 19 | for any federal, state, or local public officials | | 07.755 | 27.225 | | | | | | | |
| 20 | Conferences, conventions, and meetings Interest | | 27,755 0 | 27,665 | 90 | C | | | | | |
| 21 | Payments to affiliates | | 0 | | | | | | | | |
| 22 | Depreciation, depletion, and amortization | | 2,720 | 2,539 | 155 | 26 | | | | | |
| 23 | Insurance | | 2,808 | 2,339 | 2,808 | 26 | | | | | |
| 24 | Other expenses Itemize expenses not covered | | | Ball I STORY OF STREET | 2,000 | (1) 国际通过工作 公司的 | | | | | |
| | above (List miscellaneous expenses in line 24e If | | | | | | | | | | |
| | line 24e amount exceeds 10% of line 25, column | | | | | | | | | | |
| | (A) amount, list line 24e expenses on Schedule O |) | | | | | | | | | |
| а | Travel and entertainment | | 15,071 | 14,591 | 472 | 8 | | | | | |
| b | Bank charges and payroll fees | | 4,138 | 0 | 4,138 | 0 | | | | | |
| С | Public education | | 10,945 | 10,945 | 0 | 0 | | | | | |
| d | Dues and subscriptions | | 1,911 | 1,647 | 264 | 0 | | | | | |
| е | All other expenses | | 0 | | | | | | | | |
| 25 | Total functional expenses. Add lines 1 through 24 | 4e | 426,790 | 380,669 | 43,499 | 2,622 | | | | | |
| 26 | Joint costs. Complete this line only if the | | | · | | | | | | | |
| | organization reported in column (B) joint costs | | | | | | | | | | |
| | from a combined educational campaign and | | İ | | | | | | | | |
| | fundraising solicitation Check here | ł | | | | | | | | | |
| | following SOP 98-2 (ASC 958-720) | | | | | i | | | | | |

| <u>Mit</u> | 11年大韓 | Balance Sheet | | | | | |
|-----------------------------|-------|---|---------------------------------------|--|-------------|--|--|
| | | Check if Schedule O contains a response to any | question in this Part X | | | | |
| | | | | (A) | | (B) | |
| | | | | Beginning of year | | End of year | |
| | 1 | Cash—non-interest-bearing | | | 1 | | |
| | 2 | Savings and temporary cash investments | | 138,555 | 2 | 172,220 | |
| | 3 | Pledges and grants receivable, net | | 0 | 3 | 0 | |
| | 4 | Accounts receivable, net | | 51,422 | 4 | 5,100 | |
| | 5 | Loans and other receivables from current and forme | er officers, directors, | | 斯斯 斯 | から おき 計画なる 英雄語 | |
| | | trustees, key employees, and highest compensated | | | | | |
| | | Complete Part II of Schedule L | • | | 5 | | |
| | 6 | Loans and other receivables from other disqualified persons (a | as defined under section | | 的是可 | | |
| | - | 4958(f)(1)), persons described in section 4958(c)(3)(B), and co | | | | | |
| | | sponsoring organizations of section 501(c)(9) voluntary emplo | | | 1 | | |
| ts | | organizations (see instructions) Complete Part II of Schedule | | | 6 | AND THE PROPERTY OF THE PROPER | |
| Assets | 7 | Notes and loans receivable, net | | 0 | 7 | 0 | |
| Ą | 8 | Inventories for sale or use | | | 8 | | |
| | 9 | Prepaid expenses and deferred charges | | 6,391 | 9 | 6,290 | |
| | 10a | Land, buildings, and equipment cost or | | THE STATE OF THE S | 100 | | |
| | | other basis Complete Part VI of Schedule D 10 | 10,856 | | | | |
| | ь | Less accumulated depreciation 10 | | The control of the co | 10c | 1,400 | |
| | 11 | Investments—publicly traded securities | , <u>-</u> | 0 | | 0 | |
| | 12 | Investments—other securities See Part IV, line 11 | | 0 | 12 | 0 | |
| | 13 | Investments—program-related See Part IV, line 11 | | 0 | 13 | 0 | |
| | 14 | Intangible assets | | 0 | 14 | 15,883 | |
| | 15 | Other assets See Part IV, line 11 | | 1,043 | 15 | 1,043 | |
| | 16 | Total assets. Add lines 1 through 15 (must equal lir | ne 34) | 200,087 | 16 | 201,936 | |
| | 17 | Accounts payable and accrued expenses | | 13,718 | - | 3,704 | |
| | 18 | Grants payable | | | 18 | <u> </u> | |
| | 19 | Deferred revenue | | | 19 | | |
| | 20 | Tax-exempt bond liabilities | | - | 20 | · · · · · · · · · · · · · · · · · · · | |
| | 21 | Escrow or custodial account liability Complete Part | IV of Schedule D | | 21 | | |
| Š | 22 | Loans and other payables to current and former offi | | GENERAL TOPPE | | | |
| ij | | trustees, key employees, highest compensated em | | | | | |
| Liabilities | | disqualified persons Complete Part II of Schedule I | • | A TO THE TOTAL STREET AND THE STREET | 22 | | |
| :≌ | 23 | Secured mortgages and notes payable to unrelated | | 0 | | 0 | |
| | 24 | Unsecured notes and loans payable to unrelated th | · · · · · · · · · · · · · · · · · · · | 0 | | 0 | |
| | 25 | Other liabilities (including federal income tax, payab | | | | | |
| | | parties, and other liabilities not included on lines 17 | | 1 | | | |
| | | Part X of Schedule D | , , | 0 | 25 | 0 | |
| | 26 | Total liabilities. Add lines 17 through 25 | | 13,718 | 26 | 3,704 | |
| | | Organizations that follow SFAS 117 (ASC 958), c | heck here ► X and | DEPENDENT METERS | | THE STATE OF THE STATE OF | |
| ės | 1 | complete lines 27 through 29, and lines 33 and 3 | | | | | |
| 2 | 27 | Unrestricted net assets | · •• | FF 700 | | | |
| ale | 28 | Temporarily restricted net assets | | 55,793 | 27 | 81,254 | |
| В | 29 | Permanently restricted net assets | | 130,576 | | 116,978 | |
| E | 23 | • | \Box | BAZDES ATOMBRE ERES. 1-7 | 29 | 点分型解码 有學 哈斯斯斯 温 罗克电路 | |
| <u>г</u> | | Organizations that do not follow SFAS 117 (ASC958), che | ck here ► and | | | | |
| Net Assets or Fund Balances | | complete lines 30 through 34. | | | | | |
| set | 30 | Capital stock or trust principal, or current funds | | | 30 | | |
| As | 31 | Paid-in or capital surplus, or land, building, or equip | | | 31 | | |
| et | 32 | Retained earnings, endowment, accumulated incon | ne, or other funds | | 32 | | |
| Z. | 33 | Total net assets or fund balances | | 186,369 | 33 | 198,232 | |
| | 34 | Total liabilities and net assets/fund balance's | | 200,087 | 34 | 201,936 | |

As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

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

the Single Audit Act and OMB Circular A-133?

Form **990** (2012)

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.

