



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



Schedule of Contributors

2012

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF

Name of the organization	Employer identification number
Jeffco Open Space Foundation Inc	84 1471616
Organization type (check one)	

- | Filers of | Section |
|--------------------|---|
| Form 990 or 990-EZ | <input type="checkbox"/> 501(c)() (enter number) organization |
| | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation |
| | <input type="checkbox"/> 527 political organization |
| Form 990-PF | <input checked="" type="checkbox"/> 501(c)(3) exempt private foundation |
| | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| | <input type="checkbox"/> 501(c)(3) taxable private foundation |

Check if your organization is covered by the **General Rule** or a **Special Rule**

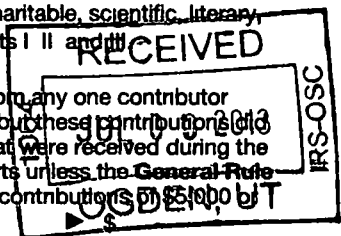
Note Only a section 501(c)(7) (8) or (10) organization can check boxes for both the General Rule and a Special Rule See instructions.

General Rule

- For an organization filing Form 990 990-EZ or 990-PF that received during the year \$5 000 or more (in money or property) from any one contributor Complete Parts I and II

Special Rules

- For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor during the year a contribution of the greater of (1) \$5 000 or (2) 2% of the amount on (i) Form 990 Part VIII line 1h or (ii) Form 990-EZ line 1 Complete Parts I and II
- For a section 501(c)(7) (8) or (10) organization filing Form 990 or 990-EZ that received from any one contributor during the year total contributions of more than \$1 000 for use *exclusively* for religious charitable scientific literary or educational purposes, or the prevention of cruelty to children or animals Complete Parts I II and III
- For a section 501(c)(7) (8) or (10) organization filing Form 990 or 990-EZ that received from any one contributor during the year contributions for use *exclusively* for religious charitable etc purposes but these contributions are not total to more than \$1 000 If this box is checked enter here the total contributions that were received during the year for an *exclusively* religious charitable etc purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious charitable etc contributions of \$5 000 or more during the year



Caution An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990 990-EZ or 990-PF) but it **must** answer "No" on Part IV line 2 of its Form 990 or check the box on line H of its Form 990 EZ or on Part I line 2 of its Form 990-PF to certify that it does not meet the filing requirements of Schedule B (Form 990 990-EZ or 990 PF)

Name of organization Jeffco Open Space Foundation Inc	Employer identification number 84 1471616
---	---

Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Constance Hauver 1037 Cottonwood Circle Golden CO 80401	\$ 5000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
2	Perter Song 10709 W Warren Dr Lakewood CO 80227	\$ 10000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
3	Greg Stevinson 17 Tamarade Drive Littleton CO 80127 3518	\$ 40000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	---	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)