4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2012

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

COLORADO COALITION OF LAND TRUSTS

Employer identification number 84-1355809

| Pa | | Reason | for Public Ch | arity Status | (All org | anization | ns must o | complete | this par | t) See ir | struction | s_ | | |
|------|---|--|---|---|------------------------------------|---------------|---|------------|--|-------------------------|--|----------|------------|---------|
| The | organ | ization is not a | a private founda | tion because | ıtıs (For | lines 1 thr | ough 11, c | check only | y one box |) | | | | |
| 1 | | A church, cor | nvention of churc | ches, or assoc | ciation of | churches (| described | ın sectio | n 170(b)(ʻ | 1)(A)(i). | | | | |
| 2 | | A school desc | cribed in sectior | n 170(b)(1)(A) |) (ii) . (Atta | ch Schedu | ıle E) | | | | | | | |
| 3 | | A hospital or | a cooperative ho | ospital service | organiza | ation descr | ribed in s e | ection 170 |)(b)(1)(A) | (iii). | | | | |
| 4 | | | search organizat me, city, and sta | | in conjun | ction with | a hospital | described | d in section | on 170(b)(| 1)(A)(iii). | Enter t | he | · |
| 5 | | | ion operated for 70(b)(1)(A)(iv). (| | | or univer | sity owned | d or opera | ited by a g | governmei | ntal unit de | escribe | d | |
| 6 | | A federal, sta | ite, or local gove | rnment or go | vernment | al unit des | cribed in | section 1 | 70(b)(1)(A | ۸)(۷). | | | | |
| 7 | X | | ion that normally section 170(b)(| | | | support f | rom a gov | rernmenta | il unit or fr | om the ge | neral p | ublic | |
| 8 | | | trust described | | 1 | | nplete Pai | t II) | | | | | | |
| 9 | | An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) | | | | | | | | | | | | |
| 10 | | An organizat | ion organized ar | nd operated e | i xclusively | to test for | r public sa | fety See | section 5 | 609(a)(4). | | | | |
| f | 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 | | | | | | | | | | | | | |
| | | | on who directly | | | | | | ersons de | scribed in | (II) | | Yes | No |
| | | | ı) below, the gov | | | | ganization | ? | | | | 11g(i) | | |
| | | | lly member of a position of a position of a position of the controlled entity | | | | w abous 2 | | | | | 11g(II) | | |
| h | | | following informa | | | | | | | | | 11g(III) | | |
| | • | e of supported anization | (n) EIN | (III) Type of or (described on above or IRC (see instruc | ganization lines 1–9 section | (iv) Is the c | organization sted in your document? | the orgai | ou notify nization in of your port? | organizat (i) organi | s the ion in col zed in the S ? | (vii) Am | ount of mo | onetary |
| | | <u> </u> | | | <u> </u> | Yes | No | Yes | No | Yes | No | <u></u> | | |
| (A) | | | | | } | | | } | | | | | | |
| (B) | | | | | <u> </u> | - | - | | | + | | | | |
| | | | | ļ | 1 | | ļ <u>.</u> | | | | | | | |
| (C) | | | | | | | | | | | <u> </u> | | | |
| (D) | | | | | | | | | | | | | | |
| (E) | | | | | | | | | | | | | | |
| Tota | | | | | | | | | | | 関係が高い | | | 0 |

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)

| | on A. Public Support | | 1 | 4 \ 0000 | () 0040 | (1) 0044 | , <u>, , , , , , , , , , , , , , , , , , </u> | (D. T. t. t. |
|----------|--|----------|-----------------|----------------------------|---------------------------------------|--|---|-----------------|
| Caler | dar year (or fiscal year beginning in) | L | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") | | 225,742 | 196,989 | 201,589 | 352,511 | 404,042 | 1,380,873 |
| 2 | Tax revenues levied for the organization's | | | | | | | |
| _ | benefit and either paid to or expended on | 1 | 1 | | | | | |
| | its behalf | 1 | |] | | | | 0 |
| 3 | The value of services or facilities | Г | | | | | | |
| | furnished by a governmental unit to the | 1 | | 1 | | | | |
| | organization without charge | L | | | | | | 0 |
| 4 | Total. Add lines 1 through 3 | | 225,742 | 196,989 | 201,589 | 352,511 | 404,042 | 1,380,873 |
| 5 | The portion of total contributions by each | | | | | | | |
| | person (other than a governmental unit | 17 | | | | | | |
| | or publicly supported organization) | 1 | | | | | | |
| | included on line 1 that exceeds 2% | 3 | | | | | NAME OF THE | |
| | of the amount shown on line 11, | | | | PAN WATER | | | |
| | column (f) | 1 | | 经验 | | · 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. | 2.4、2.00% 20.4.2 | 0 |
| 6 | Public support. Subtract line 5 from line 4 | 7.3 | 是指性的性質 | | The second second | | | 1,380,873 |
| | ion B. Total Support | | | | · · · · · · · · · · · · · · · · · · · | | т . :: .: .: . : т | |
| Caler | ndar year (or fiscal year beginning in) | - | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
| 7 | Amounts from line 4 | <u> </u> | 225,742 | 196,989 | 201,589 | 352,511 | 404,042 | 1,380,873 |
| 8 | Gross income from interest, dividends, | | | | | | | |
| | payments received on securities loans, | | | | | , | ľ | |
| | rents, royalties and income from similar | | | | | | | |
| _ | sources | | 1,606 | 1,672 | 914 | 268 | 263 | 4,723 |
| 9 | Net income from unrelated business | | | | | | | |
| | activities, whether or not the business is | | | | | | | |
| | regularly carried on | \perp | | | | | | 0 |
| 10 | Other income Do not include gain or | | | | | | | |
| | loss from the sale of capital assets | | | | | | | |
| 44 | (Explain in Part IV) | K. 1 | E TOURNAMA. A. | Notification of the second | Telephone to be as a | 29 . 3 5. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. | | 0 |
| 11 | Total support. Add lines 7 through 10 | | | A CANADAMA | 148多两种激素。 | · 通用性管理分配 | 度是有自動性的 | 1,385,596 |
| 12 13 | Gross receipts from related activities, etc. (s | | | t 00000d thud | £0 | 4 | 12 | 179,468 |
| 13 | First five years. If the Form 990 is for the or organization, check this box and stop here | ga | nizations ins | t, secona, thira, | , lourth, or fiπn | tax year as a s | ection 501(c)(3) | |
| C = -4 | | 4 D | <u> </u> | | | • | | ▶ |
| | ion C. Computation of Public Suppor | | | | (6) | | | |
| 14 15 | Public support percentage for 2012 (line 6, of Public support percentage from 2011 Sched | | | | iumn (f)) | | 14 | 99 66% |
| 16a | 33 1/3% support test—2012. If the organization | | | | no 12 and line | 14 10 22 1/20/ | 15 | 99 35% |
| 100 | and stop here . The organization qualifies as | : a | nublicly supp | orted organizat | ine io, and line | 14 15 33 1/3% | or more, check | |
| b | 33 1/3% support test—2011. If the organiza | | | | | tline 15 ie 33 1 | /3% or more of | ► X |
| - | box and stop here. The organization qualifie | es a | as a publicly s | supported orgai | nization | | | ► □ |
| 17a | 10%-facts-and-circumstances test—2012 | . If f | the organizat | ion did not ched | ck a box on line | 13, 16a, or 16 | b, and line 14 | |
| | is 10% or more, and if the organization mee | ts t | he "facts-and | -circumstances | " test, check th | is box and stop | here. Explain i | n |
| | Part IV how the organization meets the "fact | s-a | ind-circumsta | inces" test. The | organization q | ualifies as a pu | blicly supported | |
| | organization | ŀ | | | | | | ▶ 📙 |
| b | 10%-facts-and-circumstances test—2011. | If t | he organizat | on did not chec | k a box on line | 13, 16a, 16b, o | or 17a, and line | |
| | 15 is 10% or more, and if the organization m | ee | ts the "facts-a | and-circumstan | ces" test, check | this box and s | top here. Expl | ain in |
| | Part IV how the organization meets the "fact | s-a | nd-circumsta | inces" test. The | organization qu | ualifies as a pu | blicly | _ |
| | supported organization | | | | | | | ▶ ∐ |
| 18 | Private foundation. If the organization did r | ot | check a box | on line 13, 16a, | 16b, 17a, or 17 | 7b, check this b | ox and see | |
| | instructions | | | | | | | ▶ 🗌 |
| | · · · · · · · · · · · · · · · · · · · | | | | | 90 | hedule A (Form 990 | or 990-E7\ 2012 |

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

| 0 | in A Dublic Cumpart | | 1 | | 1 | | - · · · · · · · · · · · · · · · · · · · | |
|------|--|---------------|------------------|--------------------|---|--|--|-----------|
| | cion A. Public Support | T | (a) 2009 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
| Cale | ndar year (or fiscal year beginning in) | \vdash | (a) 2008 | (b) 2009 | (6) 2010 | (u) 2011 | (6) 2012 | (I) Iotai |
| 1 | Gifts, grants, contributions, and membership fees | l | | | | | | |
| | received (Do not include any "unusual grants") | L | | | | | | 0 |
| 2 | Gross receipts from admissions, merchandise | 1 | | | | | | |
| | sold or services performed, or facilities furnished | | | | | | | |
| | in any activity that is related to the | | | | | | | |
| | organization's tax-exempt purpose | | | | | | | 0 |
| 3 | Gross receipts from activities that are not an | | | | | | | |
| | unrelated trade or business under section 513 | | | | | | | 0 |
| 4 | Tax revenues levied for the organization's | | | | | ' | | |
| | benefit and either paid to or expended on | | | | | | | |
| | its behalf | Ц | | | | | | 0 |
| 5 | The value of services or facilities | П | | | | | | |
| | furnished by a governmental unit to the | | | | | | | |
| | organization without charge | | | | | **** | <u> </u> | 0 |
| 6 | Total. Add lines 1 through 5 | Ц | 0 | 0 | 0 | 0 | 0 | 0 |
| 7a | Amounts included on lines 1, 2, and 3 | | | | | | | |
| | received from disqualified persons | | | | | | | 0 |
| þ | Amounts included on lines 2 and 3 received | | | |] | , | } | |
| | from other than disqualified persons that | 11 | | | | | | |
| | exceed the greater of \$5,000 or 1% of the | | | | | | i 1 | |
| | amount on line 13 for the year | H | | | | | | 0 |
| С | Add lines 7a and 7b | 93 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8 | Public support (Subtract line 7c from | 13 | NEW YORK | Kan TOWN | | | | _ |
| | line 6) | 1:0 | 学是"自然"等。 | 1. "解放了可以有比较 | 一品的數學就可以完全 | 2.17年中代的 | A 5.11 100 100 100 100 100 100 100 100 100 | 0 |
| | tion B. Total Support | _{ | | | | r | | |
| Cale | ndar year (or fiscal year beginning in) | Ц | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
| 9 | Amounts from line 6 | П | 0 | l o | 0 | 0 | l ol | 0 |
| 10a | | П | | | | —————————————————————————————————————— | | <u>_</u> |
| | payments received on securities loans, | | | | | | | |
| | rents, royalties and income from similar sources | | | | | | | 0 |
| b | Unrelated business taxable income (less | П | | | | - 1111 | | |
| | section 511 taxes) from businesses | 1 | | | | | | |
| | acquired after June 30, 1975 | | | | |] | | 0 |
| С | Add lines 10a and 10b | П | 0 | 0 | 0 | 0 | 0 | 0 |
| 11 | Net income from unrelated business | П | | | | | | |
| | activities not included in line 10b, whether | i | | ľ | | | | |
| | or not the business is regularly carried on | | |] | ļ | | ļ | 0 |
| 12 | Other income Do not include gain or | П | | | | | | |
| | loss from the sale of capital assets | | | 1 | | | | |
| | (Explain in Part IV) | Ц | | <u> </u> | | | | 0 |
| 13 | Total support. (Add lines 9, 10c, 11, | \parallel | | 1 | | | | |
| | and 12) | Ц | 0 | 0 | 0 | 0 | 0 | 0 |
| 14 | First five years. If the Form 990 is for the organiz | ati | on's first, seco | nd, third, fourth, | or fifth tax year a | s a section 501(| c)(3) | |
| | organization, check this box and stop here | 1 | | | | | | ▶ 🗀 |
| Sec | tion C. Computation of Public Support | P | ercentage | | | - | | |
| 15 | Public support percentage for 2012 (line 8, column | | | e 13, column (f)) | | | 15 | 0 00% |
| 16 | Public support percentage from 2011 Schedule A, | 1 | | | | | 16 | 0 00% |
| | tion D. Computation of Investment Inco | | | age | | | <u> </u> | |
| 17 | Investment income percentage for 2012 (line 10c, | $\overline{}$ | | | ımn (f)) | | 17 | 0 00% |
| 18 | Investment income percentage from 2011 Schedul | - 1 | | • | • | | 18 | 0 00% |
| 19a | 33 1/3% support tests—2012. If the organization | | | | and line 15 is me | ore than 33 1/3% | | |
| _ | not more than 33 1/3%, check this box and stop h | - 1 | | | | | • | ▶ □ |
| b | | | | | | | | |
| | line 18 is not more than 33 1/3%, check this box ai | - 1 | | | | | | ▶☐ |
| 20 | Private foundation. If the organization did not che | | | | | | • | |
| | | - 1' | | ., | ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ | | ·· - | - L I |

| Schedule A (Form 9 | 90 or 990-EZ) 2012 | COLORADO CO | ALITION OF | LAND TRUS | STS | | 84-1355809 | Page 4 |
|--------------------|--------------------|-----------------|----------------|---------------|--------------------|---|------------------|--------|
| Part IV | Supplemental | Information Co | mnlete this | s nart to pro | vide the explana | tions required | by Part II line | 10 |
| | Datemental | | ATTIPICTO THE | | lata this explains | and and different | wy curen, mic | . 10, |
| | | or 1/b; and Par | τ III, IIne 12 | Also comp | lete this part for | any additional | information. (| See |
| | instructions) | | | | | | | |
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

 Complete if the organization is described below.
 Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes," to Form 990, Part N, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

| • <u>S</u> | Section 501(c)(4), (5), or (6) or | rganizations Complete Part III | | | |
|------------|-----------------------------------|---|-----------------------|--|--|
| Nam | e of organization | | | Employe | er identification number |
| COL | ORADO COALITION OF I | _AND TRUSTS | | | 84-1355809 |
| Pa | Complete if t | he organization is exempt un | der section 501 | (c) or is a section 527 | organization. |
| 1 | Provide a description of the | ne organization's direct and indirect | political campaign | activities in Part IV | |
| 2 | Political expenditures | | | ▶ \$ | |
| 3 | Volunteer hours | | | | |
| (C) | | | | | |
| | | he organization is exempt un | | | |
| 1 | | excise tax incurred by the organizati | | | |
| 2 | • | excise tax incurred by organization i | - | | <u></u> |
| 3 | If the organization incurre | ed a section 4955 tax, did it file Form | n 4720 for this year | 7 | Yes No |
| 4a | Was a correction made? | | | | Yes No |
| | If "Yes," describe in Part I | | | | |
| Pa | Complete if t | he organization is exempt un | der section 501 | (c), except section 501 | (c)(3). |
| 1 | Enter the amount directly | expended by the filing organization | for section 527 exe | empt function | |
| | activities | | | ▶ \$ | |
| 2 | Enter the amount of the fi | iling organization's funds contributed | d to other organizat | ions | |
| | for section 527 exempt fu | inction activities | | ▶ \$ | |
| 3 | Total exempt function exp | penditures Add lines 1 and 2 Enter | here and on Form | 1120-POL, | |
| | line 17b | | | ▶ \$ | 0 |
| 4 | Did the filing organization | file Form 1120-POL for this year? | | | Yes No |
| 5 | Enter the names, address | ses and employer identification num | ber (EIN) of all sec | tion 527 political organization | ons to which the filing |
| | organization made payme | ents. For each organization listed, e | nter the amount pa | id from the filing organization | on's funds Also enter |
| | the amount of political co | ntributions received that were prom | ptly and directly del | ivered to a separate political | al organization, such |
| | as a separate segregated | fund or a political action committee | (PAC) If additiona | il space is needed, provide | Information in Part IV |
| | (a) Name | (b) Address | (c) EIN | (d) Amount paid from | (e) Amount of political |
| | | | | filing organization's funds if none, enter -0- | contributions received and promptly and directly |
| | | | | randa ir none, enter -o- | delivered to a separate |
| | | | | | political organization If none, enter -0- |
| | | | | | |
| (1) | | | _ | | |
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| (2) | | | = | | |
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| (3) | | | | | |
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| (4) | | | - | | |
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| (5) | | | | | |
| (6) | | | _ | | |
| (0) | | | i | 1 | |

Page 2

| JULI | 34210 G (1 51111 100 G) TTT 127 127 1 | | | | | | Fage 2 |
|--------|--|----------------------|--------------------------|-----------------------|--|----------------------------------|--------------------------------|
| P | complete if the organize under section 501(h)). | ation is | exempt | under section 50 | 01(c)(3) and filed | Form 5768 (ele | ction |
| Δ | Check ▶ If the filing organizatio | n belone | s to an a | ffiliated group (ar | nd list in Part IV e | ach affiliated grou | up member's |
| ^ | name, address, EIN, e | | | | | | • |
| В | Check ▶ if the filing organizatio | n check | ed box A | and "limited conti | rol" provisions ap | ylq | |
| | Limits on t | obbying | Expendit | ures | <u> </u> | (a) Filing organization's totals | (b) Affiliated group totals |
| 1a | Total lobbying expenditures to influence | public o | pinion (gra | ss roots lobbying) | | 0 | 0 |
| b | Total lobbying expenditures to influence | | | | | 21,525 | 0 |
| c | Total lobbying expenditures (add lines 1 | | | , 3, | | 21,525 | 0 |
| d | Other exempt purpose expenditures | | 1 | | | 428,320 | 0 |
| e | Total exempt purpose expenditures (ad- | d lines 1d | and 1d) | | | 449,845 | 0 |
| f | Lobbying nontaxable amount Enter the | | | llowing table in bot | h | | |
| | columns | | _ | | · · · · · · · · · · · · · · · · · · · | 89,969 | 0 |
| [| If the amount on line 1e, column (a) or (b |) is: T | he lobbyir | g nontaxable amou | nt is: | | |
| | Not over \$500,000 | | 0% of the a | mount on line 1e | | | |
| | Over \$500,000 but not over \$1,000,000 | over \$500,000 | | | | | |
| | Over \$1,000,000 but not over \$1,500,000 | over \$1,000,000 | | | | | |
| | Over \$1,500,000 but not over \$17,000,000 | | | | | | |
| | Over \$17,000,000 | The second second | | | | | |
| g | Grassroots nontaxable amount (enter 2 | 5% of lin | ė 1f) | | | 22,492 | 0 |
| h | Subtract line 1g from line 1a If zero or | | 1 | | | 0 | 0 |
| i | Subtract line 1f from line 1c If zero or le | | | | | 0 | 0 |
| j | If there is an amount other than zero or section 4911 tax for this year? | either lir | ne 1h or lin | e 1ı, dıd the organız | zation file Form 472 | 0 reporting | Yes No |
| | | nat made elow. Se | a section e the instr | uctions for lines 2 | o not have to comp a through 2f on pa | | |
| | Lol | bying E | xpenditur | es During 4-Year A | veraging Period | | - |
| | Calendar year (or fiscal year beginning in) | (a) | 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) Total |
| 2a | Lobbying nontaxable amount | | 57,477 | 70,916 | 78,150 | 89,969 | 296,512 |
| _b | Lobbying ceiling amount (150% of line 2a, column(e)) | 植物 | | | | | 444,768 |
| С | Total lobbying expenditures | | 16,250 | 15,000 | 15,000 | 21,525 | 67,775 |
| d — | Grassroots nontaxable amount | E) | 14,369 | 17,729 | | 22,492 | 74,128 |
| _е | Grassroots ceiling amount e (150% of line 2d, column (e)) | | | | | | 111,192 |
| f | Grassroots lobbying expenditures | | 0 | 0 | 0 | 0 | 0 |

Schedule C (Form 990 or 990-EZ) 2012

| Par | til B | Complete if the organization is (election under section 501(h)). | exempt under section 501(c)(3) and has NOT | r filed | l For | m 5768 | 3 | |
|------------------------|---|---|---|---------------|--|-----------|-------|--------------|
| For a | ach "Ve | | below, provide in Part IV a detailed description | (6 | a) | | (b) | |
| | | ng activity | polow, provide III i are iv a detailed decempaen | Yes | No | A | mount | : |
| 1 | legislati referenc | on, including any attempt to influence pu dum, through the use of | pt to influence foreign, national, state or local blic opinion on a legislative matter or | | | | | |
| a b c | | | n in expenses reported on lines 1c through 1i)? | | | | | |
| d e f | Publication Grants | s to members, legislators, or the public? cions, or published or broadcast statements to other organizations for lobbying purpo | ses? | | | | | |
| g h i | Rallies, | ontact with legislators, their staffs, gover demonstrations, seminars, conventions, ctivities? | nment officials, or a legislative body? speeches, lectures, or any similar means? | | | | | |
| j 2a b c d | Did the If "Yes,' If "Yes,' If the fil | enter the amount of any tax incurred un enter the amount of any tax incurred by ng organization incurred a section 4912 | organization managers under section 4912 tax, did it file Form 4720 for this year? | in the second | A STATE OF THE STA | | | |
| Par | t III-A | Complete if the organization is 501(c)(6). | exempt under section 501(c)(4), section 501 | (c)(5) | , or s | ection | | , |
| 1 2 3 | Did the | ubstantially all (90% or more) dues receivorganization make only in-house lobbying | | | | 2 | Yes | No |
| | | Complete if the organization is | exempt under section 501(c)(4), section 501 Part III-A, lines 1 and 2, are answered "No," | | | ection | | 3, is |
| 1 2 a | Section | l expenses for which the section 527(| tical expenditures (do not include amounts of | | 1 2a | 110000000 | | |
| b c | | ver from last year | | | 2b 2c | | | 0 |
| 3 4 | If notice excess | es were sent and the amount on line 2c e | 1)(A) notices of nondeductible section 162(e) dues exceeds the amount on line 3, what portion of the er to the reasonable estimate of nondeductible | | 3 | | | |
| 5 | WITH THE PARTY OF | amount of lobbying and political expend | ditures (see instructions) | | 5 | | | 0 |
| | plete this | | d for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Pa ete this part for any additional information | rt II-A | (affilia | ted grou | Tb | |
| | | | | | | | | - - |
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84-1355809

COLORADO COALITION OF LAND TRUSTS

| | rm 990 or 990-EZ) 2012 | Page 4 |
|-----------------|----------------------------------|--------------|
| Part IV | Supplemental Information (contin | nued) |
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SCHEDULE D (Form 990)

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.

Inspection

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. ▶ See separate instructions.

| Name o | f the organization | | Employer identification number | | |
|--------|---|--|--|--|--|
| COLC | RADO COALITION OF LAND TRUSTS | | 84-1355809 | | |
| Part | Organizations Maintaining Dono | r Advised Funds or Other Similar Fu | nds or Accounts. Complete if | | |
| - | the organization answered "Yes" to | Form 990, Part IV, line 6 | | | |
| | | (a) Donor advised funds | (b) Funds and other accounts | | |
| 1 | Total number at end of year | | | | |
| 2 | Aggregate contributions to (during year) | | | | |
| 3 | Aggregate grants from (during year) | | | | |
| 4 | Aggregate value at end of year | | | | |
| 5 | Did the organization inform all donors and dor | | donor advised | | |
| | funds are the organization's property, subject | | Yes No | | |
| 6 | Did the organization inform all grantees, dono | rs, and donor advisors in writing that grant ful | nds can be | | |
| | used only for charitable purposes and not for | | | | |
| | purpose conferring impermissible private beni | ęfit? | Yes No | | |
| Part | Conservation Easements. Comp | lete if the organization answered "Yes" | to Form 990, Part IV, line 7 | | |
| | Purpose(s) of conservation easements held b | | | | |
| 1 | Preservation of land for public use (e.g., recre | | of an historically important land area | | |
| | | · = | • | | |
| | Protection of natural habitat | Preservation o | of a certified historic structure | | |
| | Preservation of open space | | | | |
| 2 | Complete lines 2a through 2d if the organizat | on 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 | | |
| а | Total number of conservation easements | | 2a | | |
| b | Total acreage restricted by conservation ease | ments | 2b | | |
| С | Number of conservation easements on a cert | • | 2c | | |
| d | Number of conservation easements included | | | | |
| | historic structure listed in the National Registe | | 2d | | |
| 3 | Number of conservation easements modified | transferred, released, extinguished, or termi | nated by the organization | | |
| | during the tax year | | | | |
| 4 | Number of states where property subject to c | | | | |
| 5 | Does the organization have a written policy re | | nandling of | | |
| | violations, and enforcement of the conservati | | Yes No | | |
| 6 | Staff and volunteer hours devoted to monitori | ng, inspecting, and enforcing conservation ea | asements during the year | | |
| _ | <u> </u> | | | | |
| 7 | Amount of expenses incurred in monitoring, i | nspecting, and enforcing conservation easem | ents during the year | | |
| _ | \$ | | | | |
| 8 | Does each conservation easement reported | on line 2(d) above satisfy the requirements of | | | |
| _ | 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? | | ☐ Yes ☐ No | | |
| 9 | In Part XIII, describe how the organization re | | · | | |
| | balance sheet, and include, if applicable, the | | icial statements that describes | | |
| | the organization's accounting for conservation | | | | |
| Par | _ | ns of Art, Historical Treasures, or Other Sir | milar Assets. | | |
| | Complete if the organization answered | | | | |
| 1a | If the organization elected, as permitted unde | • | | | |
| | works of art, historical treasures, or other sim | · · · · · · · · · · · · · · · · · · · | | | |
| | of public service, provide, in Part XIII, the tex | | | | |
| b | If the organization elected, as permitted unde | | | | |
| | works of art, historical treasures, or other sim | | n, or research in furtherance | | |
| | of public service, provide the following amou | | | | |
| | (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 | | 5 , , | | |
| | following amounts required to be reported un | , , | ms | | |
| а | Revenues included in Form 990, Part VIII, lin | e 1 | ▶ \$ | | |
| b | Assets included in Form 990, Part X | | ▶ \$ | | |

| Part | Organizations Maintaining Collect | | | | | s (cont | inued, | <u>) </u> |
|-------|---|-------------------------|-------------------------|--------------|---------------------|--------------|------------|--|
| 3 | Using the organization's acquisition, accession | and other records, o | check any of the follow | ving that ar | e a significant | | | |
| | use of its collection items (check all that apply) | | | | | | | |
| а | Public exhibition | d 🗌 | Loan or exchange | programs | | | | |
| b | Scholarly research | е 🗍 | Other | | | | | |
| | Preservation for future generations | | | | | - | | |
| C · | Provide a description of the organization's colle | detions and explain he | ow they further the or | nanization's | s evemnt nurno | se in | | |
| 4 | Part XIII | ctions and explain no | ow they further the ory | gariizatiorr | a exempt purpo | 3C III | | |
| 5 | During the year, did the organization solicit or re | | | | | | | |
| | assets to be sold to raise funds rather than to be | e maintained as part | of the organization's | collection? | | Ye | s 🔲 | No |
| Part | V Escrow and Custodial Arrangement | ents. Complete if t | he organization an | swered "Y | es" to Form 9 | 90, Pa | rt | |
| | IV, line 9, or reported an amount on | Form 990, Part X, | line 21 | | | | | |
| 1a | Is the organization an agent, trustee, custodian | or other intermedian | y for contributions or | other asset | s not | | | |
| | included on Form 990, Part X? | | | | | Ye | s | No |
| b | If "Yes," explain the arrangement in Part XIII ar | nd complete the follov | ving table | | , | | | |
| | | | | | A | mount | | |
| С | Beginning balance | | | 1c | | | | 0 |
| d | Additions during the year | | | 1d | | | | |
| е | Distributions during the year | | | 1e_ | | | | |
| f | Ending balance | | | 1f | | | | 0 |
| 2a | Did the organization include an amount on For | m 990, Part X, line 2° | 17 | | | Ye | s X | No |
| b | If "Yes," explain the arrangement in Part XIII C | heck here if the expl | anation has been pro | vided in Pa | rt XIII | | | |
| Part | Endowment Funds. Complete if the | e organization ans | swered "Yes" to For | rm 990, P | art IV, line 10 | | | |
| | | rrent year (b) Pri | | | I) Three years back | (e) Fo | ur years | back |
| 1a | Beginning of year balance | 0 | 0 | | | | | |
| b | Contributions | | | | | | | |
| С | Net investment earnings, gains, | | | | | | | |
| | and losses | | | | | | | |
| d | Grants or scholarships | | | | | | | |
| е | Other expenditures for facilities | | 1 | | | | | |
| | and programs | | | | | | | |
| f | Administrative expenses | <u> </u> | | | | | | |
| g | End of year balance | 0 | 0] | 0 | (|) <u> </u> | | 0 |
| 2 | Provide the estimated percentage of the currer | _ · | line 1g, column (a)) h | eld as | | | | |
| a | Board designated or quasi-endowment | <u>%</u> . | | | | | | |
| b | Permanent endowment | <u>%</u> | | | | | | |
| С | Temporarily restricted endowment The percentages in lines 2s, 2h, and 2s should | % | | | | | | |
| За | The percentages in lines 2a, 2b, and 2c should Are there endowment funds not in the possess | | on that are held and a | dministere | d for the | | | |
| Ja | organization by | | on that are nely and a | ummateret | J IOI THE | ſ | Yes | No |
| | (i) unrelated organizations | | | | | 3a(i) | 163 | 110 |
| | (ii) related organizations | | | | | 3a(ii) | | |
| b | If "Yes" to 3a(ii), are the related organizations | listed as required on | Schedule R? | | | 3b | | |
| 4 | Describe in Part XIII the intended uses of the o | | | | | | | |
| Part | | | | | | | | |
| | Description of property | (a) Cost or other basis | (b) Cost or other | (c) Ac | ccumulated | (d) R | ook value | |
| | | (investment) | basis (other) | | preciation | (-, -, | 2011 10100 | |
| 1a | Land | 0 | | 0 19.8840 | 950 | | | |
| b | Buildings | 0 | | 0 | 0 | | | 0 |
| С | Leasehold improvements | 0 | 3,86 | 1 | 3,861 | | | 0 |
| ď | Equipment | 0 | 6,99 | 5 | 5,595 | | | 1,400 |
| е | Other | 0 | <u> </u> | 0 | 0 | | | 0 |
| Total | . Add lines 1a through 1e (Column (d) must equ | ual Form 990, Part X, | column (B), line 10(c |)) | b | | | 1,400 |

| Schedite D (Form 990) 2012 COLONADO COALTITOR | | | 3 1000000 130 |
|---|--|---|---|
| Part VIII Investments—Other Securitie | s. See Form 990, Part X | line 12 | |
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of val Cost or end-of-year m | |
| (1) Financial derivatives | 0 | | ··· |
| (2) Closely-held equity interests | 0 | | |
| (3) Other | | | |
| (A) | | | |
| (B) | | | |
| (C) | | | |
| (D) | | | |
| (E) | | | |
| (F) | <u> </u> | | |
| (G) (H) | | | |
| <u>\$!.9</u> (1) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) | 0 | A TABLE AND LOSS OF STREET | STEEL STREET |
| PantWill Investments—Program Relate | | | |
| (a) Description of investment type | (b) Book value | (c) Method of val | uation |
| (a) Description of investment type | (b) Book value | Cost or end-of-year n | |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| _ (4) | | | |
| (5) | | | |
| (6) | | | |
| | | | _ |
| (8) | | | |
| (9) | 1 | | |
| (10) Total (Column (b) must equal Form 990, Part X, col (B) line 13) | 0 | | · 法国际中华的 |
| Part X Other Assets. See Form 990, | | [2]、在11年1月1日中,大海市社會工作。這個學生的資本的對於學學的 | AND PARTY OF A SHIPPING THE PROPERTY OF |
| | a) Description | · | (b) Book value |
| (1) |) Description | | (b) Book value |
| (2) | 1 | | |
| (3) | | | |
| (4) | | | · |
| (5) | Ì | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| (10) | | | |
| Total. (Column (b) must equal Form 990, Part X, co | | <u> </u> | |
| Part X Other Liabilities. See Form 99 | | BOLES & LINES HOUSE LANGUE TO SELECT | |
| 1. (a) Description of liability | (b) Book value | | |
| (1) Federal income taxes | 0 | | |
| (2) | | | |
| (3) | <u> </u> | | |
| (4) | <u> </u> | 了。 「大學」, 「大學 「大學」, 「大學」, 「大學」, 「大學 「大學」, 「大學 「大學 「大學 「大學 「大學 「大學 「大學 「大學 | |
| <u>(5)</u> (6) | | | 可能性的 |
| (7) | | | |
| (8) | | | |
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| (10) | | | 以下,这个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的一个人的一 |
| (11) | | | |

2. FIN 48 (ASC 740) Footnote In Part XIII, 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) Check here if the text of the footnote has been provided in Part XIII

Total (Column (b) must equal Form 990, Part X, col (B) line 25)

| Part | Reconciliation of Revenue per Audited | l Financial Statemen | ts With Revenue per | Return | |
|---------|---|--------------------------------------|---------------------------|-------------------------|-----------------|
| 1 | Total revenue, gains, and other support per audited finar | | | 1 | 461,708 |
| 2 | Amounts included on line 1 but not on Form 990, Part VI | | | 1 | |
| а | Net unrealized gains on investments | <u> </u> | 2a | | |
| b | Donated services and use of facilities | | 2b | | |
| С | Recoveries of prior year grants | | 2c | | |
| d | Other (Describe in Part XIII) | Į | 2d 23,055 | 100 | |
| е | Add lines 2a through 2d | | | 2e | 23,055 |
| 3 | Subtract line 2e from line 1 | | | 3 | 438,653 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but no | t on line 1 | | 罗 | |
| а | Investment expenses not included on Form 990, Part VII | I, line 7b | 4a | 17 17 1888 1888 8 25 | |
| b | Other (Describe in Part XIII) | Į | 4b | | |
| С | Add lines 4a and 4b | | | 4c | 0 |
| 5 | Total revenue Add lines 3 and 4c. (This must equal Form | | | 5 | 438,653 |
| Part | XII Reconciliation of Expenses per Audite | | nts With Expenses p | er Return | |
| 1 | Total expenses and losses per audited financial stateme | | | 1 | 449,845 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX | , line 25 | 1 | | |
| а | Donated services and use of facilities | | 2a | 2. 1. | |
| b | Prior year adjustments | | 2b | | |
| С | Other losses | } | 2c | | |
| d | Other (Describe in Part XIII) | ĺ | 2d 23,055 | OC - Line | |
| е | Add lines 2a through 2d | | | 2e | 23,055 |
| 3 | Subtract line 2e from line 1 | ı | ı | 3 | 426,790 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not | | | | |
| а | Investment expenses not included on Form 990, Part VI | II, line 7b | 4a | | |
| b | Other (Describe in Part XIII) | | 4b | N. LEW | |
| С | Add lines 4a and 4b | | | 4c | 0 |
| 5 | Total expenses Add lines 3 and 4c. (This must equal Fo | orm 990, Part I, line 18) | | 5 | 426,790 |
| | Supplemental Information | | | | |
| - | plete this part to provide the descriptions required for Part | | | | nd 2b, |
| | V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part | XII, lines 2d and 4b. Also | complete this part to pro | vide any | |
| additi | ional information | | | | |
| Part : | XI Line 2d The audit report shows fundraising income and | expenses in gross amoi | ınts | | |
| | | . 21912111122001 2 0012111113 | | | |
| wher | eas the Form 990 nets the two amounts | | | | |
| Part 2 | XII Line 2d The audit report shows fundraising income and | d expenses in gross amo | unts | | |
| wher | eas the Form 990 nets the two amounts | | | | |
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| | | | | Schedule D | (Form 990) 2012 |

| Schedule D (Form | 990) 2012 | COLORADO COALITIC | ON OF LAND TRUSTS | 84-1355809 | Page 5 |
|--|-----------|---|-------------------|---|---------------|
| PartXIII | Supple | colorado coaliticemental Information (| (continued) | | |
| The state of the s | <u> </u> | | | | |
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SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the

Department of the Treasury Internal Revenue Service
Name of the organization

organization entered more than \$15,000 on Form 990-EZ, line 6a ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Inspection

OMB No 1545-0047

| Name of the organization | _ | | | | Employer identification number | | | |
|--|--|---|---|--------------------------------------|---|---|--|--|
| COLORADO COALITION OF LAND TRU | STS | | | | 84-1355809 | | | |
| Part I Fundraising Activities. 0 Form 990-EZ filers are no | Complete if to | the organiza o complete t | ation answert | ered "Yes" to Forr | n 990, Part IV, lin | e 17. | | |
| 1 Indicate whether the organization r | aised funds t | hrough any o | f the following | ng activities Check | all that apply | | | |
| a Mail solicitations | | e [| Solicitation o | of non-government g | rants | | | |
| b Internet and email solicitations | | f 🗍 | Solicitation of | of government grants | S | | | |
| c Phone solicitations | | == | | raising events | | | | |
| d In-person solicitations | [| 9 <u></u> | op 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | g = 1 - 1.1.c | | | | |
| | or oral agrae | omont with ar | w individual | (including officers of | firentare truetaes of | | | |
| key employees listed in Form 990, | Part VII) or e | reement with any individual (including officers, directors, trustees or rentity in connection with professional fundraising services? Yes \[\] Yes | | | | | | |
| b If "Yes," list the ten highest paid in | | | isers) pursu | ant to agreements ι | inder which the fund | draiser is | | |
| to be compensated at least \$5,000 | by the organ | nization | | | | | | |
| | | | | r | | | | |
| (i) Name and address of individual or entity (fundraiser) | (II) Activity | y custody | indraiser have or control of ributions? | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col (i) | (vi) Amount paid to (or retained by) organization | | |
| | | Yes | No | | | | | |
| 1 | | | | | | | | |
| • | | | | o | 0 | 0 | | |
| 2 | | | | 0 | 0 | 0 | | |
| 3 | | | | 0 | 0 | 0 | | |
| 4 | 1 - 1 | | | | | | | |
| 5 | | | | 0 | 0 | 0 | | |
| 6 | | | - | 0 | 0 | 0 | | |
| | | | | 0 | 0 | 0 | | |
| 7 | | | | 0 | | | | |
| 8 | | | - | | 0 | 0 | | |
| | | | | 0 | 0 | 0 | | |
| 9 | | | | o | . 0 | 0 | | |
| 10 | | | | | | | | |
| | | <u>_</u> , | | 0 | 0 | 0 | | |
| Takal | | | | 1 | | _ | | |
| Total 3 List all states in which the organiz | | | | 0 | 0 | 0 | | |
| 3 List all states in which the organization or licensing | ation is regist | ered or licens | ea to solicit | contributions or nas | been notified it is e | xempt from | | |
| registration of licensing | | | | | | | | |
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| | | more than \$15,000 of a events with gross rece | | | | ncome on Form 990-I | EZ, lines 1 and 6b List | | |
|-----------------|-----------|--|------------------------|------------------------|-------------------------|------------------------|--|--|--|
| | | events with gross rece | (a) Event #1 Social | | (b) Event #2 | (c) Other events NONE | (d) Total events (add col (a) through col (c)) | | |
| e e | | | (event | type) | (event type) | (total number) | | | |
| Revenue | 1 | Gross receipts | | 86,915 | | | 0 86,915 | | |
| <u>~</u> | 2 | Less Contributions Gross income (line 1 | <u> </u> | 72,506 | | | 0 72,506 | | |
| | | minus line 2) | | 14,409 | | | 0 14,409 | | |
| | 4 | Cash prizes | <u> </u> | | | | 0 0 | | |
| | 5 | Noncash prizes | | 18,707 | | _ | 0 18,707 | | |
| enses | 6 | Rent/facility costs | | | | | 0 0 | | |
| Direct Expenses | 7 | Food and beverages | | 4,231 | | | 0 4,231 | | |
| Direc | 8 | Entertainment | | | | | 0 0 | | |
| | 9 | Other direct expenses | | 117 | | | 0 117 | | |
| | 10 | | | | | > | (23,055) | | |
| | 11 111 | | the ergenize | dinn (d), and | ared "Vee" to Form 0 | 100 Part IV line 10 o | -8,646 | | |
| | шш | than \$15,000 on Form | • | 1 | sied les tolonnes | oo, rattiv, inte 19, o | reported more | | |
| | Τ- | tilaii ψ 10,000 011 1 0111 | | | (b) Pull tabs/instant | | (d) Total gaming (add | | |
| Ď | | | (a) Bingo | | bingo/progressive bingo | (c) Other gaming | col (a) through col (c)) | | |
| Revenue | | | 1 | | | } | | | |
| | 1 | Gross revenue | | <u> </u> | | | 0 | | |
| Ses | 2 | Cash prizes | | <u> </u> | | | 0 | | |
| Direct Expenses | 3 | Noncash prizes | | | <u> </u> | | 0 | | |
| Orrect | 4 | Rent/facility costs | - | | | | 0 | | |
| | 5 | Other direct expenses . | | | | | O PARTICLES STATES STATES IN THE STATE OF THE STATES OF TH | | |
| | 6 | Volunteer labor | Yes No | <u>%</u> | Yes % | Yes % | | | |
| | 7 | Direct expense summary Add | d lines 2 thro | ugh 5 in colui | mn (d) | • | (0) | | |
| _ | 8 | Net gaming income summary | Combine lir | ne 1, column | d, and line 7 | | 0 | | |
| ! | а | Enter the state(s) in which the or is the organization licensed to op If "No," explain | perate gamın | g activities in | each of these states? | | Yes No | | |
| 10 | | Were any of the organization's g If "Yes," explain | | | | - | | | |
| | · · - | | <u></u> | | | Scheo | lule G (Form 990 or 990-EZ) 2012 | | |

| Schedu | le G (Form 990 or 990-EZ) 2012 COLORADO COALIT | ION OF LAND TRUSTS | 84-1355809 Page 3 |
|--------------------|--|--|----------------------------------|
| 11 | Does the organization operate gaming activities | with nonmembers? | Yes No |
| 12 | | ee of a trust or a member of a partnership or other entity | Yes No |
| 13 a b 14 | Indicate the percentage of gaming activity opera The organization's facility An outside facility | prepares the organization's gaming/special events books | 13a % 13b % |
| | Name ► | | |
| | Address ► | | |
| 15a | revenue? | Ird party from whom the organization receives gaming | Yes No |
| b | amount of gaming revenue retained by the third | | • |
| С | If "Yes," enter name and address of the third pa | | |
| | | | |
| | Address • | | |
| 16 | Gaming manager information | | |
| | Name ▶ | | |
| | Gaming manager compensation > \$ | 0 | |
| | Description of services provided | | |
| | Director/officer Employee | Independent contractor | |
| 17 a b | retain the state gaming license? Enter the amount of distributions required unde | make charitable distributions from the gaming proceeds to | Yes No |
| Par | or spent in the organization's own exempt activity | lete this part to provide the explanations required by | Part L line 2b, columns |
| (Lett) | (III) and (v), and Part III, lines 9, 9b, | 10b, 15b, 15c, 16, and 17b, as applicable Also com | |
| | provide any additional information (| see instructions). | |
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| | | Sche | dule G (Form 990 or 990-EZ) 2012 |

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2012

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Employer identification number Name of the organization 84-1355809 COLORADO COALITION OF LAND TRUSTS Form 990 Part VI Section B Line 11a The 990 is reviewed by internal staff and emailed to the Board of Directors for their review prior to filing Form 990 Part VI Section B Line 12c All Board members are required to sign a conflict of interest statement at the first board meeting of each year A Board member is responsible for immediately identifying a potential conflict and is disqualified to participate in the matter on behalf of the Organization Form 990 Part VI Section B Line 15a There is a policy to provide an annual review of the Executive Director's work and salary This is to include both a self-evaluation and an evaluation by the Executive Committee of the Board The Organization does not keep comparability data or minutes for this process Form 990 Part VI Section C Line 19 All documents are kept on file at the Organization's office and are available to the general public upon request

(Rev January 2013)

Department of the Treasury

Application for Extension of Time To File an **Exempt Organization Return**

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

File a separate application for each return.

OMB No 1545-1709

| • | e filing for an Additional (Not Automatic) Ip lete Part II unless you have already be | 1 | | | _ | | • | 1 886 | 8 |
|---|---|-----------|---|--|---|--------------------------------|-----------------------|-----------------|---------------|
| a corporation 8868 to requ Return for Ti | iling (e-file). You can electronically file For in required to file Form 990-T), or an additi- lest an extension of time to file any of the ransfers Associated With Certain Persona For more details on the electronic filing of | fo I E | nal (not aut rms listed Benefit Cor | tomatic) 3-month extension of time ` in Part I or Part II with the exception ntracts, which must be sent to the IR | You can ele of Form 88 S in paper | ectronic 370, Inf format | cally form (see | file F ation | orm |
| Part I | Automatic 3-Month Extension of | T | ime. Onl | v submit original (no copies nee | ded). | | | | |
| | n required to file Form 990-T and requesti | _ | | | | mplete |) | | |
| Part I only | 1 | 1 | • | | | | | | ▶ □ |
| • | porations (including 1120-C filers), partnei | rsi | hips. REMI | Cs. and trusts must use Form 7004 | to request | an exte | ensi | on of | |
| | ncome tax returns | | , , - | | , | | | | |
| | | | | Enter filer's | s identifying | a numb | er. s | see in | structions |
| Type or | Name of exempt organization or other filer, s | see | e instruction | | Employer id | | | | |
| print | COLORADO COALITION OF LAND TRU | 1 | | | 84-135580 | 19 | | | |
| File by the | Number, street, and room or suite no. If a P.0 | | | structions | Social sec | | umbe | er (SS | N) |
| due date for | 1245 E COLFAX AVE , Room 203 | | , | | | | | . (55 | • • • |
| filing your return See | City, town or post office, state, and ZIP code | Ė | or a foreign | address, see instructions | | | | | |
| instructions | DENVER | | - | | СО | 80 | 218 | } | |
| Enter the Re | eturn code for the return that this application | on on | is for (file | a separate application for each retui | | | | | 01 |
| Application | 1 | Ì | Return | Application | | | | | Return |
| ls For | : | | Code | Is For | | | | | Code |
| Form 990 o | r Form 990-EZ | Ħ | 01 | Form 990-T (corporation) | | | | | 07 |
| Form 990-E | | i | 02 | Form 1041-A | | | | | 08 |
| Form 4720 | ·· | H | 03 | Form 4720 | | | | | 09 |
| Form 990-F | | | 04 | Form 5227 | | | | | 10 |
| | (sec 401(a) or 408(a) trust) | i | 05 | Form 6069 | | | | | 11 |
| | (trust other than above) | i I | 06 | Form 8870 | | | | | 12 |
| Telephon If the org | ss are in the care of ► Greg Yankee The No ► (303) 271-1577 The American American Street S | | | | | | - | lf +b | ▶ □ |
| | | i | | | | | $\overline{}$ | | |
| list with the | names and EINs of all members the exten | ່າຣາ | on is for | art of the group, check this box | | | Ш | and ——— | attach a |
| I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15/2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for ▶ X calendar year 2012 or | | | | | | | | | |
| Re- | tax year beginning | | | and ending | | | | | |
| 7 If 11b - | • | | | — | _ | | | | |
| | tax year entered in line 1 is for less than 1 hange in accounting period | | | | | al retur | 'n | | |
| | application is for Form 990-BL, 990-PF, 9 | 90 |)-T, 4720, d | or 6069, enter the tentative tax, less | any | |] | | _ |
| nonrefundable credits See instructions | | | | | | 3a | \$ | | 0 |
| | application is for Form 990-PF, 990-T, 472 | | | | | | | | |
| | ated tax payments made Include any prio | | | | | 3b | \$ | | 0 |
| | ice due. Subtract line 3b from line 3a Incl | | | | ısıng | | | | |
| | S (Electronic Federal Tax Payment Syster | | | | | 3c | | | 0 |
| Caution. If yo | ou are going to make an electronic fund withdr | rav | val with this | Form 8868, see Form 8453-EO and Fo | rm 8879-EO | for pay | ymer | <u>it instr</u> | uctions |